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Dear Member

OVERVIEW AND SCRUTINY BOARD - WEDNESDAY, 6 MAY 2026

I am now able to enclose, for consideration at the Wednesday, 6 May 2026 meeting of the Overview and Scrutiny Board, the following reports that were unavailable when the agenda was printed.

Agenda No	Item	Page
6.	Special Educational Needs and Disabilities (SEND) Update Appendices 1 and 2	(Pages 3 - 54)

Yours sincerely

Governance Support
Clerk

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TORBAY
COUNCIL



Torbay Local Area Special Educational Needs and Disabilities (SEND) Priority Impact Plan

Version 6.0 25th September 2025

Page 3

Contents

Version control.....	3
Introduction from SEND Family Voice Torbay - the Torbay Parent Carer Forum	4
Purpose of the Local Area Priority Impact Plan	5
Our statement of commitment	6
Vision	8
Children and Young People’s Pledge	9
Coproduction Charter.....	10
Governance	11
Monitoring Progress.....	13
Evidencing Progress and Impact	13
Priority Impact Areas.....	14
Priority Impact Area 1	14
Area for Improvement 1	14
Area for Improvement 2	14
Priority Impact Area 2	19
Area for Improvement 3	23
Priority Impact Area 4.....	32
Areas for Improvement.....	37
Appendix 1 - Glossary	41

Version control

Date	Details	Updated by
16th July 2025	V1.0 – Shared at SLAIP	All Partnership
31st July 2025	V2.0 – Shared with SLAIP members	All Partnership
8th August 2025	V3.0 – post coproduction events part 1	AH/SH/JP/HB
18th August 2025	V4.0 – post coproduction of audit, data and impact	AH/SH/JP/HB/DF/MG
28th August 2025	V5.0 – post coproduction parent carer and SLAIP events	AH/HB/JP/SLAIP
25th September 2025	V5.0 – post coproduction review	AH/HB/JP/SLAIP

Page 5

Introduction from SEND Family Voice Torbay - the Torbay Parent Carer Forum

As Torbay's Parent Carer Forum, we recognise that the SEND Local Area Partnership still has significant work ahead to ensure families truly feel the impact of change. We fully support this short-term Priority Impact Plan (PIP), which aims to deliver meaningful improvements for children, young people, and families over the next 18 months.

While we are recognised as equal strategic partners, we acknowledge the limitations of our role in driving this plan forward. Nonetheless, we hope these improvements will help rebuild parental confidence in Torbay's SEND system.

We are committed to maintaining transparency and honesty with Parent Carers, working collaboratively with the SEND Area Partnership to ensure these principles are upheld across all aspects of our shared work.

We welcome a renewed commitment to co-production and co-design with children, young people, and Parent Carers across all aspects of this plan's delivery. We will continue to support the Local Area in implementing the PIP, with SEND Family Voice representing the Parent Carer perspective as a full strategic partner.

Together, we will build a future that truly values the uniqueness of our children and young people—creating a world of opportunity where they can follow their own pathways and thrive as adults.

Purpose of the Local Area Priority Impact Plan

Torbay's local area partnership for Special Educational Needs and Disabilities (SEND) was inspected by Ofsted and the Care Quality Commission in March 2025. Inspectors published the report on 25th June 2025, which outlined several areas for improvement, including four areas for priority action, as well as recognising the progress since the last inspection.

The partnership recognises the further urgent improvements that need to be made to ensure all children and young people in Torbay with SEND, and their families, receive the services they need and deserve.

A detailed Priority Impact Plan has been produced to address the key priority areas and wider areas for improvement, and the partnership are committed and determined to ensure improvements are not only delivered but sustained.

Page 7

This plan outlines how the local area partnership, which includes Torbay Council, local NHS organisations, educational leaders and other key partners, will work together to address each of the priority actions and areas for improvement.

Several immediate actions have already been carried out since the inspection. This has included completely remodelling our governance processes and arrangements (as seen on p11-12) which will now be chaired by an independent chair to ensure that we can make improvements at pace.

This plan has been coproduced along with colleagues from across our partnership. The Torbay parent carer forum, SEND Family Voice Torbay, have been leading our coproduction sessions with parents and carers to ensure that the ideas and feedback from our families are central to our plan for improvement and impact.

Our statement of commitment

The whole Local Area partnership is committed to continuing to work in a way where children, young people and parent and carer voices are listened to and valued. We will be strengthening this Statement of Commitment from 2022 through the coproduction elements of our Priority Impact Plan:

We commit to working together, in partnership with you, to improve the support you receive. We want you to have the very best opportunities now and in the future.

We will make sure you can have your say in what happens to you, in a way that suits you. We will value what you say.

We will use what you tell us to help us make plans and decisions, as well as in our day-to-day work.

We want to work with as many local people, groups, organisations and experts as possible to make our services the best they can be. We will do our best to not leave anyone out.

We know we might not get it right every time, but we will learn from our mistakes and improve as we go along.

Nancy Meehan

Torbay Council

Penny Smith

NHS Devon

Rebecca Box

SEND Family Voice Torbay

PRIORITY IMPACT AREAS

Area 1 - GOVERNANCE

Work faster and better together. Improve coproduction & relationships with parents & carers.

Area 2 - COMMISSIONING

Identify gaps where no support or provision exists & create support & services for these areas.

Area 3 – MULTI-AGENCY WORKING

Work together to improve support for those children without an EHCP.

Area 4 – WAITING TIMES & SUPPORT

Reduce waiting times for health assessments & improve the support available whilst waiting for health assessments.

Area 5 – PREPARATION FOR ADULTHOOD

We will improve processes for transitions from children's into adults' services so that young people are better supported across education, health & care.

Vision

Our vision for SEND in the local area is taken from our SEND Strategy, which was approved by the Integrated Care Board and Torbay Council’s Cabinet in 2023. This long-term vision for support and services in Torbay focused on the five areas parents and carers identified as meaning the most to them:

Torbay’s vision for SEND within the local area:

- **SEND is everybody’s business** – embedding the vision and values into the practice of everyone who works with children and families from 0-25.
 - **Identify and respond to needs early** – in ways that value lived experience and expertise and offer personalised care and support.
 - **Deliver in the right place at the right time** – always asking ‘so what difference are we making in the life of children or young people’?
- Our ambition is to create a prosperous and healthy Torbay. By focusing on this ambition, we are working towards ensuring that our communities thrive. Protecting children and giving them the best start in life is one of the key areas where we will target our actions as we strive to meet our ambition. As a whole system, we are committed to improving outcomes for children and families.
 - Our pledge is at the heart of providing high-quality services across our local area. This document has been created to describe the values and behaviours that our children, young people and families wish to experience in the delivery of SEND services and support across our local area. Regardless of role, employer or organisation, our pledge asks for everyone within the local area to work in the way that is important to our children, young people and families, turning this into the lived experience that we all deserve.
 - It has been designed to provide an easy reference and description of the values and behaviours required across our system.

Children and Young People's Pledge

The Torbay Pledge was created by a large group of children and young people in Torbay in 2022. When created, a series of workshops and events were rolled out across the partnership, schools and wider organisations to ensure that all agencies could fulfil what our children and young people asked for. This pledge is still relevant today and this action plan gives us the ideal opportunity to reinvigorate its use across Torbay.

Our Pledge to our children and young people

We will tell you the truth, we will listen and work with you to plan and explain what is possible and why things may need to change or happen.

We will listen carefully and ensure that we build a plan of support around your aspirations, hopes and goals.

We will treat you as the expert, build our professional knowledge of your needs and what is available to help you.

We will treat you and your family with respect.

We will listen carefully and ask you how you want to receive your support.

We will take time to find out lots about you, we will celebrate with you when things go well and help you when things are difficult.

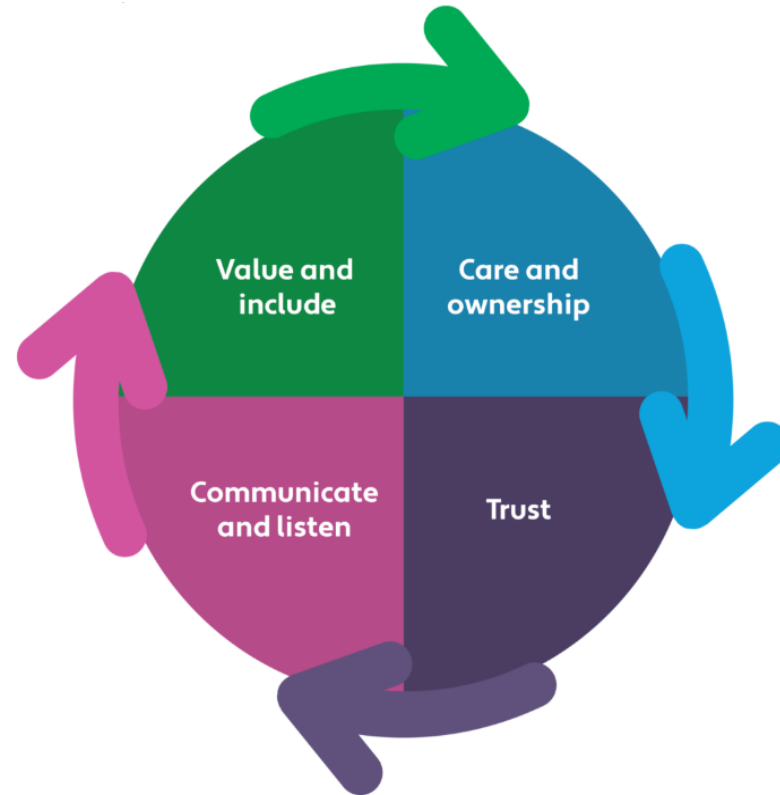
[Our Pledge to our children and young people - Family Hub](#)

Detailed version for each pledge here - [Our vision for SEND in the local area - Family Hub](#)

Coproduction Charter

The Torbay coproduction charter was created by a group of parents and carers alongside multi-agency professionals in 2022. This charter sets out how we will work together to improve SEND services:

- We are families, carers, children and young people and people who work with them.
- In designing our Charter for Co-production, local people of Torbay were asked what was important to them. Consideration was also given to the Four Cornerstones of Co-production (Genuine Partnership 2019).
- In line with the wider Torbay SEND strategy, the charter underpins our commitment to working together so that every child and young person has the very best opportunities now and in the future.
- This is only a start of a journey, and everyone has a part to play in influencing, implementing and embedding Co-production.
- Building Trust will be a first step and 'We will do what we say we are going to do'.
- Privacy, confidentiality and choice is respected in Co-production.



You can read more about the charter here – [Charter for Co-production - Family Hub](#)

The Priority Impact Plan below shows how we will be strengthening this approach towards Coproduction.

Governance

A refreshed SEND Local Area Improvement Partnership (SLAIP) Board had been established in January 2025 to provide strategic leadership, assurance and oversight for the priority actions; this has been enhanced further following the inspection. The board will use its influence and accountabilities to set a clear vision, champion change and innovation, and drive improvements across the Local Area, and will be chaired independently.

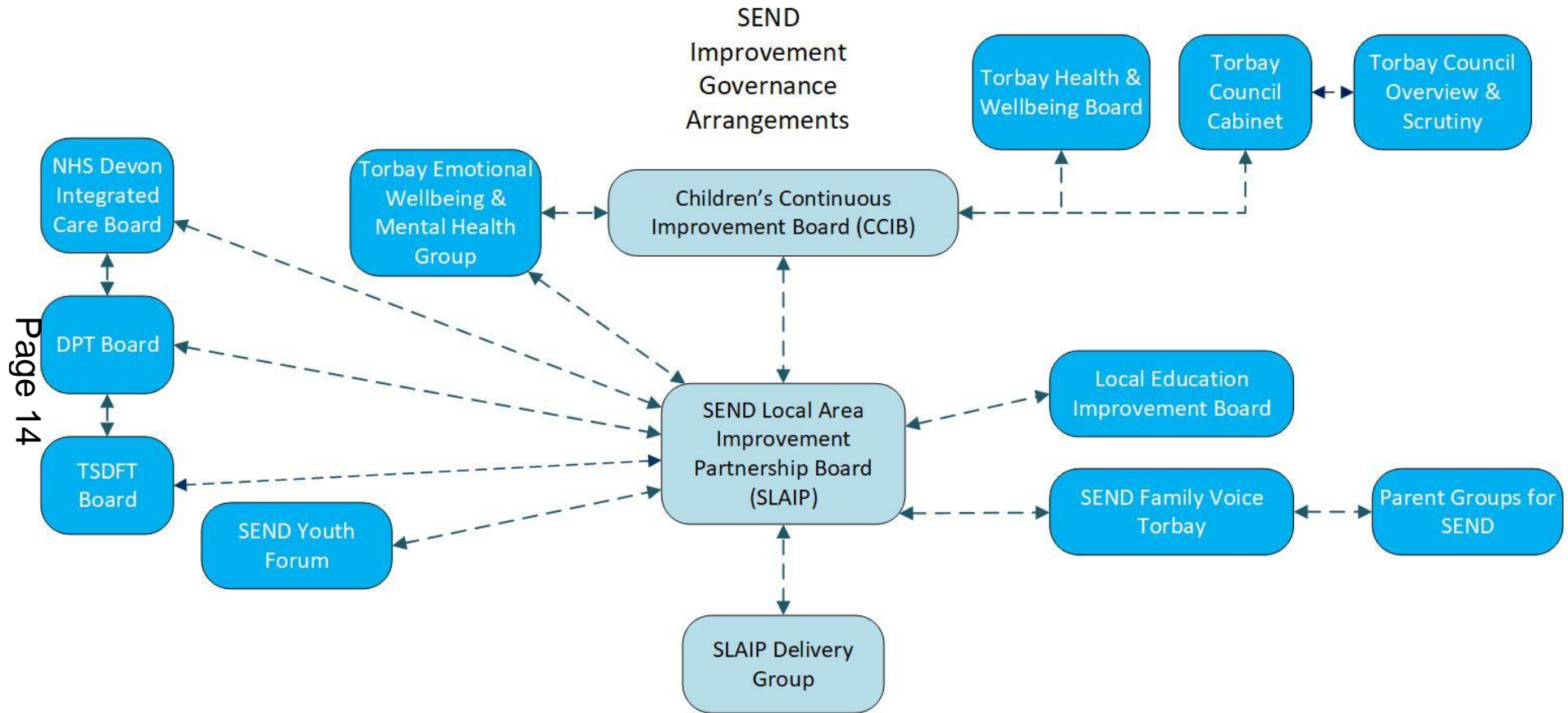
The Board is committed to ensuring the voice and lived experience of children, young people and their families shape its work. Direct input from children, young people and families feeds into Board discussions. It will champion extending the participation reach and engagement.

