

Public Accounts Committee

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# Support for children and young people with special educational needs

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First Report of Session 2024–25

HC 353

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# Public Accounts Committee

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# Summary

The system to support children and young people with special educational needs (SEN) in England is reaching, or, arguably, has already reached, crisis point. Despite a 58% increase in the Department for Education's (the Department) high needs funding over the last decade, funding has not kept pace with demand following a 140% increase in the number of children with education, health and care (EHC) plans. Outcomes for children have not improved which inevitably undermines parents' confidence in the system. Too many families struggle to get the help their children desperately need, with long waiting times for assessments and support, and tribunal cases rising. In 2023, only half of EHC plans were issued within the statutory 20-week period. Whether children receive support depends too much on their postcode, or how well their parents can navigate an often chaotic and adversarial system: only 2.5% of local authority decisions on EHCs were appealed at a tribunal in 2023. Of these, however, the tribunals found partly or wholly in favour of parents and carers in 98% of cases - a staggering statistic which undermines families' confidence in the system. Without urgent action, the Department risks a lost generation of children leaving school without receiving the help they need.

As well as not delivering outcomes, the SEN system is unaffordable, placing a significant strain on local authorities' finances. Most worryingly, government does not know how it will address immediate financial challenges faced by local authorities where, for many years, local authority spending has outstripped departmental high-needs funding, leading to substantial deficits. Local authorities now face the prospect of these deficits, which could total £4.6 billion, hitting their books in March 2026 and impacting their wider finances and potentially causing nearly half of English local authorities to be at risk of effectively going bankrupt. Looking ahead, the gap between high-needs annual funding and forecast costs looks set to rise further, with an estimated £3.4 billion mismatch in 2027-28. The Department's current financial support programmes will have no discernible impact on these longer-term challenges nor support local authorities in managing their financial position.

The Department will be unable to make the fundamental reforms needed without a clear, costed plan to measure progress, which it is lacking. To do this it needs a clear vision of what an inclusive education would look like, better data to target funding, and to deliver a system where all those with critical roles work together. This includes the Department for Health and Social Care, who must play their part in reducing long waits for support. With more than 40,000 children waiting over 12 weeks for speech and language therapy alone as at June 2024, timely access to health expertise constitutes a significant barrier in a struggling system.

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# Introduction

In January 2024, 1.9 million children and young people aged 0 to 25 years had special educational needs (SEN). Children with SEN have a learning difficulty or disability which means they need special educational provision beyond that required by most others of the same age. Most (1.14 million) receive additional support in state schools, known as SEN support. Children whose needs cannot be met in this way have a legally enforceable entitlement to specific support set out in an education, health and care (EHC) plan. In January 2024, there were 576,000 children with an EHC plan.

The Department for Education (the Department) is accountable for the SEN system. In 2024–25, it is providing dedicated high needs funding of £10.7 billion to local authorities, who have a statutory responsibility to ensure children receive the education support they need. The Department for Health and Social Care (DHSC) oversees health services which support the SEN system. In March 2023, the Department and DHSC jointly published an improvement plan setting out how they would tackle immediate challenges, as well as longer term plans. The Department continues to implement initiatives set out in the plan but, as it was published by the previous government, it no longer represents official government policy.

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# Conclusions and recommendations

- 1. The SEN system is inconsistent, inequitable and not delivering in line with expectations, which inevitably undermines parents' confidence in it.** The Department considers parental confidence to be a key indicator of a "good" system effectively supporting children with SEN. However, parents will lack confidence in a system which is currently not delivering. With only half of EHC plans issued within the statutory 20-week limit in 2023, children are waiting too long for support: in 2023, local authorities issued anywhere from 1% to 100% on time. Equally, parents are appealing more SEN decisions, with an increase in the number appealed, from 6,000 in 2018 to 15,600 in 2023. Of these, 98% of decisions found in favour of parents, contributing to low confidence, and which the Department recognises as indicative of poor value for money. The Department needs to learn from tribunal decisions, and whether the tribunal process favours those parents better able to navigate the system. The Department acknowledges the tribunal system could create inequalities, as do the huge local variations in the timeliness of EHC plans and local authorities interpreting SEN needs differently. The proportion of children with EHC plans differs across local authorities. In 2023/24, this varied from 2.7% (Nottinghamshire) to 7.5% (London Borough of Tower Hamlets) for children aged 5 to 15 years.

