Summary

Joint Strategic Needs Assessment for Children and Young People with SEND

11th September 2024





Introduction



What is a Joint Strategic Needs Assessment, or JSNA?



- A JSNA is a way for health, education and social care services to work together to understand what people in a community need.
- They collect and study information about the health and wellbeing of local people.
- This helps them to plan services and support that meet those needs, making sure everyone gets the right help.
- This JSNA looks at the needs of children and young people with SEND, who live, go to school, or use health services in Camden.
- It was produced across 2023 and 2024 by Camden Council's Health and Wellbeing Department.

Four main findings from our JSNA

1. Camden has a high percentage of children and young people with SEND, similar to London and England. This percentage is growing.

2. Some children's needs are identified later than others, meaning they miss out on early support.

3. Children and young people with SEND and their families are more likely to experience inequalities and challenges in other areas of life as well.

4. Educational attainment (how well pupils do in assessments) varies between children with SEND and those without.

For each main finding, we share the following details:

What did the data tell us?

We used information from service data. We also used insights from parents, carers, professionals and children and young people with SEND. This section will summarize some of the key things we found out from the data.



What does this mean?

This looks at what the findings mean for children and young people with SEND and their families, and what they mean for Camden services.



Where do we go from here?

This section considers:
how can we respond?
It highlights important
areas of work for the
needs we have
identified. It brings
together the
recommendations of
the JSNA, along with
work that is already
planned or started
through our SEND
Strategy.



Finding 1

Camden has a high percentage of children and young people (CYP) with SEND, similar to London and England. This percentage is growing.



• 1 in 5 children and young people in Camden schools are supported for SEND.

- A quarter of these have Education, Health and Care Plans (EHCPs), for more complex needs.
- The number of children with EHCPs is growing, especially among 5–11-year-olds.

What did the data tell us?

- There is also an increase in children at secondary school receiving SEN Support (without an EHCP).
- More children are being found to have Autistic Spectrum Disorder, and Speech Language and Communication Needs.
- In older children, we are seeing more Social, Emotional and Mental Health Needs.
- GPs are seeing more young people aged 18-25 with SEND.
 The number of young women is increasing. Increasingly, these patients have depression as well.



What does this mean?

- Schools, health and social care services are all working with many children and young people with SEND. This number is growing.
- There are especially more children and young people known to have:
 - Autistic Spectrum Disorder,
 - Social Emotional and Mental Health, and
 - Speech, Language and Communication Needs.
- Resources are stretched, and there could be longer waiting times for services.
- We know that delays in receiving support can be very stressful for children, young people and their families.



Where do we go from here?

- Increase the skills and knowledge that all staff groups have about working with children and young people with SEND.
- Widen this knowledge out so that we can help whole schools, and the wider community, to be more inclusive for the many children and young people with SEND.
- Strengthen 'support while waiting', so that help can always be provided even before a formal diagnosis is available.
- Include support for families, understanding how stressful a time this can be.
- Schools and a wide range of services have already completed training by the Autism Education Trust, to make them more autism-friendly.



Finding 2

Some children's needs are identified later than others, meaning they miss out on early support



What did the data tell us?

- 6% of children with a new Education, Health and Care Plan (EHCP) were under the age of 5.
- 66% were in primary school.
- 28% were secondary school age or above.
- Girls were more likely than boys to be referred later (in their teens), especially for autism assessment.
- There seem to be times when more children with SEND are identified, and these match up with important events like starting school, moving to secondary school, going through puberty and working towards exams.



• There are children and young people who are at different stages in their journey:

- Some will have been identified earlier and will be receiving support
- Some children's needs will have been identified but they might be waiting for appointments

Some children's needs might not have been identified yet, so they are missing out on support

- We know that girls with autism are more likely to go 'under the radar' because they are more likely to have 'internalising' or 'masked' symptoms (that don't always show very clearly on the outside).
- We know that later diagnosis of SEND brings a higher risk to mental health.
- Stressful life events seem to make it harder for children and young people with SEND to cope at school.

What does this mean?



Help staff to recognise symptoms of SEND (including autism) early, even when these are less obvious.

Focus on responding to a child's need, whether they have a diagnosis or not.

Where do we go from here?

- Provide extra support, especially at stressful time points like moving schools and preparing for exams, to try and prevent mental health issues.
- Act very quickly if there are signs of mental health problems, school absence, or difficulty coping.
 Understand that these can sometimes be the first clues about undiagnosed SEND.
- We have developed a tool that allows professionals to identify and help with speech, language and communication delays before the age of two.



Finding 3

Children and young people with SEND and their families are more likely to experience inequalities and challenges in other areas of life as well



What did the data tell us?

- In Camden, there seems to be a higher percentage of children with SEND among:
 - Black/ Black British and Mixed Ethnicity communities
 - People with financial difficulties, or living in more disadvantaged areas
 - Those known to Social Care and the Youth Justice System
- Children and young people with SEND are more likely to miss school, and to be suspended at least once.
- A quarter of young GP patients with SEND also have another condition, like asthma, depression or learning disabilities.



What does this mean?

- Extra stressors can make it harder to cope. They might also prevent people from being able to use services that could help.
- Difficulty coping can affect mental health, and this can make it more difficult to attend school and feel comfortable there.
- Services need to understand the kinds of challenges that children, young people and families are facing, so that they can make sure that the right support is in place.



Keep listening to the ideas and experiences of people who are finding it hard to access help and support.

- Break down unfair barriers like cost, location, or language. Make all services 'SEND-informed'.
- Monitor fair access carefully and keep improving.

Where do we go from here?

- Help strengthen families by supporting all their different needs together (like housing, financial hardship, or health conditions).
- Strengthen the things that help protect families under stress, like good relationships, services that work smoothly together, and opportunities to connect with others.
- We are building early relationships with families e.g. our Best Start for Baby service and helping all our services to be 'trauma informed'.



Finding 4

Educational attainment (how well pupils do in assessments) varies between children with SEND and those without



What did the data tell us?

- Children and young people with greater SEND needs were less likely to reach 'expected' levels in school assessments.
- However, in Camden, children and young people receiving SEN Support from their schools made strong progress from their starting points. This compared well against children and young people with similar needs in London and in England.
- Children and young people with SEND had goals and aims beyond what they were learning in lessons. These included hobbies and life skills. However, we did not find a common way of these outcomes being measured.



What does this mean?

- Looking only at young people's 'attainment' (how well they do in assessments and exams) can feel too narrow and not always achievable.
- This could impact the confidence of children and young people with SEND, increase stress at school and bring uncertainty about their future plans.



Where do we go from here?

- Continue to do well in supporting educational progress, including for children and young people with EHCPs.
- Work with colleges, universities and employers, to provide more suitable opportunities for children and young people with SEND, after they leave school.
- Improve employers' understanding of workplace inclusivity.
- Support young people with the skills they need for adult life and help them prepare, well in advance
- We are developing a broader way of thinking about and measuring outcomes, so that we can see how well we are meeting the varied needs and aspirations of children with SEND.



The full JSNA, containing the complete data analysis and the full set of recommendations, is available online at

https://families.camden.gov.uk/documents/194/Camden _SEND_JSNA_FINAL_3.9.24.pdf?cache=6d03c28434b620 8039225da99d979a51f8f9d771