The SLAIP Board sits within Torbay and One Devon's broader governance for children, young people and families. The Board will regularly report to the Children's Continuous Improvement Board (CCIB), not only to seek constructive challenge and support, but to also ensure the activity and impact as a programme is fully integrated into Torbay's wider strategic vision and governance for children, young people and families. The CCIB has senior representatives from across education, health and care as well as political and corporate representation which ensures there are clear routes for dissemination and alignment with wider priorities. An established mechanism for clear and constructive feedback to SLAIP is essential.

The board is accountable to Anne-Marie Bond, Chief Executive of Torbay Council and Steve Moore, Chief Executive of One Devon Integrated Care Board. The Independent Chair will provide updates to both the Integrated Care Board, Overview and Scrutiny and Cabinet. SEND Family Voice Torbay gather information from other parent groups and represent their voices to the SLAIP. There are also links to the Local Education Board so that school leaders can be fully engaged in this improvement work. A detailed performance report will be shared at each SLAIP and disseminated across the partnership. A full risk log will be held by the Board with the ability to escalate risks or issues, to the appropriate body, at any time. Expert Advisors from the Department for Education and NHS England will also provide support to this Board.

A pre/post SLAIP group meets to quickly allocate tasks and actions, reducing drift and delay. This group of colleagues delivering the improvements, report directly to the board and is focused firmly on delivering the key actions as set out in the Priority Impact Plan, ensuring pace and rigour towards each of the key milestones. Members of the group, across education, health and care, have been identified based upon the scope of the programme and the roles and responsibilities required to support delivery.

SEND Improvement Governance



Monitoring Progress

There will be 6-weekly monitoring of progress against the milestones and success measures as outlined in the Priority Impact Plan. The SLAIP Delivery Group Co-chairs and Priority Area Leads will be held directly accountable for the areas they lead and will provide 6-weekly updates to the board, highlighting progress and escalating any risks or issues that may impact on the timely and effective delivery of the plan. Through the establishment of a shared partnership data dashboard and refreshed quality assurance and improvement framework, the Board will rigorously monitor outcomes and seek evidence of meaningful impact on the lives of Torbay's children and young people.

DfE and NHS England Regional leads will meet with senior representatives of the local area every 6 months to review progress against the priority impact plan. Between these stocktake meetings, DfE and NHS England Regional leads will meet with the local area to discuss progress against each priority area in detail, in a deep dive meeting. They'll thoroughly review the available evidence and explore progress against each area to work out the next steps. The Partnership will also receive support from other organisations such as the Local Government Association.

Between formal stocktakes and priority area deep dives, and until the local area's Ofsted and CQC monitoring visit, DfE officials and NHS England Region will keep regular close contact with local area officials to engage with and support the local area's improvement process.

Page 15

Evidencing Progress and Impact

Throughout the impact plan the Independent Chair will hold the Board to account by the following measures:

- Audit** • A combination of regular and 'deep dive' audits will ensure progress is being made.
- Voice** • Our Young People and SEND Family Voice Torbay will report back to every Local Area Partnership Board meeting.
- Data** • A Data Dashboard will be created with each measure in our plan. This will be monitored each month.
- DfE** • The Department for Education will monitor the progress towards our plan on five 'deep dive' visits over the period of this plan.

Priority Impact Areas

Priority Impact Area 1

The local area partnership must work together to urgently strengthen the systems that support partners' collaborative work at all levels. This includes the development and use of more effective governance arrangements to ensure improvements are made to SEND services in a timely manner.

Area for Improvement 1

Leaders across the partnership should consider ways to further improve and embed the way that co-production is used across the partnership

Area for Improvement 2

The local area partnership should continue to build on the work that has already been started in improving working relationships with parents and carers

Priority Lead: Nancy Meehan, Director of Children's Services

Desired outcome for children & young people	Actions	Named Lead(s)	Impact	By When	Measures
1.1 Robust and timely governance processes mean families see the impact of improvement work.	<p>1.1a Governance</p> <p>Review and update Governance arrangements to ensure an effective partnership for SEND improvement is established, which understands needs, has robust oversight and monitoring and includes clear escalation routes.</p> <p>Demonstrate effective Partnership relationships and cohesion to enable SEND improvements in this plan to be fulfilled.</p>	AH - Independent chair – SLAIP Board	<p>An effective partnership and robust governance will ensure the Partnership is on track to deliver the Priority Impact Areas</p> <p>The SLAIP board is recognised as the key place where strategic, system-wide issues are considered and decisions taken, with clear links to other key governance.</p> <p>Six monthly stocktakes and deep dives into the priority actions undertaken by the DfE and NHSE report positively on the progress made in responding to the recommendations in the SEND inspection report</p> <p>Feedback from parent groups /PCF is positive on the progress made in responding to the to the recommendations in the SEND inspection report. Parents also comment on the improved</p>	6-weekly	Evidence of scrutiny, progress and delivery of actions – board minutes and action log
		NM - Director for Children's Services		6-mthly from Dec 25.	Progress reporting and deep dive outcomes
		SS, Director of Women and Children's Improvement, NHS Devon ICB		6-weekly	Percentage of actions completed on time

	Strengthen links and formal reporting across wider related boards and forums.		<p>communication available from the board</p> <p>By January 2027 the partnership will be able to provide evidence of improvements in the way services and education establishments are collaborating to review and development services and identify and meet the needs of children and young people with SEND</p> <p>Senior leaders across the partnership are fully sighted on progress and performance through highlight reporting from the Independent Chair.</p>	<p>Jan 27</p> <p>Quarterly</p>	<p>SFVT feedback to SLAIP 6 weekly.</p> <p>Quarterly feedback to SLAIP from SFVT specifically on improved communications.</p> <p>Collaboration portfolio of development of services.</p> <p>Quarterly progress reports</p>
	<p>1.1b Performance and Quality Assurance</p> <p>Establish robust and transparent improvement and assurance measures to ensure shared understanding of progress and impact between families and partners</p> <p>Develop an enhanced data dashboard to improve the current SEND data dashboard arrangements which is produced from across the partnership. Outcome and impact measurements will be clear and directly related to the Priority Impact Plan.</p> <p>Revise the Quality Assurance Framework to ensure a multi-agency approach to QA is embedded within the SEND partnership and driving continuous improvement.</p>	<p>MG -Head of Business Intelligence</p> <p>RS - Divisional Director for Learning and Partnerships</p> <p>SS, Director of Women and Children's Improvement, NHS Devon ICB</p>	<p>Mature and Integrated performance management information from across the partnership informs decisions and actions so that the Partnership can be sure it is making progress.</p> <p>The partnership board will have a clear oversight of progress made in addressing key priorities set out in the PIP and relevant SEND strategies.</p> <p>The partnership will have better information to act upon, enabling it to take prompter action in addressing current or emerging issues.</p> <p>This will enable robust and transparent accountability for progress and impact to ensure mutual understanding between partners agencies about what performance against each indicator means and who is responsible, so that trends can be quickly explored and improvements made.</p> <p>Spotlights on "Insight and Intelligence" themes will bring together learning on data and audit in one place for the partnership decision makers to act quickly and more collaboratively. The Partnership's insight and intelligence adds value to work underway in individual organisations and does not seek to duplicate it.</p> <p>Improved Quality Assurance will target the key areas for improvement so that the local area partnership has a clear understanding of the system's performance.</p>	<p>Oct 25, then 6-weekly</p> <p>Oct 25, then 6-weekly</p> <p>Oct 25, then Quarterly</p> <p>Sept 25 then 6-weekly</p> <p>Oct 25, then 6-weekly</p>	<p>SLAIP Data dashboard and other related progress data</p> <p>Quarterly QA reports on the defined areas of QA and deep dive work undertaken to the SLAIP.</p>

	<p>1.1c Delivery and Accountability</p> <p>Refresh and embed an enhanced improvement cycle and related reporting structures to take shared responsibility across Social Care, Health and Education to address the areas of improvement identified within the SEND Inspection report.</p>	<p>Independent Chair – SLAIP Board – AH</p>	<p>Improvement will move at a faster pace, ensuring that the Partnership can demonstrate sufficient progress and impact within an eighteen-month period.</p> <p>The Independent Chair holds Board members to account which ensures effective oversight and challenge on the delivery of the Priority Impact Areas.</p> <p>A pre and post SLAIP delivery group will seek to quickly co-ordinate delivery of the actions and decisions from the SLAIP, improving the pace and multi-agency collaboration of improvement priorities.</p> <p>Detailed delivery plans which are already in existence will be used so that each agency can focus on the areas of the priority actions relevant to their work.</p> <p>Workstream leaders are effectively held to account regarding the delivery of actions and quality of outcomes. Challenges or slippages will be regularly reported, enabling leaders to take urgent action.</p>	<p>6-weekly</p>	<p>PIP Progress tracker will show areas of improvement are data tracked and showing gradual improvement at 6 weekly intervals.</p>
<p>1.2</p> <p>Communication with children, young people and their families is transparent, authentic and timely. The Partnership workforce is clearly communicated with, so everyone works together on the key priorities for Torbay.</p>	<p>1.2a Communication with Families</p> <p>The local area partnership will review the mechanisms in place used to communicate and strengthen working relationships with families and co-produce an agreed approach</p> <p>An enhanced joint Communications strategy for SEND will provide a framework for communicating and strengthening working relationships with our service users, stakeholders and staff in a clear and accessible way. The Strategy will include:</p> <ul style="list-style-type: none"> the establishment of SEND Partnership ‘pop-ups’ in communities attended by parents/carers and leaders from the SEND Partnership; the establishment of mechanisms for parents and carers to hold the local area to account; and Mapping of existing services and ‘system’ is updated on the Local Offer website so that information is clear. 	<p>Divisional Director Corporate Service - KS</p> <p>Communications Team, ICB</p>	<p>Families report the partnership has strengthened and they have a clearer understanding of what support, provision and advice is available</p> <p>The ‘system’ is clearer for families and support mechanisms shared across the wider SEND community to ensure all families are aware and have access.</p> <p>Families report improved relationship-based approaches that are respectful and responsive across the partnership. Information to families is consistent and transparent to (re)build trust and set the ambition of a team approach across partners and stakeholders.</p> <p>Through a co-production approach with CYP and families, information, support, advice and guidance will effectively reach more families with the number of families missing out or whose voices are not represented being reduced. A continuous feedback loop is facilitated by the Parent Carer Forum to ensure the communications are accessible.</p> <p>Through regular input and feedback from CYP and families to the SLAIP Board – including from SEND Family Voice Torbay and participation routes for CYP e.g. SEND Youth Forum, leaders and partners understand Children, Young People & Families lived experience better and use this to inform and enrich their decision-making, in turn improving services so that they can better meet need.</p>	<p>By Oct 25. Monthly</p> <p>Strategy to SLAIP Nov25, then monitored 6 weekly.</p> <p>6 weekly Oversight at SLAIP</p> <p>Nov 25</p> <p>6-weekly</p>	<p>Statistics on numbers and reach of communications out from a baseline judgement.</p> <p>Qualitative data from Engagement events which are held quarterly.</p> <p>6 weekly feedback from PCF.</p>

			Leaders across the SEND partnership will be accountable for the progress and impact of their actions.	6-weekly	
	<p>1.2b Communication across the SEND Partnership</p> <p>An enhanced Joint Communications Strategy for SEND will provide a framework for communicating with our service users, stakeholders and staff in a clear and accessible way. The Strategy will include:</p> <ul style="list-style-type: none"> A workforce communications plan which embeds opportunities for the feedback of family views. 	<p>Divisional Director Corporate Service - KS</p> <p>Communications Team, ICB</p>	<p>A Partnership SEND Communication Strategy ensures that all members of the partnership workforce are aware of the key developments and work collaboratively towards these.</p> <p>The wider SEND partnership is strengthened around the key improvement priorities enabling all colleagues to work towards the same priorities and goals.</p> <p>Feedback from children and young people and their families informs and enriches the way in which all colleagues work, in turn improving services so that they can better meet need.</p> <p>The termly SEND Communications Forum is an effective mechanism for ensuring that the Joint Communications Strategy is implemented.</p>	<p>Monthly, reporting to SLAIP quarterly.</p> <p>Termly</p>	<p>Quarterly report to SLAIP on partnership communications</p>
<p>1.3 Co-production</p> <p>CYP and their families will see and feel the difference their voice and feedback make within the Torbay SEND system</p>	<p>1.3a Co-production</p> <p>Critical review of current co-production arrangements to be taken with CYP and their families – identifying and agreeing areas of strength to sustain and areas to develop from the Torbay Coproduction Charter.</p> <p>Toolkit for co-design to be accessible across the partnership with training available</p>	<p>RB, Chair of the PCF, RS – Divisional Director for Learning and Partnerships, JP – Clinical Lead for SEND, ICB.</p>	<p>Children, young people and their families report that their voices and feedback is heard and used.</p> <p>SEND Pledge Action plan to ensure children and young people pledge has a reach which grows quickly and that this pledge becomes embedded across the partnership.</p> <p>The Torbay Coproduction Charter is re-launched to all partners and becomes embedded as a usual way of coproducing improvement working.</p> <p>Through a strengthened Parent Carer Forum and opportunities for wider collaboration, the voice of families and their lived experience is collected and used effectively across the local area partnership, including input into training and development for parents/carers and professionals for example ...</p> <ul style="list-style-type: none"> In the first six months children, young people and their families can expect to coproduce developments in the Graduated Response Review. In the first 12 months they can expect to coproduce the commissioning of new and enhanced holistic support services in schools. 	<p>Nov25</p> <p>Jan25</p> <p>Monitored 6 weekly at SLAIP, by Dec26.</p> <p>Coproduced improvement at 6/12/18 months to the SLAIP.</p>	<p>Coproduction charter usage data.</p> <p>PCF report to SLAIP 6 weekly, quarterly coproduction report.</p>

We will know we have met our desired outcomes and made an impact on this priority area when:

- A robust and transparent governance structure actively oversees Torbay's SEND system ensuring the delivery of effective continuous improvement
- Collaborative system leadership and strategic planning ensure the SEND partnership is effective in delivering and sustaining an improved system for children, young people and families
- Feedback shows our communications to families is clear and authentic. There are effective ways of listening to young people and their families. This leads to improved trust and parental confidence in the partnership's ability to meet needs.
- Partnership Communications Reports show that a partnership approach is now established for the whole partnership workforce.
- Coproduction and co-design are embedded across the partnership and used effectively to enhance the quality of Torbay's SEND system.