## RECOMMENDATION

Over the next 12 months, the Department should work with others including local authorities and the Ministry of Justice to:

- a.** better understand the reasons for differences in identifying and supporting SEN needs across local areas and schools;
- b.** routinely identify and share good practice from better performing areas; and
- c.** improve local authority decision-making by analysing tribunal decisions.

- 2. Without fully understanding why demand for support has increased, the Department's ability to provide value for money is undermined.** Over the last decade, demand for EHC plans has soared. In January 2024, there were

576,000 children with EHC plans, a 140% increase since 2015. A further 1.14 million were receiving SEN support in schools, up by 14% since 2015. This encompasses large increases in certain needs, including autistic spectrum disorders, but the Department could do more to better understand the reasons behind increasing demand. The Department considers that identifying and supporting SEN needs earlier could reduce demand and be more cost effective. It also plans to provide support to cohorts of pupils in the areas of fastest-rising demand, making funding less dependent on agreeing individual plans. The Department has not yet explained how it will evaluate the cost-effectiveness of special schools but has started to compare outcomes for children with similar needs in state special and mainstream schools.

#### **RECOMMENDATION**

Within the next six months, the Department must work with the DHSC to better understand the reasons for increasing and changed demand for SEN support, and then set out how it will provide support more efficiently, such as through group support, identifying needs earlier and ensuring special schools reflect value for money.

### **3. The Department has not made clear what it means by inclusive education, a core strand of its approach, or how it will be achieved.**

A core aim of the Children and Families Act 2014 was supporting children with SEN in more inclusive mainstream schools, but the Department has made little discernible progress. It has not defined or set out what inclusive education should look like, or provided specific funding for inclusivity, despite this being at the heart of its approach. There are few incentives for schools to be inclusive, with performance data focussing only on academic attainment and no separate judgement by Ofsted on SEN. Schools can often feel that others are not accepting their share of children with SEN. Local authorities have limited influence over academies to affect these decisions. This is also an issue in regard to selective education settings (e.g. grammar schools) found in parts of England. The Department acknowledges that it has not looked hard enough at barriers to inclusivity. It suggests that the ongoing curriculum review and proposed changes to Ofsted inspections provide an opportunity. In June 2023, only 56% of teachers felt confident to support children with additional needs, and the Department has several initiatives underway to improve training. It is also funding training for additional educational psychologists to provide both more support within schools and undertake assessments for SEN. The 2014 Act was intended to identify needs earlier, but the Department does not have a defined process or specific funding to achieve this.



#### RECOMMENDATION

The Department should, within the next six months, set out the provision which children with SEN support should expect. Alongside this, they should set out what inclusive education means and looks like, and the level of resourcing both to ensure the support for children with SEN and the maintenance of educational provision for other children in the same setting. The Department should also set out how inclusive education will be achieved including through earlier identification of SEN, and improved teacher training and continuous development, and how schools will be held to account. SEN performance data should incorporate factors other than academic attainment.