Priority Impact Area 2

The local area partnership must strengthen its commissioning arrangements to meet the identified needs of children and young people with SEND in Torbay. This includes strengthening the way that the joint strategic needs assessment is used to accurately identify and effectively manage risks when service gaps are identified across the partnership.

Priority Lead: Lincoln Sargeant, Director of Public Health

Desired outcome for children & young people	Actions	Named Lead(s)	Impact	By When	Measures
2.1 SEND Needs Analysis Services in Torbay match identified needs of children and young people with SEND.	<p>2.1a – a refreshed JSNA provides clear information on SEND Needs in Torbay</p> <p>Joint Strategic Needs Assessment is reviewed, refreshed and updated to give an up-to-date picture of SEND needs in Torbay. This is published, explained and understood to Torbay stakeholders.</p>	<p>Public Health Analyst - SB – TC</p> <p>Business Intelligence – TC, MG.</p> <p>Leading local area partnership team</p> <p>SS, Director of Women & Children's Improvement NHS Devon ICB</p>	<p>Partners will have a detailed and clear picture of SEND needs in Torbay through the JSNA. This will improve accurate forecasting and commissioning of services from across the partnership.</p> <p>Educational provision needs will be better understood through the LA SEND Needs Analysis. This additional deep dive into educational data, needs and placements supports more granular detail for educational provision commissioning decisions. Educational provision will be reviewed annually to ensure best use of resources.</p>	<p>Sep 25</p> <p>Sep 25</p>	<p>JSNA is updated with latest statistical information to give a clear picture of need.</p> <p>SEND Needs Analysis</p>
	<p>2.1b – Information on SEND needs in Torbay is shared.</p> <p>A regular Insight and Intelligence Forum is established across the whole Local Area Partnership to communicate the information from the JSNA and other sources to enable better data sharing and understanding of SEND Needs in Torbay.</p> <p>Further development and embedding of data dashboard capabilities (including Power Bi) within the Council and across the partnership so that data can be shared and understood as a suite of tools alongside the JSNA.</p>	<p>Director of Public Health - LS – & Torbay SEND Partnership</p> <p>Business Intelligence Teams TC & ICB.</p> <p>MG – TC</p> <p>SE – TC</p>	<p>There is joint understanding of need: Torbay SEND needs are clearly communicated so that key professional stakeholders have a clear understanding of needs prevalent in Torbay. All commissioning stakeholders have joint oversight, data sharing and joint actions to fill gaps in commissioning with this Insight and Intelligence forum providing the vehicle for collaboration.</p> <p>Data sharing is integrated and shared at a regular termly forum with all stakeholders.</p>	<p>Dec 25</p> <p>Oct 25, then quarterly.</p>	<p>JSNA is published on the Local Offer website (summary version).</p> <p>Evidence of commissioning according to needs shared.</p>

	<p>A regular “Insights and Intelligence” Forum to establish sharing of new JSNA and other key pieces of data. Terms of Reference establish the need to continue to share data across the partnership, including responsibilities to use the data to map existing services and jointly commission services in the gaps identified.</p>	<p>Business Intelligence Team ICB</p> <p>EC, ASC</p>	<p>A plan for commissioning Service Area gaps is produced: A regular Partnership forum is embedded to share and act on data (“Children’s” is a focus quarterly) to ensure partnership approach to identify gaps in need and therefore service provision. The partnership can demonstrate how the information from the JSNA enables priority gaps in commissioning become filled so that needs are supported across the partnership. Action is taken to commission and/or jointly commission priority service areas gaps by Dec 2027. (see 2.2).</p>	<p>Jan 25, then termly thereafter</p> <p>3 per year.</p>	<p>Evidence of Insight and Intelligence Forums and plans to commission gaps.</p> <p>Evidence of commissioning gaps (see 2.2)</p>
<p>2.2 – Priority Services and Support are effectively commissioned across the partnership to ensure that children and young people’s needs are met.</p>	<p>2.2a Educational Provision for Autism New local offers for Enhanced Resource Provisions (ERP) for Autistic children are clearly communicated on the Local Offer Website</p> <p>ERPs for Autistic children ensure a high-quality offer for more than 50 pupils so that their needs are met effectively by the partnership.</p> <p>Services offering support to Autistic children and their families will work with the ERP’s and ensure the wider offer of support is clearly communicated.</p> <p>At Least 25 new Special school places for Autistic Spectrum Disorder are commissioned from Sep 26 for the most complex needs.</p> <p>A Local Area ‘map’ of how families can access advice and support services for neurodiversity is clearly communicated through the Local Offer so that families know what is available to them.</p>	<p>Head of SEND, HB - TC</p>	<p>Complex Autistic Spectrum Disorder will be well met - Pupils placed in Autistic Spectrum Disorder ERPs attend well, are included and achieve outcomes.</p> <p>Parents report they feel the ERP offer meets needs well.</p> <p>At least 25 pupils receive support in a specialist Autistic Spectrum Disorder placement from Sep26. These places meet complex Autistic Spectrum Disorder and SEMH needs effectively for those where mainstream or ERP provision cannot meet need. Outcome and attendance measures are starting to see a difference in this newly commissioned provision type.</p>	<p>Termly Contract Management</p> <p>Commission by Sep 26.</p>	<p>Data dashboard.</p> <p>Survey ERP parents.</p> <p>Data Dashboard for this cohort – initial data from starting points. Parent voice.</p> <p>PCF and SENDIASS feedback tells us the new Local Offer information is updated and understood.</p>
	<p>2.2b Outreach Services For children and young people with Autism and other neurodiverse needs without an EHCP or diagnosis new outreach services, which focus on supporting inclusion in mainstream primary and secondary schools, are commissioned to increase capacity and support at our primary and secondary mainstream schools. (see 3.1)</p>	<p>Director of Education, HB - TC</p>	<p>Autistic Spectrum Disorder Needs at SEN support are supported: Attendance for Neurodiversity needs improves in schools where support has been put in place.</p> <p>Schools report that they feel more supported to deliver SEN Support provision for neurodiversity. Enhanced support is aligned to other initiatives (such as the PiNs project) in some school settings so this becomes a Partnership approach to meeting need.</p>	<p>By July 2026.</p> <p>Jan/Mar/July 26 Reviews.</p> <p>July 26</p>	<p>Attendance data – 25/26 year end.</p> <p>Audit and Survey from individual outreach services.</p>

		Parents and carers report that they feel more confidence at neurodiverse needs being met at mainstream schools. Requests for EHC Needs Assessments for Neurodiversity decline.	Tracked monthly. By July 25 (compared to previous yrs).	Survey/Voice from enhanced outreach evaluations EHC Needs Assessment Data.
2.2c SLCN Support in Primary Schools SLCN needs are better identified and supported through the jointly commissioned work via the locality pilot for SLCN.	JS, Head of QFT, TC & Lead SALT TM - SD	SLCN needs in primary schools are supported: through Linked Therapist Model there will be earlier identification and offer of support to meet the SLCN needs across the locality pilot schools and wider school settings. School staff report they feel more confident to meet needs. Education Services, Educational Psychology teams, Early Years, Family Hubs and Social Care teams will effectively trial and pilot locality working to support SLCN Sept to Dec 2025. Once evaluated the amended model, if agreed, will then be extended to continue to meet need in SLCN and be expanded to support these needs further.	From Sep 25. Sep-Dec 25 Extended model from Jan26.	Speech Therapist data via questionnaires and feedback sessions with schools/parents on a termly basis. Pilot outcome data and measures will show a favourable evaluation on the pilot.
2.2d Parent Support for Neurodiversity Neurodiversity Parent Programmes will continue to be commissioned jointly to meet needs of parents. The service will be embedded, expanded and tailored to meet needs that parents and carers identify as a priority.	ICB, CFHD & TC partners.	Parents and carers report feeling supported through the Torbay Neurodiversity Parent Programme (TNPP); Parent Programmes continue to be hosted and enhanced to meet parent requirements by parent carer forum. Parents and Carers feedback that this service makes the difference in supporting their child with Neurodiversity needs.	From Sep 25 ongoing. Termly 25/26.	Parent and carer evaluation data – sent to the SLAIP termly (Dec and March) and as an annual report (July 26).
2.2e Education Other than at School Programme Alternate Provision is effectively commissioned in a new “EOTAS” programme which ensures high standards and quality of provision is delivered effectively for this cohort of young people.	Head of SEND, JL - TC	Children and young people successfully transition to the new EOTAS pathway. Outcomes from young people, including attendance, show improvement with approved providers delivering quality provision and being robustly managed. The numbers of EOTAS CYP reduce as commissioning gaps are filled (2.1b) Outcomes data in the long term improves. - Contract Monitoring shows a high-quality AP offer is delivered which in turn impacts outcomes for young people.	From Sep 26, then termly ongoing. Termly from Dec 25.	Attendance for EOTAS via half termly contract management. Outcomes for EOTAS, via half termly contract management. Outcome data Aug 26 compared against Aug 25.
2.2f Learning Disability Pathway The Learning Disability Pathway will be confirmed and clearly communicated to all partners and stakeholders.	SS, Director of Women and Children's Improvement, NHS Devon ICB	Families will report that they were able to access timely advice and support from the Specialist Learning Disability team, including the offer of a diagnostic assessment when appropriate. Data will evidence consistently high uptake of Annual Health checks with their GP.	Feb 2026	LD Service Pilot Report. Sibling Group Pilot Report. Annual Health Check performance measures – reported nationally.

	<p>2.2g Emotional Wellbeing and Mental Health Services To embed the commissioned evidence-based services that provide accessible support and intervention in line with the iThrive model of support.</p>	<p>SS, Director of Women and Children's Improvement, NHS Devon ICB</p>	<p>Families will report that they were able to access timely advice and support from the right service at the right time.</p> <p>Children, young people and families report being listened to and that they are have the skills to manage their, or their child's mental health concerns.</p>	<p>March 2026</p>	<p>Service feedback results.</p> <p>Performance monitoring.</p>
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We will know we have met our desired outcomes and made an impact on this priority area when:

- Torbay SEND needs are clearly communicated so that key professional stakeholders have a clear understanding of needs prevalent in Torbay.
- Data sharing is integrated and shared at a regular termly forum with all stakeholders.
- Priority Gaps in commissioning become filled so that needs are supported across the partnership. Data, audit and voice evidence show this is making a difference:
 - New families will be supported by their child or young person being able to attend a local Autistic Spectrum Disorder specialist placement, which will be newly commissioned.
 - Parents will know what provision is available for Autistic Spectrum Disorder as the provisions will be clearly communicated to parents.
 - More children and young people with Autistic Spectrum Disorder will have needs met in mainstream settings because outreach will be enhanced.
 - Parent support for Neurodiversity will continue to be delivered and grow.
 - SLCN support for primary schools will be enhanced.
 - There is clarity regarding the Learning Disability Pathway and families are able to access this information easily.
 - Children, young people and their families are able to access a range of emotional wellbeing and mental health help, advice and support when they need it, and that schools are also supported to help young people with their emotional wellbeing and mental health.

Priority Impact Area 3

The local area partnership, including school leaders, must strengthen its multi-agency working to ensure that children and young people's needs are identified, assessed and met in a more efficient and timely manner through cohesive pathways across health, education and social care. This includes the following:

- The effective use of the graduated response (Lead – Head of QFT, Torbay Council)
- EHC plans accurately reflecting need, next steps and provision for children and young people (Lead – Head of SEND, Torbay Council)
- Reducing levels of suspension and exclusion from secondary schools. (Lead – Head of Vulnerable Pupils, Torbay Council)

Area for Improvement 3

Leaders across the partnership should improve oversight of the impact of its support for children and young people receiving SEN support who are not accessing full-time education, for example those who are placed in unregistered AP

Desired outcome for children & young people	Actions	Named Lead(s)	Impact	By When	Measures
3.1 Children and young people's needs are promptly identified, assessed and met through a robust Graduated Response to all children and young people with SEND at both SEN Support and for those with EHCPs.	3.1a – A review of the Graduated Response will strengthen multi-agency working so that it can be effectively embedded to meet children and young people's needs.	Head of Service QFT - TC JS SS, Director of Women and Children's Improvement, NHS Devon ICB	There is an understanding of the effectiveness of the current Graduated Response and how it is improved: <ul style="list-style-type: none"> • Families, education, health and care will review the Graduated Response toolkits alongside young people, parents and carers, to ensure they are meeting needs and provide support in known areas of weakness and gaps (from priority area 2) and that they continue to be fit for purpose. • Use capital funding to support SEND delivery in priority areas; this should focus on support for inclusion in mainstream schools but may also include capital spend for priority needs in specialist provision. • Bring a 'Partnership Gap Analysis' to SLAIP by Dec 25 which sets out a priority implementation plan, working with commissioning (PA2), the learning academy and health commissioners to offer an enhanced training and support programme for the priority gaps identified in the Graduated Response delivery, ensuring family and school voices are central to the targeted areas identified. 	Review – Dec 25 From Sep 25 until Jul 26 Implement recommendations by April 26. Continued review quarterly.	Review of Graduated Response report and subsequent implementation measures. Capital spend analysis report. Training offer – ongoing data on take up & impact.

<p>3.1b – Create a new Education Strategy which focuses on some key challenges for all children, with a fine focus on inclusivity of schools in every respect.</p>	<p>Divisional Director of Education - HB – TC and Chair of the LEIB, TC</p>	<p>An Education Strategy ensures collaboration towards shared priorities for education across Torbay</p> <ul style="list-style-type: none"> • Creation of Education Strategy for Torbay. • Fine Focus on key areas of the SEND improvement areas to ensure these are strongly represented in the plan. Use this strategy to engage and collaborate with school leaders as to key barriers and support required. • Launch and publicise plan, continued collaboration with school leaders through Local Education & Inclusion Board to monitor and account for progress towards this strategy so a whole area approach to Inclusion is fostered. • Reporting back to the SLAIP on key areas in this strategy for SEND bi-annually. Link the SEND Strategy and other strategies to this work to give school leaders a clear direction for the SEND agenda in Torbay. 	<p>Dec 25 Dec 25 Jan 26 Quarterly. Bi-annually (Jun/Dec 26)</p>	<p>Key measures in the strategy are fulfilled and reported to SLAIP in bi-annual reports.</p>
<p>3.1c - The Attendance Improvement Team will work up the key challenges and actions which might shift impact quickly. These actions will be operationally included in the school attendance support meetings and integrated into the key work on the Education Strategy and through the RISE work (see 3.1b and 3.1c).</p>	<p>Head of Vulnerable Pupils, DH</p>	<p>Attendance for children and young people with SEND continues to improve:</p> <ul style="list-style-type: none"> • School Attendance support meetings for all schools will focus on children with a part time timetable and their reintegration planning • The Attendance Power BI will show risk of poor attendance before a part timetable is considered in support of schools. 	<p>25/26 academic year</p>	<p>Monthly monitoring of attendance and data – reporting to SLAIP by exception</p>
<p>3.1d - The DfE RISE universal support in Torbay will work closely to support the SEND agenda through pupil movement/ attendance, behaviour and enhanced transition support.</p>	<p>Divisional Director of Education - HB - TC</p>	<p>The RISE project work improves transition arrangements for children and young people upon phase transfer, then positively contributing to future attendance for this cohort.</p> <ul style="list-style-type: none"> • RISE Plan for Attendance will align with the focus in the Education Strategy and have an area wide focus on attendance for all ages. This will lead to key actions for SEND learners who are persistently absent or struggle to maintain attendance in line with statistical neighbours. • RISE Plan for Transition will create an area-wide consistent transition process & offer. This will ensure a high quality enhance transition for SEND learners. 	<p>Jun 25. From Sep 25 to Jul 26 over transition, then from Sep26 for new cohort.</p>	<p>RISE Action Plan and Measures are reported at the SLAIP quarterly.</p>

<p>3.1e - Further embed Graduated Response toolkits and implement the practice standards so that all schools are delivering a consistent and effective offer at SEN support.</p>	<p>Head of Service QFT - TC JS</p>	<p>Children and young people receive a consistent offer as a Graduated Response at SEN Support in schools:</p> <ul style="list-style-type: none"> Using the newly established practice standards monitor the delivery and embedding of the Graduated Response across all schools, identify schools where gaps exist and work creatively with others to share good practice, close the gap. A training and support offer to schools supports them in key gaps and areas of challenge. A training and support offer to parents and carers allows them to understand what support is available for their child or young person. 	<p>From Apr 26 to Dec26 (see 1.1a)</p>	<p>Reduced requests for Needs assessments by 25% per month by July 26.</p>
<p>3.1f – Locality pilot and subsequent place-based approaches continue to be developed as a means of supporting schools to access support earlier for children, solving area-wide SEND challenges in a collaborative way.</p>	<p>Divisional Director of Education - HB - TC</p>	<p>Schools report that the locality pilot work has enhanced early identification and support for children:</p> <ul style="list-style-type: none"> Primary locality pilot delivery Primary locality pilot evaluation Secondary Pilot delivery – part 1 Secondary pilot – delivery part 2 Next steps for place-based working 	<p>Jun-Dec 25 Dec-Jan 26 – report to SLAIP Sep-Dec 25 Jan-Apr 26 Apr 26 – Report to SLAIP</p>	<p>Evaluations of both pilots show improvement in delivering early intervention, collaboration and removing barriers to support.</p>
<p>3.1g – A strengthened offer of outreach support will strengthen multi-agency pathways of support and will focus on supporting inclusivity in all primary and secondary mainstream schools.</p>	<p>Head of QFT - TC</p>	<p>Enhanced outreach means children and young people at SEN support report improved support:</p> <ul style="list-style-type: none"> Additional outreach support is commissioned (see priority action 2.2b) to support inclusivity of schools across Torbay. This is delivered and embedded. This is evaluated and reviewed. Further targeted outreach support is offered where gaps exist. 	<p>Dec 25 Jan-July 26 July 26 Sep 26-July 27</p>	<p>Reduction in RSA by 25%. Improved parental satisfaction & confidence – measured by outreach surveys. Outcomes for SEN Support from outreach schools such as reduction in ehe, suspension /exclusion and longer-term educational outcomes.</p>

<p>3.2 – EHC plans will accurately reflect need, next steps and provision for children and young people.</p> <p>EHCP timeliness will be in line with national averages; recognised tools for quality assurance will adjudicate that quality of EHCPs will be high.</p>	<p>3.2a - A Full review of the EHCP statutory processes will be completed with an action plan of improvements created and implemented.</p> <p>New processes which focus on timeliness and quality will be implemented.</p>	<p>Head of SEND-TC</p>	<p>Children and young people have timely new and amended EHCPs.</p> <ul style="list-style-type: none"> • New process instigated to streamline assessment process to ensure better timeliness – monthly. • Every finalised plan will include information, as appropriate, from health and social care. This will be timely. • Health and social care advice will continue to uphold its consistent record of more than 75% timeliness. • Recovery Plan will ensure Annual Review Monitoring is timely and in line with national levels by July 2026. • Recovery Plan will ensure EHCP late amendments are reduced. This plan will show phase transfer amendments being 100% timely for 25/6 in Year 6 and Year 11. The amendment backlog will also be reduced by 30% by July26. 	<p>September 25 and monthly thereafter</p>	<p>Timeliness for 16 and 20 weeks will be at or above 56% consistently from Jan 2026 onwards.</p> <p>Timeliness data for social care health consistently above 75% from Sep25.</p>
	<p>3.2b - The SEND audit framework will be completely embedded into SEND processes to ensure continual improvement of EHCPs.</p>	<p>Head of SEND and Head of Quality Assurance - TC</p>	<p>Children and young people will have quality EHCPs:</p> <ul style="list-style-type: none"> • A refreshed Audit Framework and practice standards ensures focus on the key areas for improvement raised in the inspection report. • Monthly audits are embedded into LA (and wider partnership) practice. • Continued audits with specific deep dive samples on key areas of improvement identified in the main audits – quarterly. • Audit results will show improved social care and health advice in plans since the inspection in Mar 25. • Family feedback on social care advice as part of EHC needs assessment will increase from 45% (24-25) to 50% and the overall quality of APP E's graded "GOOD" or better will increase from 33% (24-25) to 40%. • Audit data will show 'bronze' audit results are converted to 'Silver' over the course of 25/26 meaning more than 55% of plans that are audited will be judged as a high quality 'silver' judgement. • Deep dive audits on key areas identified in the inspection report will show improvement to close the audit loop. • Audit recommendations will be streamlined to solely focus on the priority areas for action from the inspection to ensure impact. 	<p>Sep 25</p> <p>Monthly.</p> <p>Quarterly (deep dives) progress measured quarter after deep dive.</p> <p>Quarterly audits to SLAIP.</p>	<p>Envision audit results will show continued improvement whereby 80% will be judged as 'silver' or above by July 2026.</p> <p>Deep Dive evidence will show improvement and impact in line with specific area of focus.</p> <p>Recovery Plan will be monitored monthly and at SLAIP level – quarterly.</p>

	3.2c – A specific action and recovery plan will focus on improving the timeliness of Appendix Ds.	Principal Ed Psych – TC, LO	Educational Psychology Advice timeliness and quality will improve to national levels: <ul style="list-style-type: none"> • Creation of Recovery Plan to address the backlog of Educational Psychology advice (Appendix Ds), Jun-Dec 25, bring Appendix D timeliness consistently at 55% from January 2026 then ongoing. • Monthly monitoring of the plan to ensure this improvement stays sustained. • Execution of recovery work to ensure that all plans are completed as close to the timeliness limit as possible. 	Sep 25, then monthly monitoring	Appendix D timeliness addresses the backlog Sep-Dec 25 with timeliness being at 25%. From Jan 26 App D timeliness improves to be consistently over 55% for Apr-Dec 26. Monthly data to SLAIP.
3.3 – Suspensions and Exclusions for children and young people with SEND will show a reduction in the academic year 25/6	3.3a - Developing the capacity of schools to meet the needs of pupils who present challenging behaviours.	Head of Vulnerable Pupils, - TC (DH)	Children at a transition point will be supported to be included in their mainstream school: <ul style="list-style-type: none"> • Remodel the Behaviour Outreach provisions for those children at transition from Year 6 to Year 7 to enable earlier identification of ‘at risk’ CYP with support to reduce the risk of suspensions and exclusion over transition. • Create handover to the Secondary SEMH pilot for Yr7 continuity. • Ensuring effective engagement with and use of a transition portal to understand and meet need on transition. • Continue to support Trauma Informed Practice in schools via the Learning Academy and Virtual Schools. • Widen the availability of the current ‘When the Adults Change’ provision to support more Primary schools. 	Dec 25 Jul 26 Jan-Jul 26 25/26 academic year 25/26 academic year	Improve support for Year 6 into Year 7 cohort. This will be visible through reducing of suspension and exclusion Jan-Jul 26 and then Sep 26 onwards.
	3.3b – Reduce risk of suspension and exclusion by focussed training for staff across the partnership to support reducing the risk of exclusion. Include this in the training offer (3.1A) available across the Partnership.	Head of Vulnerable Pupils, - TC (DH)	Families and Practitioners will be supported so that more children can remain in their mainstream educational setting: <ul style="list-style-type: none"> • Extended Duties and Attendance Improvement Officers to provide training to VSCE and CSC staff. • Head of Service and Casework Officer to provide Governor/Headteacher training (which is also on demand for future training). • Extended Duties Officer to rotate through social care teams providing advice and guidance across the year. Drop-in clinics for all social care staff to discuss individual cases. 	Ongoing from October 2025	Training logs for specific elements show high take up. Partnership staff understand these risk factors and intervene to diminish their impact over 25/26.

<p>3.3c - Supporting Governors/Trustees and School leadership to regularly report on and review unforeseen removal from timetabled lessons.</p>	<p>Head of Vulnerable Pupils, - TC (DH)</p>	<p>More children and young people will stay in lessons when in school.</p> <p>Create a template for schools to use internally to review removal from classroom and the impact on the individual and those remaining in the class.</p> <p>Ensure governors and trustees understand their role in this area, with focused training for this group of colleagues.</p>	<p>Sep 25</p>	<p>Unplanned removal from lessons is understood and overseen in Autumn/Spring 25/26 and reduces in the Summer Term. Figure to be established once the level of unplanned removal is known.</p>
<p>3.3d - Supporting schools by coproducing alternatives to exclusion</p>	<p>Head of Vulnerable Pupils, - TC (DH)</p>	<p>Less 'at risk' young people are excluded:</p> <p>Build on the SEMH pilot by working with TSAT, TASH and partners to develop an intervention for those at risk of exclusion using the expertise and resources at Lodestar and across the partnership.</p>	<p>Mar 26</p>	<p>Interventions modelled in the pilot programme are understood and implemented by participating partners to reduce the need for suspension.</p>
<p>3.3e - Review the SEMH and Neurodiversity Graduated responses with a focus on managing dysregulation alongside the main review (see 3.1).</p>	<p>Head of Vulnerable Pupils, - TC (DH)</p>	<p>The Graduated Response for SEMH supports better inclusion:</p> <p>(Within 3.1) review and refresh the graduated responses with a fine focus on managing dysregulation in mainstream settings to give colleagues practical approaches to managing this known barrier to in-class attendance.</p> <p>This will link to the commissioning of a new Emotional Health and Wellbeing Service and improvements in timely access to mental health services, including Mental Health Support Teams and MERS (CAMHS) in Priority Area 4 and will include partnership mapping of support for children and young people with SEMH needs.</p>	<p>Dec 25, Implementation Apr 26.</p>	<p>As3.1- Review of Graduated Response report and subsequent implementation measures.</p> <p>Training offer – ongoing data on take up, impact.</p>
<p>3.3f - Refine multi-agency approaches and pathways for identifying and supporting children most at risk of exclusion</p>	<p>Head of Vulnerable Pupils, - TC (DH)</p>	<p>All Partners will better Identify Children at Risk of leaving school through suspension and exclusion by:</p> <ul style="list-style-type: none"> • Information sharing • Multi-agency pupil at risk panels • Multi-agency support pathways where the roles of key staff are clear. 	<p>Dec 25, implementation Apr 26.</p>	<p>Monthly monitoring of exclusion and suspension data – reporting to SLAIP</p>

<p>3.4 – Those children and young people with SEND who are not in full time education will receive a high quality and robust offer. (for some post16 measures please see Area 5)</p>	<p>3.4a - Leaders across the partnership will improve oversight of the impact of its support for children and young people receiving SEN support (pre16) who are not accessing full-time education.</p>		<p>Children and young people on Part Time Timetables reduce:</p> <p>The Vulnerable Pupils Team will review the guidance (last reviewed Aug 25) provided to schools. This work will focus on clarifying what constitutes a 'suitable' part time timetable:</p> <ul style="list-style-type: none"> • Support and referral routes for part time attendance will be mapped and publicised. • Best practice for reintegration and referral to partners will be shared through attendance forums and clinics. • Data will be shared with schools regarding the use of part time timetables. <p>A data dashboard of Part Time Timetables and Alternate Providers is created to offer oversight of all pupils at SEN Support who are not accessing full time education. Audit work supports the understanding of the impact for those on PTTT.</p>	<p>By Dec 25</p> <p>A high-level report will come to the SLAIP for partnership oversight quarterly from Dec 25.</p>	<p>Quarterly report of SEN support attendance and full time % to SLAIP quarterly from Dec 26 and shows reduction Sep 25 to Sep 26.</p>
	<p>3.4b – A new quality assurance post, AP Strategy and Quality Assurance Framework will monitor quality and performance of Alternate Provision Providers for pre-16 Education to ensure a high-quality offer is delivered.</p>	<p>AP Quality Assurance, TC</p>	<p>Alternate Provision delivered is high quality:</p> <p>Benchmarking tools will be created to measure impact and outcomes; this will ensure the provision continues to be appropriate to the pupil/student's needs. Pupils/students' progress will be monitored via a centralised management system and through termly monitoring visits to students/pupils who are part of the EOTAS package. We will work with schools to collate an overview of impact and outcomes for any AP that they commission directly for their pupils.</p> <p>An AP risk register will be created to help ensure that all potential risks - especially those related to safeguarding, quality of education, and provider suitability - are identified, assessed, and monitored systematically.</p> <p>All commissioned AP providers will be evaluated by Apr 26.</p> <p>Quality outcomes will be measured in an ongoing cycle from June 26.</p> <p>An AP strategy and impact QA framework will be co-produced to ensure we are fully compliant with the DfE guidance on arranging alternative provision. This will ensure the AP offer can meet the needs of children and young people in Torbay.</p>	<p>Dec 25.</p> <p>Apr 26</p> <p>Jun 26</p> <p>Sep 25.</p>	<p>Report to SLAIP Jun 26 showing the outcomes measures and assurance of quality assurance.</p>