4. **Accessing health expertise presents a significant barrier to identifying and supporting SEN needs.** DHSC plays a critical role in the SEN system. It jointly published with DfE the Code of Practice and 2023 improvement plan and is responsible for overseeing local health service providers. Currently, only 2 out of 32 competing priorities for the National Health Service (NHS) relate to SEN. DHSC recognises it could improve Integrated Care Boards' (ICBs) focus on SEN. Since 2023, it requires each ICB to appoint an executive lead for SEN and recent planning guidance asks ICBs to look at community health services. Despite increasing need, DHSC does not have data to understand current long waiting times for health support, with reports of children waiting years to access children's and adolescents' mental health support (CAMHS). DHSC is still working on a solution - it has committed more funding and aspires to provide more support for speech and language therapy and CAMHS. However, with staffing being considered as part of a wider 10-year plan for NHS recovery, it is unclear when there will be wider progress.

#### RECOMMENDATION

Within six months, DHSC should set out how ICBs will consider SEN alongside wider priorities; how its longer-term workforce plans will address current and forecast SEN skill shortfalls; and its processes, plans and targets for reducing related waiting lists.

5. **Departmental witnesses could not provide any potential solution to the critical and immediate financial challenges facing many local authorities due to persistent and significant SEN-related overspends.** The impact of these are being deferred under the temporary "statutory override" scheme, which is due to expire in March 2026. This is currently expected to cause nearly half of all English local authorities to be at risk of effectively going bankrupt. With increasing demand for EHC plans, most local authorities have overspent their annual high-needs budget each year since 2016-17. This has contributed to growing cumulative deficits for many

local authorities within their dedicated schools grant budgets, with others using reserves to cover SEN costs. Since 2020, local authorities have been able to exclude these deficits from their main revenue budgets, so avoiding these overspends impacting their overall financial position. However, this only hides the deteriorating financial situation. When this arrangement ends in March 2026, 66 local authorities (43%) could be at risk of breaching their statutory duty to set a balanced budget, and so would be effectively bankrupt. Despite the obvious urgency, there is no solution in place to what will be an estimated £4.6 billion cumulative deficit. The Department is discussing the issue with the Ministry for Housing, Communities and Local Government (MHCLG) and HM Treasury, but says the issue is complicated given local authorities' differing financial situations. There is a real risk of unfairness in the treatment of local authorities given some have accrued SEN-related deficits and others have avoided doing so. Left unresolved the issue risks undermining the whole of local government finance.

#### **RECOMMENDATION**

Given the risks to local authorities' finances, central government must urgently involve local authorities in conversations to develop a fair and appropriate solution for when the statutory override ends in March 2026, clearly setting out these plans as a matter of urgency and no later than March 2025.

- 6. In the longer term, the SEN system remains unviable with piecemeal interventions, such as Safety Valve, doing nothing to provide a financially sustainable system.** Based on the Department's current forecasts on the need for SEN support, the annual gap between funding and forecast costs across local authorities will grow to between £2.9 billion and £3.9 billion in 2027–28. Since 2021, the Department has introduced the 'Safety Valve' and 'Delivering Better Value' financial support programmes for those local authorities with the worst deficits. However, these do not include all local authorities and will not deliver enough savings, merely acting as a short-term sticking plaster. The Department argues that the situation would be worse without these programmes but also recognises that more needs to be done. Due to a state sector capacity being unable to meet rising demand, local authorities are spending more on costlier independent school placements for children with EHCs - £2 billion in 2022 (46% more than 2018–19) - although the Department wants to rely less on these settings. Home to school transport for children with SEN has seen a 77% real terms cost increase since 2015. The Department needs more granular data so it can work with local authorities to better manage these pressures.

#### RECOMMENDATION

Moving on from its 'Safety Valve' programme, the Department must provide specific support and guidance so all local authorities can effectively manage their SEN-related spending sustainably in the longer term. To ensure investment allocation decisions maximise value for money, demand forecasting is vital. This joint work by the Department and local authorities should include differentiating between the number of places to be provided in mainstream and specialist state settings. It should also ensure that any spending on independent schools and transport costs reflects value for money. The Department should work with local authorities to identify ways in which more accountable provision could be developed offering better value for money.