	<p>3.4c - For post16 NEET young people with an EHCP, new processes and scrutiny will ensure that they are re-engaged quickly into education, employment or training (within a six-week period). Tracking and oversight of EHCP NEET will be scrutinised monthly by the Head of SEND. A recovery plan for these young people will ensure they are re-engaged (also see PA5).</p>	Head of SEND-TC	<p>NEET Young People with an EHCP are re-engaged within half a term in line with their wishes:</p> <ul style="list-style-type: none"> • New SEND team processes will ensure all young people who become NEET with an EHCP will be re-engaged with a suitable offer within six weeks. 	From Sep 25 Monthly.	EHCP NEET Levels – half termly.
	<p>3.4d – Using a grant from the NTDi, further development of the Supported Internship Offer will be in place. Supported Internship Grant enables the SEND Employment Forum to continue to collaborate on SEND employment opportunities and sharing of best practice. An NTDi Action Plan continues the development of SIs in Torbay.</p>	Head of SEND-TC	<p>More Supported Internship Opportunities exist:</p> <ul style="list-style-type: none"> • A post16 review commences to ensure that SEND employment pathways into SIs are accessible and available in high numbers and matches demand. • Specialist SIs are offered through our special school sector. • Torbay’s FE College, South Devon College, continues to be a trailblazer in SIs and shares good practice and supports the development of this area for young people with EHCPs. 	Jun 25 – Mar 26 Jun 25 – Mar 26 Jan 25 – Jan 26 Sep 25 25/26	SIs increase by 100% in 25/26 and by a further 100% by 26/27. EHCP NEET levels reduce in line with statistical neighbours.
	<p>3.4e – A post16 review of education will ensure that employment pathways are embedded in the post16 educational offer for those with an EHCP. A post16 review commences to ensure that SEND employment pathways are accessible and available and the key focus of post16 pathways for young people with EHCP.</p>	Head of SEND-TC	<p>Post16 Pathway Options are fit for purpose:</p> <ul style="list-style-type: none"> • More work experience, internships, apprenticeship opportunities (see above in 3.4) • For those with EHCPs better 14+ annual reviews evidenced by audits showing compliance with the requirements of the SEND CoP • Post16 Review - Launch new post16 pathways • Publicise new post16 pathways • Phase transfer processes are timely and robust. <p>A new EHCP format for new plans supports the PfA focus. This is rolled out to amended plans in 26/27.</p>	Jan 25-Jan 26 Jan 26 Jan-Mar 26 Mar 26 (then annually) New plans - 25/26 then amended plans 26/27.	Phase transfer data for Year 11s. Ongoing NEET data.

We will know we have met our desired outcomes and made an impact on this priority area when:

Strengthened multi-agency working is evident because:

- SEND Attendance continues to improve (including measures for part time timetables and internal absence from lessons) and is on a trajectory to improve in line with our statistical neighbours.
- Suspensions and Exclusions have reduced by 25% by July 2026.
- Termly NEET measures reduce for EHCP 50% by September 2026.
- EHC Plans are timely (as at national levels), quality is consistently good for all plans, with 55% of new plans and amended plans audited being judged as 'silver' by August 2026.
- There is a robust QA process in place to ensure all unregistered AP are monitored.
- Families and school settings report (for various initiatives, like the Locality Pilot and enhanced outreach) say that the enhanced support and provision is making a difference.

Priority Impact Area 4

Leaders must reduce waiting times across health services and strengthen the offer of support available to children and young people and their families while waiting for health assessments and diagnosis. This includes CAMHS, speech and language therapy, occupational therapy and community paediatrics.

Priority Lead: Jo Pritchard, Head of Joint Commissioning and Clinical Lead for SEND and CiC, NHS Devon

Desired outcome for children & young people	Actions	Named Lead(s)	Impact	By When	Measures
4.1 Children and young people will have their needs met through early identification, appropriate intervention, timely and easy access to services, including assessments when needed.	4.1a - In partnership with Health Provider Partners - NHS Devon will deliver on a Strategic Commissioning Intention to redesign and recover priority health services , including those detailed below. Identifying this work as a strategic commissioning intention will ensure strong governance and oversight within the health system and inclusion within the systems financial plan.	SS – Director of Women and Children’s Improvement, ICB	Health services will offer children, young people and their families timely and accessible support, intervention and assessment. Children and young people will receive support earlier and wait for less time to receive health assessments where these are needed. <ul style="list-style-type: none"> Children, young people and families will report that needs are identified and met early. Children, young people and families will report a more cohesive experience of assessment and care. Schools and settings will report improved confidence in supporting children and young people with health needs. Health information will be high quality and included in a timely way within the EHCP process. 	Start Sept 25 March 26	Performance Data Patient feedback
	4.1b - Speech Language and Communication <ul style="list-style-type: none"> Enhanced model for under 5s – regular easy access sessions, no referral required. School link worker model mobilised – phased implementation. Early identification and intervention pathway redesign - whole system. 	EOC - Children’s Alliance acting Deputy Director, CFHD	Families will experience a reduction in waiting times and will report confidence in the system and offer of support from Speech and Language Therapy. <ul style="list-style-type: none"> Increased number of CYPS/families reporting they have confidence in the system and service offer. Schools and Early years setting will report increased confidence in the system and offer. 	Starting Sept 25	Performance Data Patient feedback

	<p>4.1c - Emotional Wellbeing and Mental Health - Mood Emotions and Relationships</p> <ul style="list-style-type: none"> Emotional health and wellbeing. strategic plan finalised through Torbay Emotional Health and Wellbeing Group. Full mobilisation of the new emotional health and wellbeing services (online, counselling, targeted youth work). Increased mental health support in-school provision. 	SS – Director of Women and Children’s Improvement, ICB	<p>Emotional Wellbeing and Mental Health services are flexible, accessible and timely providing children and young people with support when and where needed.</p> <ul style="list-style-type: none"> A sustained reduction in waiting times for mental health support in line with recovery trajectories that will also focus on delivering quality, responsive services. Families will report that needs are identified and met early. Children and families will report a more cohesive experience of assessment and care. Schools and settings will report improved confidence in supporting CYP with mental health needs. 	Jun 26	<p>Service updates/ performance data.</p> <p>Patient feedback</p>
	<p>4.1d - Neurodiversity - including Autism and ADHD Assessments</p> <ul style="list-style-type: none"> Rapid implementation of the Integrated Neurodevelopmental Assessment Pathway. Redesign of assessment, support and intervention to provide seamless experience across hospital and community services. Provision of digital advice and guidance. Development of Peer Support. Continued delivery of Partnership for Inclusion of Neurodiversity in Schools and alignment with Mental health support in schools’ provision 4 additional schools. 	SS – Director of Women and Children’s Improvement, ICB	<p>There will be one referral pathway for neurodiversity support and assessment, which is easier to access for families and schools.</p> <p>A sustained reduction in waiting times for neurodiversity assessments carried out by Children and Family health Devon (CHFD) in line with recovery trajectories that will also focus on delivering quality, responsive services.</p> <ul style="list-style-type: none"> Children, young people and families will report that needs are identified and met early. Children, young people and families will report a more cohesive experience of assessment and care. Schools and settings will report improved confidence in supporting children and young people with needs associated with a neurodiversity, and their families. 	Dec 25	<p>Service updates/ performance data.</p> <p>Patient feedback</p>
	<p>4.1e - Community Paediatrics</p> <ul style="list-style-type: none"> Continued commitment for additional medical resources. Strengthened governance within Torbay Foundation Trust for oversight of recovery trajectories. Refreshed demand and capacity analysis following implementation of neurodiversity initiatives to understand impact on non-neurodiversity services within community paed. 	SH - Associate Director of Operations – Families & Communities Care Group, TSDFT	<p>A sustained reduction in waiting times for children and young people in line with recovery trajectories and implementation of INAP.</p> <ul style="list-style-type: none"> No children waiting more than 52 weeks by end of Dec 25. No children waiting more than 40 weeks by end of Jun 26. 70% of patients waiting less than 18 weeks by end of Sep 26. 	<p>March 26</p> <p>Milestone 1 – Dec 25</p> <p>Milestone 2 – Jun 26</p> <p>Milestone 3 – Sep 26</p>	<p>Service updates/ performance data.</p> <p>Patient feedback</p>

	<p>4.1f - Occupational Therapy</p> <ul style="list-style-type: none"> New models of care (Joint therapy clinics) trialled to improve efficiency. Clinical optimisation and skill mix review undertaken and recommendations implemented. 	EOC - Children's Alliance acting Deputy Director, CFHD	Families will experience a reduction in waiting times and will report confidence in the system and offer of support from Occupational Therapy.	March 26	Service updates/ performance data. Patient feedback
	<p>4.1g - Out of Hours End of Life Service</p> <ul style="list-style-type: none"> Secure funding to increase nurse whole-time equivalent (WTE) to meet palliative care demand. Undertake staff consultation to enable inclusion of on-call provision within job description. Obtain funding to establish an on-call rota for children at end of life. Ensure training, guidance and support are developed and embedded to enable a sustainable service. Ensure Children's Hospice South West will support medical needs for children at end of life. 	EOC - Children's Alliance acting Deputy Director, CFHD	<p>Children and their families are offered the option of end-of-life care delivered at home with support from the CFHD Community Children's Nursing and Children's hospice Southwest.</p> <ul style="list-style-type: none"> Families report that service offered and delivered is appropriate and timely. Number of children/families opting for home care demonstrates need for service. 	Started Jul 25 Completion due Oct 25	Service updates/ performance data. Patient feedback
	<p>4.1h Specialist Sleep Service</p> <ul style="list-style-type: none"> Specialist Sleep Support offered to CYP who present with moderate to profound learning disability. Specialist Sleep training provided to Public Health Nursing teams & Special Schools in addition to other services within CFHD. CFHD website updated to ensure easy access to information and resources. 	EOC - Children's Alliance acting Deputy Director, CFHD	<p>Positive feedback from families and reduction of need for 1:1 support following workshop intervention.</p> <ul style="list-style-type: none"> Increased knowledge and awareness of sleep hygiene and impact of poor sleep. Schools and other settings will report increased confidence in supporting and understanding sleep difficulties. 	Dec 25 In place Oct 25	Patient feedback Training feedback
<p>4.2 Children, young people and their families will feel appropriately supported while they are waiting for a specialist health service and/or assessment.</p>	<p>4.2a - Needs led support will be enhanced for children, young people and families who are newly presenting and/or waiting for a specialist health service.</p> <p>This will be delivered across the health sector including - Children and Family Health Devon (CFHD) and Torbay and South Devon Foundation Trust (TSDFT).</p>	SS – Director of Women and Children's Improvement, ICB	<p>Families will report that they can find service information and understand where to go for help and receive the right support they need at the right time.</p> <ul style="list-style-type: none"> Children, young people and families will report a more cohesive experience of assessment and care. Schools and settings will report improved confidence in supporting children and young people with health needs. Health information will be high quality and included in a timely way within the EHCP process. 	Sep 26	

	4.2b - 0-19 services <ul style="list-style-type: none"> Drop-in clinics to be in place in all secondary schools. Attendance will be monitored and feedback reviewed to inform service development. Digital support through family hubs. 	Lead for PHN/0-19 - TC	Offer will be available to secondary schools across Torbay, with regular attendance and positive feedback from those using the sessions.	Mar 26	Service updates/ performance data. Patient feedback
	4.2c - Speech Language and Communication <ul style="list-style-type: none"> Open access to advice for under 5s. Professional advice through school link workers. 	EOC - Children's Alliance acting Deputy Director, CFHD	Children, young people, families and schools will report that they know how to access speech language and communication support when they need it.	Starting Sep 25	Service updates/ performance data. Patient feedback
	4.2d - Emotional Wellbeing and Mental Health Mood Emotions and Relationships <ul style="list-style-type: none"> Expanded access to Luminova (CFHD funded, NICE approved, award winning app for children aged 7-12 years with anxiety). Enhanced provision through the Kooth offering within the Emotional Wellbeing & Mental Health Service. Co-produced multiagency initiatives to support children and families through family hubs, schools and settings, youth centres. 	SS – Director of Women and Children's Improvement, ICB	An extensive digital and in-person offer will be available to children, young, people and their families, as well as schools and settings, providing options for advice, support and intervention for a range of emotional and mental health needs. <ul style="list-style-type: none"> Young people, families and schools will report positive experiences of accessing and receiving appropriate and meaningful support at the right time. Access to early mental health support is reported to be easy for young people on and out of school settings. Mental Health Support Teams will expand to include 100% coverage by 2029. 	Jun 26	Service updates/ performance data. Patient feedback
	4.2e - Neurodiversity - including Autism and ADHD Assessments <ul style="list-style-type: none"> Providing Neurodiversity navigators (social prescribing model). Co-produced multiagency initiatives to support children and families through family hubs, schools and settings, youth centres. Enhanced schools support 4 additional schools to be trained through PINS programme. 	SS – Director of Women and Children's Improvement, ICB	Families are able to access the support they need from the right person at the right time, including from those with lived experience and professionals supporting. <ul style="list-style-type: none"> Access to Neurodiversity Navigators is easy, timely and helpful for those in and out of school settings. Families find it easy to know where to get support and help from and do not have to go to multiple places to have their needs met. 	Started 2025 Mar 26	Service updates/ performance data. Patient feedback

	<p>4.2f - Community Paediatrics</p> <ul style="list-style-type: none"> • Co-production with expert families group regarding communication to families. • Neurodiversity coordinator posts – enhanced identification of community support for families waiting for assessment. 	<p>SH - Associate Director of Operations – Families & Communities Care Group, TSDFT</p>	<p>Improved patient/ family reported experiences and less inappropriate assessments/ delays due to missing information.</p>	<p>Jan 26</p>	<p>Service updates/ performance data.</p> <p>Patient feedback</p>
	<p>4.2g - Occupational Therapy</p> <ul style="list-style-type: none"> • Access to advice and support via duty therapist telephone line. • Digital support and guidance through co-produced videos and pod casts – made available through the family hubs. • Information about support available provided to all families joining the waiting list. 	<p>EOC - Children's Alliance acting Deputy Director, CFHD</p>	<p>Calls to the duty line are answered/ responded to in an acceptable time and users report that the advice and support they receive is helpful.</p> <ul style="list-style-type: none"> • Digital content is co-produced and feedback from users is positive. 	<p>Sep 25</p>	<p>Service updates/ performance data.</p> <p>Patient feedback</p>

We will know we have met our desired outcomes and made an impact on this priority area when:

- The Integrated Neurodevelopmental Assessment Pathway (INAP) has been initiated and embedded, providing one place for all neurodiversity referrals.
- There has been a sustained reduction in waiting times for specialist health services (SLT/MERS/Community Paediatrics) in line with trajectories, in the context of focused service development to meet the needs of children, young people and families.
- Speech and Language Easy Access and School Link Therapists are in place and have resulted in reducing/irradicating waiting lists for families.
- The newly commissioned Emotional Wellbeing and Mental Health service is fully operational and children, young people and families are reporting that it is a high quality and supportive service.

Areas for Improvement

Areas for Improvement 1, 2 and 3 have been linked to the appropriate Priority Impact Area for planning, monitoring and reporting. Area for Improvement 5 will be reported on separately and is detailed below;

Area for Improvement 5

Leaders across the partnership should improve their oversight and strengthen joint working across services to support preparation for adulthood arrangements. This also includes improving the way that child and adult services are joined across all health services for children and young people with SEND so that the journey into adult health services is easier and more accessible

Priority Lead: Anna Coles, Director of Adult and Community Services, Torbay Council.

Desired outcome for children & young people	Actions	Named Lead(s)	Impact	By When	Measures
5.1 We will have a clear understanding of the current and future need for transition support in Torbay	<p>5.1a Use the JSNA as the basis for a comprehensive needs analysis of the following cohorts of young people in Torbay, to inform the scale and design of transition pathways:</p> <ul style="list-style-type: none"> Social Care - Children's Social Care to Adult Social Care. Education - SEND to employment, education or training. Health – from MERS (CAMHS) to Adult mental health services and children's continuing health services to Continuing Healthcare (CHC). Transitional safeguarding – for those who are vulnerable/at risk but do not meet the threshold for statutory transition support. Young carers to adult carers. <p>The needs analysis should also include consideration of the specific needs of those who require support from more than one pathway, for example children in care with a disability.</p>	Public Health	<ul style="list-style-type: none"> Decisions are made based on evidence of need, including data and qualitative feedback Risks are well understood by system leaders and practitioners System changes and redesign are forward-looking, based on anticipated future demand for advice, support and services Consideration of data and qualitative needs information is built into key governance groups 	Dec 25	<p>More young people and families tell us their experience of transition was positive, well communicated and personalised.</p> <p>Increase in proactive transition planning beginning in a timely way and continuing right up to transition date.</p> <p>More young people transition to self-directed models of care and support, that maximise their independence.</p> <p>Audit data and qualitative feedback routinely used to drive service improvements.</p>

	<p>5.1.b Consult with parents, young people and adults who have experienced transition to understand what helped or hindered their experience.</p>	Torbay SEND Family Voice	<ul style="list-style-type: none"> • Parents, young people and adults who have experienced transition describe feeling more able to share their views and that they can see this is being considered as part of decision making. • Feedback from parents, young people and adults is routinely drawn upon as part of service redesign. 	Dec 25	Incidents of antisocial behaviour, criminal activity and accidents involving young adults with SEN reduce
	<p>5.1.c Map existing resources against identified need and assess the state of readiness of services to respond to identified demand.</p>	Torbay Council Commissioning	<ul style="list-style-type: none"> • Sufficiency plans will be based on evidence and consider future as well as current demand. • Gaps in provision are identified and responded to with clear plans. 	Jan 26	
5.2 Review the effectiveness of the current pathway for transition between Children's Social Care and Adult Social Care	<p>5.2a Review existing protocols between Children's Services and Adult Social Care including guides for young people on what they can expect as they approach transition.</p>	Children's Services/ TSDFT	<ul style="list-style-type: none"> • Quality assurance audits and dip sampling show improved planning and signposting to appropriate adult services. • Young people, parents and carers tell us they were more aware of the process and felt confident about what would happen next. 	Apr 26	
	<p>5.2b Improve early access to information regarding self-directed support options such as Direct Payments; managed personal budgets and Individual Services Funds, as part of a young person's preparation for adulthood.</p>	Children's Services/ TSDFT	<ul style="list-style-type: none"> • More EHCPs show evidence of young people aspiring to have choice and control over the services they draw on upon transition to adulthood. • More carers and families express awareness of self-directed support and have access to effective relevant information. 	Apr 26	
	<p>5.2c Increase the number of young people choosing self-directed support to meet their assessed social care needs upon reaching adulthood.</p>	Children's Services/ TSDFT	<ul style="list-style-type: none"> • More young people with Care Act eligible needs choose to receive their support via self-directed support. 	Aug 26	
	<p>5.2d Specific training and guidance is provided for practitioners in both children's and adult services to ensure they are confident in supporting transitions and understand the statutory framework for both services.</p>	Children's Services/ TSDFT	<ul style="list-style-type: none"> • Practitioners report feeling more secure in their knowledge of supporting transitions. • More evidence of cross-working between children's and adult services to support those requiring transition. 	Apr 26	
	<p>5.2e Commissioned providers of both children's and adult services are more aware of their responsibilities to support transitions, including preparing young people and in understanding the needs of those young people following transition to adult services, including care providers such as foster carers, residential homes and supported living/supported lodgings.</p>	Torbay Council Commissioning	<ul style="list-style-type: none"> • Contracts for newly commissioned services reflect the requirement to support transitions. • Provider forums and contract management meetings provide evidence of conversations about supporting transitions. • Providers evidence they have a greater understanding of their duties and ability to support effective transitions. 	Ongoing	

5.3 Review the effectiveness of the current education, employment and training pathway for support for young people with SEND as they approach and enter adulthood	5.3a EHCPs to reference preparations for all children from the age of 14 and above (at Y9 review) to appropriately identify those who will need support for transition via the Transition Panel.	Head of SEND Torbay Council	<ul style="list-style-type: none"> • Parents/Carers agree that their child was well prepared for their transition into adult services. • Children and young adults have clear, realistic, regularly reviewed plans in place. • Increase in evidence of planning for transitions in Annual Reviews from Year 9 up. • Evidence of proactive transition plans in place as identified in quality assurance and audit activity. 	Jul 26
	5.3b Increase the choice for young people post16 through more supported internships and apprentices (see section 3.4d).	Head of SEND Torbay Council	<ul style="list-style-type: none"> • New post 16 pathways and launched, publicised and understood by system partners including schools and colleges. • Phase transfer processes are timely and robust. 	Jan 26
	5.3c Review the services and partnership support available to young adults for supported employment.	Torbay Council Commissioning	<ul style="list-style-type: none"> • Gaps in provision are identified and planned for. 	Jan 26
5.4 Review the effectiveness of the current pathway for support for young people with additional physical and mental health needs as they approach and enter adulthood	5.4a Review protocols for transitions within NHS services, including into Continuing Healthcare (CHC) and from CAMHS into adult mental health services, involving the MHLDN Provider Collaborative.	TSDFT/DPT/ ICB	<ul style="list-style-type: none"> • Evidence of all relevant professionals contributing to post-16-year-old EHCP reviews for young adults with complex health and social care needs. • Evidence of improved life outcomes and use of resources because of a multidisciplinary approach. 	Jul 26
	5.4b Ensure that young adults with complex SEN likely to be funded via CHC or MHA s.117, are included from age 16 in the ASC Complex Needs Forum agenda.	TSDFT/DPT/ ICB	<ul style="list-style-type: none"> • Evidence of all relevant professionals contributing to post-16-year-old EHCP reviews for young adults with complex health and social care needs. • Evidence of improved life outcomes and use of resources because of a multidisciplinary approach. • Funding decisions are made in a timely way which minimises delay and enables effective multi-agency planning. 	Dec 25
5.5 Ensure there are robust arrangements for transitional safeguarding – for those who are vulnerable/ at risk but do not meet the threshold for statutory transition support	5.5a Ensure that there is oversight/multi-agency risk management of the young people who do not meet the threshold for Adult Social Care.	Both safeguarding partnerships	<ul style="list-style-type: none"> • Data, needs and risk information is held, overseen and responded to • Gaps in provision are identified and plans put in place to respond to emerging themes. 	Feb 26
	5.5b Provide multi-agency training for practitioners in understanding and applying the principles of transitional safeguarding, including housing and criminal justice.	Both safeguarding partnerships	<ul style="list-style-type: none"> • Practitioners describe feeling more confident in working with this group of young people and managing risk 	Apr 26

5.6 Young Carers are identified early and supported to consider their own needs as they transition to adulthood	5.6a Review Young Carers Needs Assessments and Transitions Assessments processes, paperwork and practice to ensure they reflect legal requirements of the No Wrong Doors MOU.	Children's Services	<ul style="list-style-type: none"> • Processes are clear and well understood and communicated to young people. • Audits show that young carers are supported appropriately with transitions to adult carers services and planning commences well in advance of their 18th birthday, underpinned by their views and wishes. 	Apr 26
	5.6b Improving the practice for adults and children's services through training and workforce development.	Children's Services/ TSDFT	<ul style="list-style-type: none"> • Training is scheduled for multi-agency staff to raise awareness of young carers and routes to access support. • Feedback from practitioners shows that they feel more confident in working with young carers. 	Ongoing
	5.6c Review the process for identification and transitions pathways for young carers with schools.	Children's Services	<ul style="list-style-type: none"> • Schools are more aware and confident in identifying and supporting young carers 	Jul 26
5.7 Continue to check and challenge the effectiveness of our processes and ensure that young people and ensure parents/carers have regular opportunities to share their experiences of transitions pathways.	5.7a Implement the use of a post-16 transition audit tool (NDTi Post-16 Transitions Audit Tool) at key points from age 16 to 18 to evaluate how effectively we are preparing young people with SEND for their adult lives. This will enable practitioners working with young people from age 16 to 25 to have a graduated response to need.	Quality Assurance Hub	<ul style="list-style-type: none"> • The transition audit tool is carried out regularly to test the current position and distance travelled. • Evidence of audit data being used to drive further improvements in the multi-disciplinary co-produced approach to transition planning across adult and children's services. • Evidence of a graduated response being provided which meets a range of need. 	Mar 26
	5.7b Ensure that young people and parents/carers are aware of the ranges of ways they can share their experiences with us as well as proactive activity taking to reach the seldom heard.	Torbay Send Family Voice	<ul style="list-style-type: none"> • More EHCPs will show evidence of young people aspiring to have choice and control over the services they draw on upon transition to adulthood. • Feedback from young people, parents and carers is regularly received. • "You said, we did" ensures that those sharing their experiences receive updates on what will happen next. 	Ongoing

We will know we have met our desired outcomes and made an impact on this priority area when:

- The JSNA and the voice of young people and parents/carers is routinely used to underpin our evidence base of current and anticipated need and used to inform our planning of processes and services. This includes for young carers and young people who don't meet the threshold for adult services but where we remain concerned for their wellbeing and aspirational for their futures
- Joint protocols between all children and adult services are clear, up to date and well understood by families and practitioners, supported by training and development
- Plans for transition begin earlier with expectations and progress being tracked and evidenced through EHCP reviews
- There is a year-on-year increase in young people having greater choices and options - choosing self-directed care including via Direct Payments once they reach adulthood, having a range of supported internships or apprenticeships to choose from and other supported employment options
- Commissioned care and support providers actively do more to help young people with SEND to develop their independence skills before reaching 18.

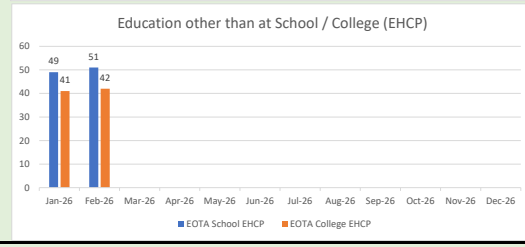
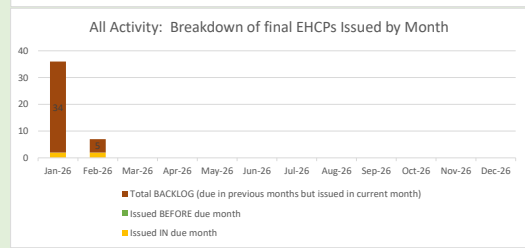
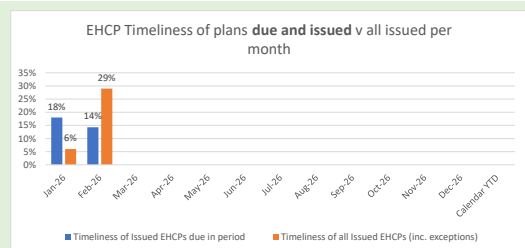
Appendix 1 - Priority Impact Areas – Glossary

Label	Description
Partnership	When we say 'Partnership' we mean colleagues working together from Torbay Council, educational settings, parents/carers, children and young people, other agencies and services in health and social care, including adult services and the voluntary sector.
Joint Working	The Department of Health and Social Care defines Joint Working as "Situations where, for the benefit of patients, one or more pharmaceutical companies, the NHS and others (e.g. Patient Groups) pool skills, experience and/or resources for the joint development and implementation of patient-centred projects and share a commitment to successful delivery".
HB - TC	Strategic Lead of Education and SEND, Torbay Council (HB)
BT - TC	Divisional Director for Safeguarding, Torbay Council (BT)
Head of QFT	Head of Quality First Teaching, Torbay Council
ASC Lead	Director of Adults and Community Services, Torbay Council (AC)
EOC - CFHD	Children's Alliance Acting Deputy Director, Child and Family Health Devon
SH - TSDFT	Associate Director of Operations – Families & Communities Care Group, TSDFT
SS - ICB	Director of Women and Children's Improvement, ICB (SS)
ICB - Comms	Communication and Engagement Team, One Devon
LO - TC	Principal Educational Psychologist, Torbay Council (LO)
DH - TC	Head of Vulnerable Pupils, Torbay Council (DH)
CK - TC	Senior Economic Development Officer, Torbay Council
JP - NHSD	Head of Joint Commissioning and Clinical Lead for SEND and CIC, NHS Devon (JP)
MG - TC	Head of Business Intelligence, Torbay Council (MG)
SE - TC	Divisional Director, Children's Services Transformation, Torbay Council (SE)
SB - TC	Public Health Specialist Intelligence Adviser, Torbay Council (SB)
KS - TC	Divisional Director – Corporate Services, Torbay Council (KS)
KR - ICB	Head of Communications, One Devon (KR)
PH Lead CYPF	Public Health Specialist for Children and Families
ASC	Adult Social Care
CSC - TC	Children's Social Care, Torbay Council
Young Devon	Young Devon
ICB	Integrated Care Board
TSDFT	Torbay and South Devon NHS Foundation Trust
CFHD	Children and Family Health, Devon
NHS Devon	NHS Devon
0 to 19 Torbay	0 to 19 Torbay Services