7. **The Department's ability to reform the system is hindered by a lack of data, targets and a clear, costed plan.** The Department accepts the need for major change, but lacks a clear, costed plan to push forward reforms and measure progress. Despite taking years to develop a plan to address recognised challenges, the Department recognises it needs to be much clearer on what it needs to achieve, how and when, through a costed plan with interdependencies and metrics for progress and benefits. In setting out metrics, the Department conceded it needs to further develop how it will look beyond educational attainment to understand if the system is working, such as by considering attendance which may indicate children feeling supported. The Department has a long way to go to build data across a range of areas, such as on SEN mainstream schools places, home to school transport and whole system costs. It continues to test dashboards across 32 local authorities, but it is unclear how these data will be used and when.

#### RECOMMENDATION

The Department should urgently improve its data, and then use this information to develop a new fully costed plan for improving the SEN system, with concrete actions, and clear interdependencies, alongside metrics to measure outcomes.

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# 1 Support for children and their families

## Introduction

1. On the basis of a report by the Comptroller and Auditor General, we took evidence from the Department for Education (the Department), and the Department for Health and Social Care (DHSC) on support for children and young people with special educational needs in England.<sup>1</sup>
2. The NAO estimates that around 1.9 million children and young people aged 0 to 25 years were identified as having special educational needs (SEN) in January 2024 with 1.7 million at school. A child or young person with SEN has a learning difficulty or disability which means they need special educational provision beyond that required by most others of the same age. Support should reflect individual needs and could be within mainstream school, specialist or alternative settings.<sup>2</sup>
3. There are two categories of support, which broadly reflect the level of need. Most children (1.14 million) receive additional support at mainstream schools, known as SEN support. Children whose needs cannot be met in this way have a legally enforceable entitlement to specific support set out in an education, health and care (EHC) plan. In January 2024, there were 576,000 children with an EHC plan.<sup>3</sup>
4. The Department is accountable for the SEN system and securing value for money from the funding it provides, through local authorities, to schools and other education settings. In 2024–25, it is providing dedicated high needs funding of £10.7 billion to local authorities who, working with national and local bodies, have a statutory responsibility to ensure children receive the support they need in education settings. Health services have a responsibility to provide, when clinically required, medical assessments, routine health checks, and healthcare.<sup>4</sup>

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1 C&AG's Report, [Support for children and young people with special educational needs](#), Session 2024–25, HC 299, 24 October 2024

2 C&AG's Report, para 1

3 C&AG's Report, para 2

4 C&AG's Report, para 3

5. Through the Children and Families Act 2014, government aimed to introduce significant changes to the SEN system, for: children's needs to be identified earlier; families to be more involved; mainstream schools to be inclusive; support services better integrated; and appropriate support to remain up to age 25.<sup>5</sup> In 2020, our predecessor Committee concluded that many school-age children in England with SEN were not getting the support that they need. The Committee were unconvinced that the Department had a sufficient grip on what needed to be done to tackle growing pressures on the system.<sup>6</sup> In March 2022, the Department published a review, launched in September 2019 that found “vicious cycles” of worsening performance and a lack of confidence in the system.<sup>7</sup>
6. In March 2023, the Department and DHSC jointly published an improvement plan setting out how they would tackle immediate challenges, as well as longer term plans. The Department continues to implement initiatives set out in the plan but, as it was published by the previous government, it no longer represents official government policy.<sup>8</sup>
7. We also received a very high number of written submissions from stakeholders, including many from individual parents and carers.<sup>9</sup> Particular concerns drawn to our attention included:
- a. the quality of support provided, and the “postcode” lottery in support offered across different local authorities.
  - b. the personal impact on families struggling to get their children support, or a school place.
  - c. the need to strengthen accountability and ensure local areas meet their statutory duties.
  - d. the impact of financial pressures, and what the Safety Valve programme means for the provision of support.
  - e. the need to intervene earlier and improve the inclusivity of mainstream schools.
  - f. the need for better integrated health, education and social care.
  - g. the need to address specialist workforce shortages and improve skills.
  - h. the failure to create a seamless and supportive system throughout the whole 0 to 25 age range.