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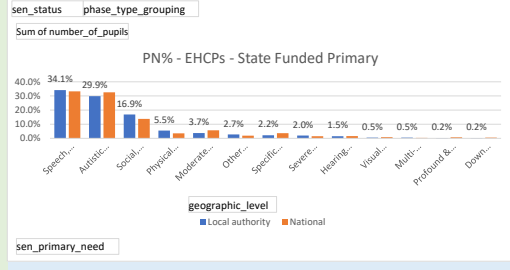
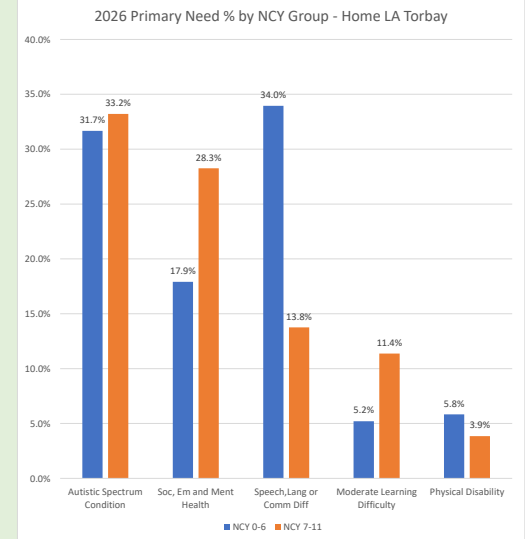
PIP	Operational Data	Published Data with National Comparators	Commentary													
3.1	<p>EHCNAs by month including YTD</p> <p>Torbay EHCPs</p>	<p>EHCNAs change % v previous year</p> <p>% change in EHCP numbers v previous year</p>	<p><i>(Targets awaiting confirmation)</i></p> <table border="1" style="width: 100%;"> <tr> <th>Target</th> </tr> <tr> <td>An annual reduction in EHCNAs of 25% from March 2025</td> </tr> <tr> <th>Commentary</th> </tr> <tr> <td>Torbay EHCNAs decreased by 12% whereas Nationally there was an increase of 12%</td> </tr> </table> <table border="1" style="width: 100%;"> <tr> <th>Target</th> </tr> <tr> <td> </td> </tr> <tr> <th>Commentary</th> </tr> <tr> <td>EHCP Numbers continue to grow however published data shows that Torbay EHCP numbers are increasing year on year at a slower rate than nationally.</td> </tr> </table>	Target	An annual reduction in EHCNAs of 25% from March 2025	Commentary	Torbay EHCNAs decreased by 12% whereas Nationally there was an increase of 12%	Target		Commentary	EHCP Numbers continue to grow however published data shows that Torbay EHCP numbers are increasing year on year at a slower rate than nationally.					
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3.2A 3.2D	<p>SEN K % at Census Points 2026</p> <p>Torbay EHCP % at Census Point 2026</p> <p>App Advice within 6 weeks % 2026</p> <p>EHCP Timeliness of all plans issued % at 16 and 20 wks 2026</p>	<p>% of SEN Support</p> <p>% EHCPs</p> <p>EHCP issued within 20 weeks (inc. exceptions)</p>	<table border="1" style="width: 100%;"> <tr> <th>Target</th> </tr> <tr> <td> </td> </tr> <tr> <th>Commentary</th> </tr> <tr> <td>Published figures show that Torbay has a lower rate of SEN support at 13.1% than national figures at 14.2%. The gap is widening.</td> </tr> </table> <table border="1" style="width: 100%;"> <tr> <th>Target</th> </tr> <tr> <td> </td> </tr> <tr> <th>Commentary</th> </tr> <tr> <td>The percentage of children with EHCPs in schools is increasing at a slower rate than nationally.</td> </tr> </table> <table border="1" style="width: 100%;"> <tr> <th>Target</th> </tr> <tr> <td>App D advice to above 46% by Jan 2026. App C and E to be consistently above 75% by September 2025. Final EHCPs to be at or above national levels, currently 46%</td> </tr> <tr> <th>Commentary</th> </tr> <tr> <td>App C and App E timeliness has been consistently above the forthcoming new target levels this calendar year. App D's are performing below the forthcoming target.</td> </tr> <tr> <td>20 week timeliness is significantly below national figures for 2024. The stated minimum target of 46% represents the last published national performance.</td> </tr> </table>	Target		Commentary	Published figures show that Torbay has a lower rate of SEN support at 13.1% than national figures at 14.2%. The gap is widening.	Target		Commentary	The percentage of children with EHCPs in schools is increasing at a slower rate than nationally.	Target	App D advice to above 46% by Jan 2026. App C and E to be consistently above 75% by September 2025. Final EHCPs to be at or above national levels, currently 46%	Commentary	App C and App E timeliness has been consistently above the forthcoming new target levels this calendar year. App D's are performing below the forthcoming target.	20 week timeliness is significantly below national figures for 2024. The stated minimum target of 46% represents the last published national performance.
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Final EHCPs issued within 20 weeks (statutory DfE measure) is 6% for January. 11 plans were due in January, and of these 2 were issued in the due month

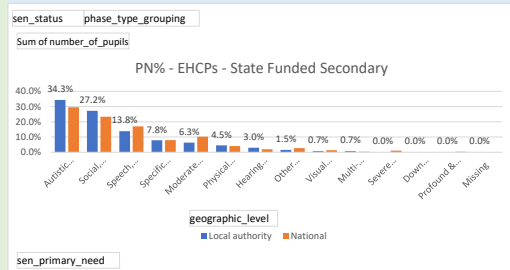
Operational data continues to show that timeliness is below target.

90 students are educated at a base other than school



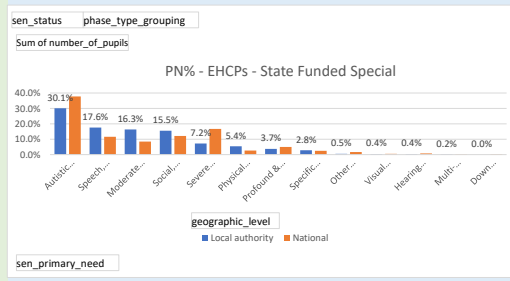
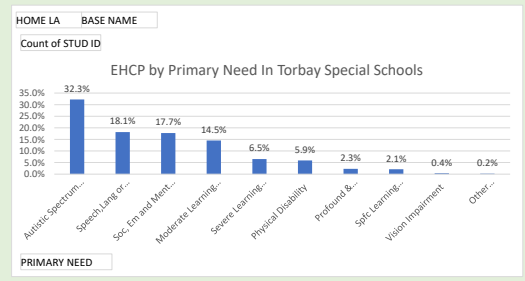
Target

Commentary
National data shows that at Primary Torbay is slightly higher than national figures for SLCN and SEMH and below national for ASC.



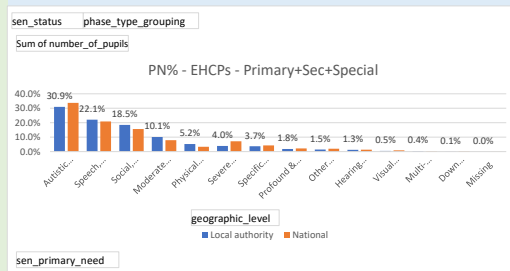
Target

Commentary
National data shows that at Secondary Torbay is above national figures for ASC and SEMH and below for SLCN.



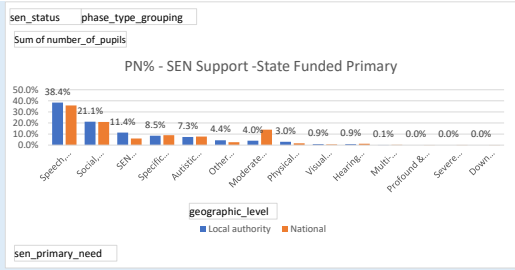
Target

Commentary
National data shows that in Special Schools Torbay is below national figures for ASC and SLD and above for SLCN, MLD and SEMH.



Target

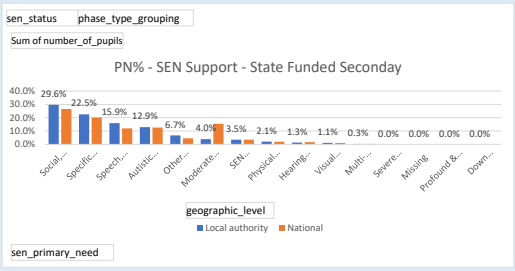
Commentary
For all EHCPs in SF settings Torbay is below national figures for ASC and above for SLCN, SEMH and MLD.



Target

Commentary

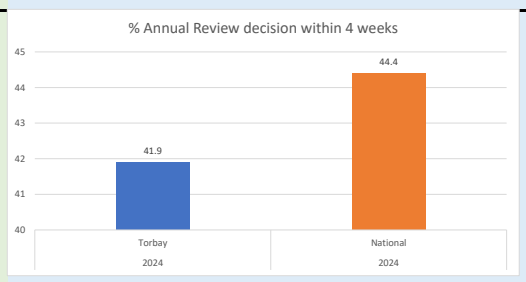
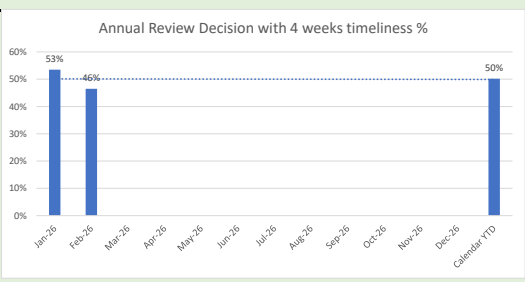
National data shows Torbay is slightly higher for SCLN and lower for MLD.



Target

Commentary

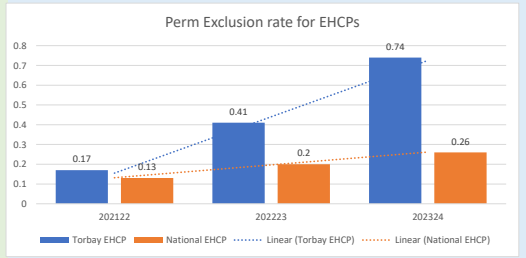
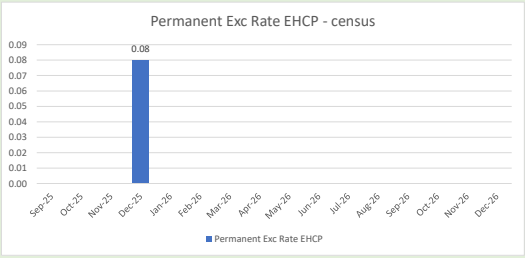
National data shows Torbay is higher for SEMH, SpLD and SCLN and lower for ASC and MLD



Target

Commentary

2024 published figures were 42% for Torbay compared to national figures of 44%

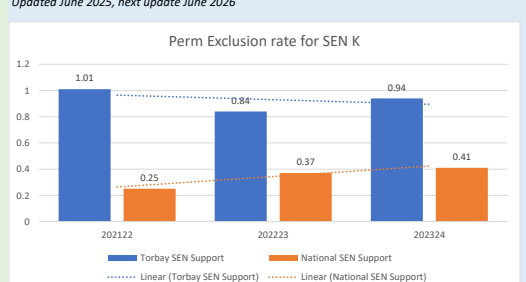
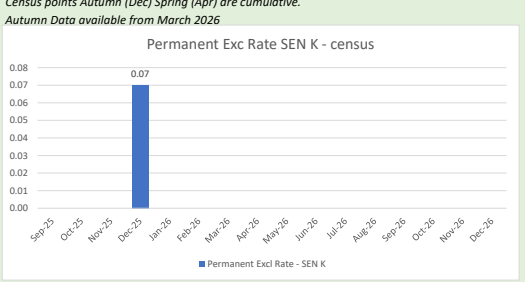


Target

Reduction of suspension and exclusions Jan - July 2026.

Commentary

Permanent exclusions for children with EHCPs are significantly above national figures and the gap is widening.



Target

Reduction of suspension and exclusions Jan - July 2026.

Commentary

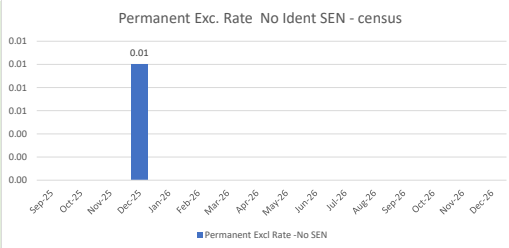
Permanent exclusions for children with SEN support are significantly above national figures however the gap is starting to narrow.

Census points Autumn (Dec) Spring (Apr) are cumulative. Autumn data available from March 2026

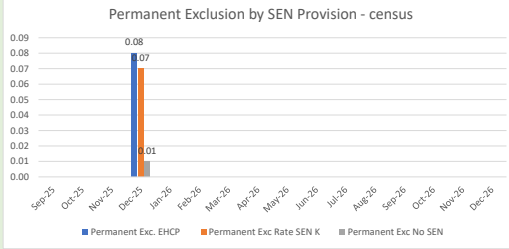
Updated June 2025, next update June 2026

Census points Autumn (Dec) Spring (Apr) are cumulative. Autumn data available from March 2026

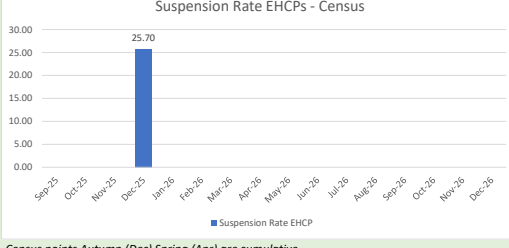
Updated June 2025, next update June 2026



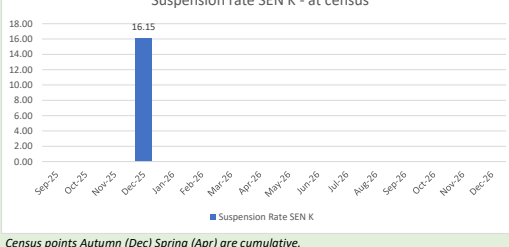
Census points Autumn (Dec) Spring (Apr) are cumulative.
Autumn data available from March 2026



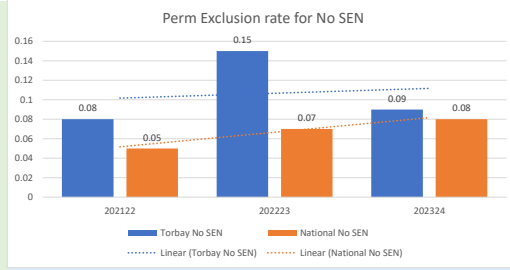
Census points Autumn (Dec) Spring (Apr) are cumulative.
Autumn data available from March 2026



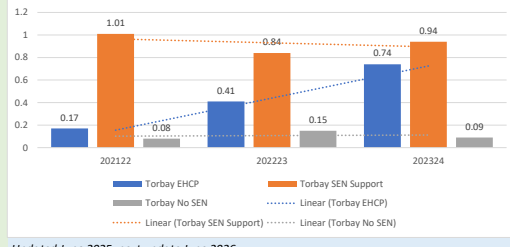
Census points Autumn (Dec) Spring (Apr) are cumulative.
Autumn data available from March 2026



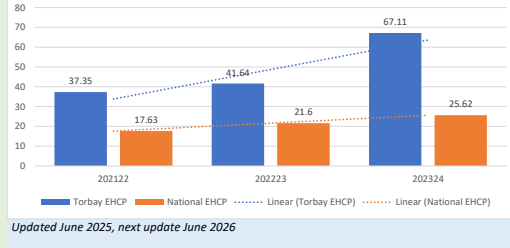
Census points Autumn (Dec) Spring (Apr) are cumulative.
Autumn data available from March 2026



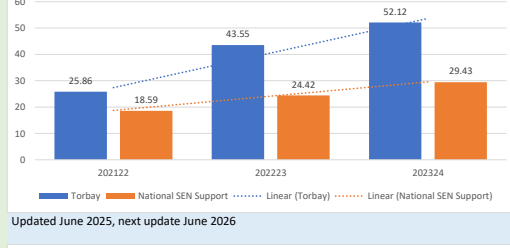
Updated June 2025, next update June 2026



Updated June 2025, next update June 2026



Updated June 2025, next update June 2026



Updated June 2025, next update June 2026

Target
Reduction of suspension and exclusions Jan - July 2026.

Commentary
Permanent exclusion rate for No SEN has reduced at secondary phase but remains high at primary. Overall the gap is narrowing compared to national figures.

Target
Suspensions and exclusions to have reduced by 25% by July 2026

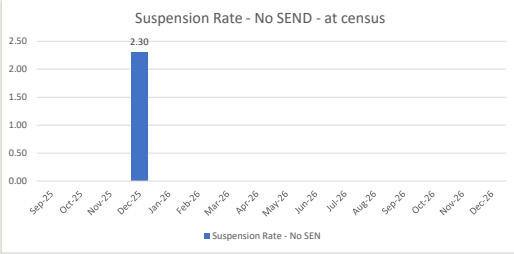
Commentary
Children with SEN are significantly more likely to be excluded, with the latest published rate increasing for children with EHCPs.

Target
Reduction of suspension and exclusions Jan - July 2026.

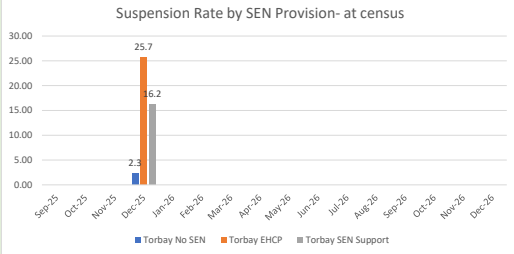
Commentary
Suspensions for children with EHCPs are significantly above national figures and the gap is continuing to widen.

Target
Reduction of suspension and exclusions Jan - July 2026.

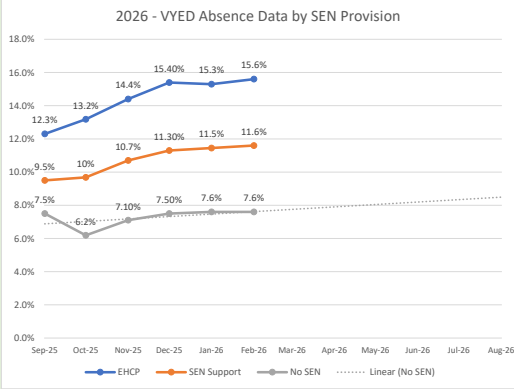
Commentary
Suspensions for children with SEN Support are significantly above national figures and the gap is continuing to widen.



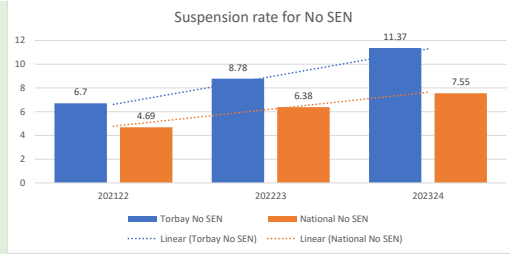
Census points Autumn (Dec) Spring (Apr) are cumulative.
Autumn data available from March 2026



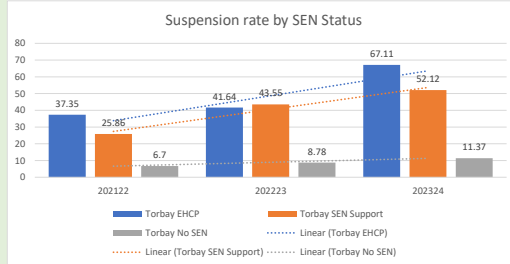
Census points Autumn (Dec) Spring (Apr) are cumulative.
Autumn data available from March 2026



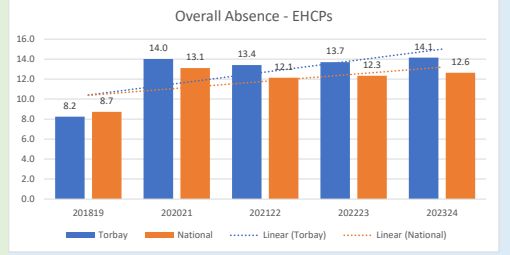
Updated monthly and the beginning of each new month



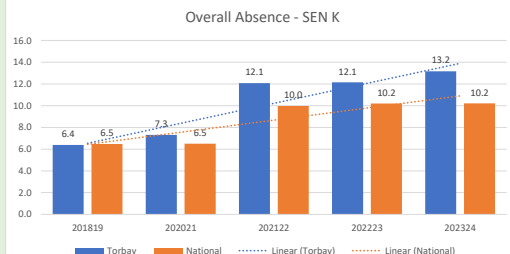
Updated June 2025, next update June 2026



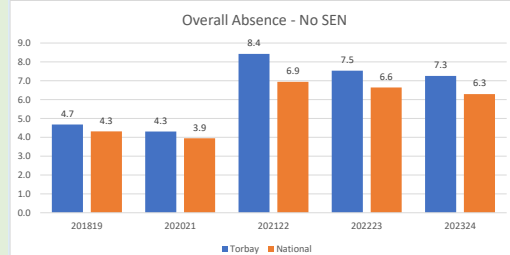
Updated June 2025, next update June 2026



Updated March 2025, next update March 2026



Updated March 2025, next update March 2026



Updated March 2025, next update March 2026

Target

Reduction of suspension and exclusions Jan - July 2026.

Commentary

The suspension rate for Torbay children with no SEN is higher than national figures.

Target

Commentary

Suspension rates for children with SEN continues to grow significantly in Torbay.

Target

To clarify

Commentary

Published data shows that absence for EHCPs is higher in Torbay than nationally and with the gap increasing.

Target

Reduction in absence for SEN Support Sept 2025 - Sept 2026

Commentary

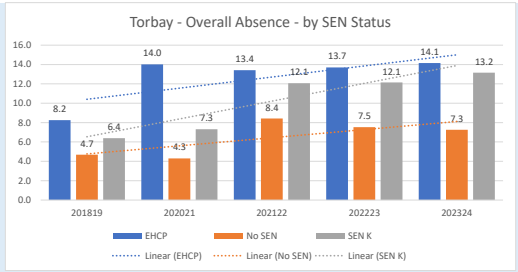
SEN K Torbay data is higher than national with the gap widening.

Target

Reduction of suspension and exclusions Jan - July 2026.

Commentary

Published data shows that absence for No SEN is declining in nationally and in Torbay.

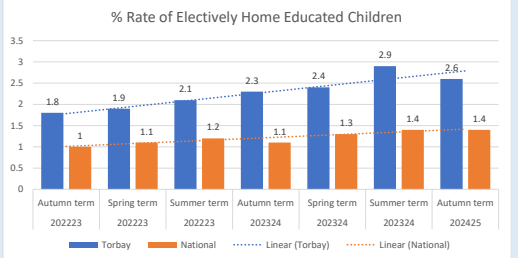
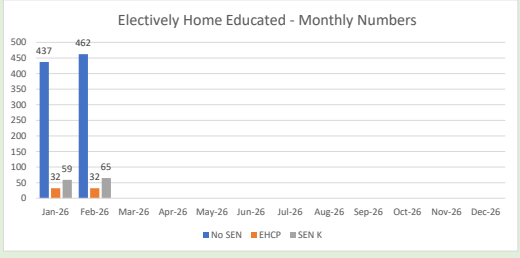


Target

Commentary

Children with SEN are significantly more likely to be absent than their peers.

3.1F

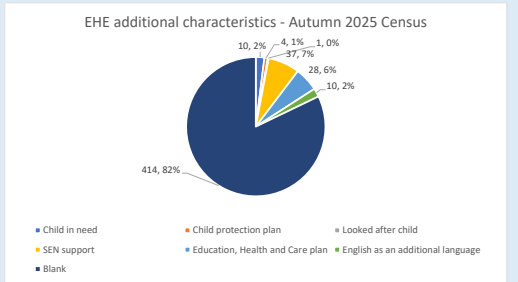


Target

TBC

Commentary

The rate of all children who are EHE has increased significantly and at a faster rate than national figures over the same period.

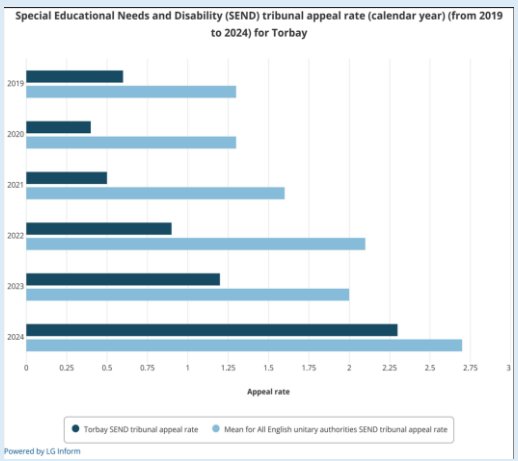
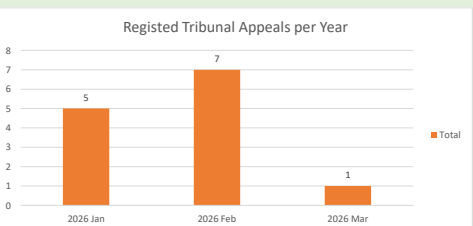
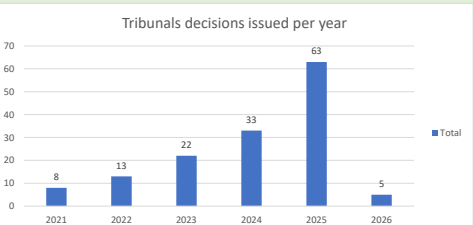


Target

TBC

Commentary

13% of children who were EHE at the time of the last census had SEN

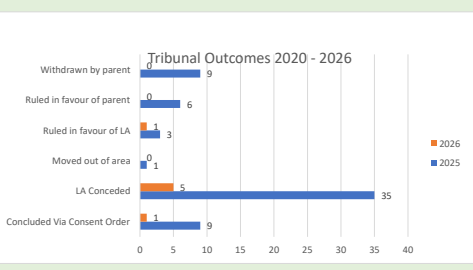


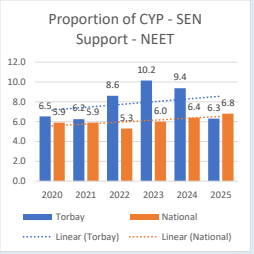
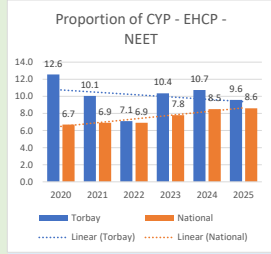
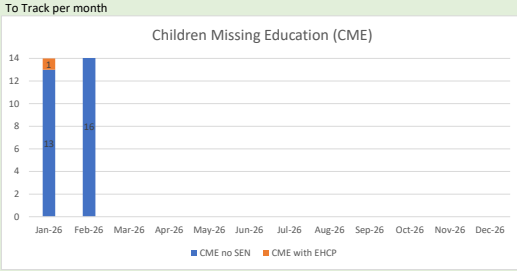
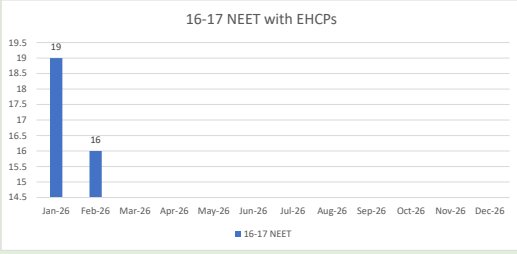
Target

Commentary

Updated 11/3/26 tribunals are increasing rapidly each year with local data showing an significant increase from 7 in 2020.

Latest published figures show that Torbay is behind national but the gap is closing.





Target
Reduction
Commentary
Published data shows that Torbay EHCP NEET figures are declining whilst national are increasing. SEN Support figures show that Torbay has a higher proportion than national and both are increasing.
Commentary
There were 14 Children Missing from Education in January of which 1 had an EHCP

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