5 C&AG's Report, para 4

6 Committee of Public Accounts, [Support for children with special educational needs and disabilities](#), First Report of Session 2019–21, HC 85, May 2020

7 C&AG's Report, para 5

8 C&AG's Report, para 5

9 Committee of Public Accounts, [Support for children and young people with special educational needs - Written evidence](#)

## Delivering outcomes and meeting expectations

8. The Department acknowledged that the SEN system is not working well enough and said it wanted to change the system.<sup>10</sup> There has been no consistent improvement in outcomes for children and young people since 2019. In 2021/22 69% of young people with SEN at key stage 4 were in sustained education, employment or apprenticeship after leaving 16 to 18 study, compared to 85% of those without, similar to 2018/19.<sup>11</sup> Although this reflects its ultimate ambition, the Department could not specify how many young people with SEN should enter sustained employment or education for the system to be operating well. It agreed that there was still a lot more needed to reduce the gap between those with SEN and those without.<sup>12</sup> The Department described how it would need to focus on earlier interventions, with the SEN code of practice requiring local authorities to prepare young people to transition from school.<sup>13</sup> In terms of educational attainment, the Department explained how outcomes had not yet recovered from a dip during the COVID pandemic but pointed to some improvement over the last 10 years.<sup>14</sup> The Department also described considering wider outcomes, including wellbeing and readiness for employment, to assess if the system worked.<sup>15</sup>
9. The Department described how parental confidence provided a core indicator of an effective SEN system but that, with a third of parents having children with SEN in the state system feeling their child did not get necessary support, the system was “nowhere near good enough”.<sup>16</sup> Families lack confidence in a system where it does not meet expectations. The proportion of EHC plans issued within the statutory 20-week target was 50% in 2023, down from around 60% in the period 2018 to 2021.<sup>17</sup> The Department attributed lengthening waiting times to increasing demand for EHC plans, which it described as “rational” given that less support is available for those without a plan, creating a “vicious cycle” of demand. It aimed to reduce the waiting times before children received SEN support by ensuring that this support did not necessarily depend on children going through the assessment process to get an individualised EHC plan.<sup>18</sup>

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10 Q 2

11 C&AG's Report, paras 7 and 1.6, Figure 1

12 Q 8

13 Q 4

14 Q 3

15 Q 2

16 Qq 3, 62

17 C&AG's Report, para 8, Figure 7

18 Q 10



10. Parents are also increasingly appealing EHC plan decisions with the proportion being taken to a tribunal, parents' final recourse for complaints, increasing from 1.6% in 2018 to 2.5% in 2023. The number of decisions appealed increased from 6,000 in 2018 to 15,600 in 2023. Nearly all (98%) were decided in favour of families, which the Department explained by decisions being recorded in their favour should they win on any aspect.<sup>19</sup> With one in 40 cases going to tribunal, the Department confirmed the SEN system was not operating sensibly and did not represent value for money. Annex shows the number of decisions taken to tribunal in individual local authority areas for 2023. The Department agreed that it could learn lessons from the tribunals process, and described how it was working with local authorities and the Ministry of Justice to reduce the adversarial nature of the system.<sup>20</sup>
11. We pressed the Department on how children's experiences varied across several aspects of the system. For example, the Department recognised a risk the tribunal system inherently favoured those with the means and knowledge to appeal, particularly given the significant and substantial processes involved to get a good outcome.<sup>21</sup> We also challenged the Department on differences between local authorities' timeliness in issuing EHC plans, varying in 2023 from 1% to 100% being issued within the statutory 20 weeks (Annex shows performance across individual local authorities for 2023).<sup>22</sup> The Department described how families in neighbouring local authorities experienced differing EHC plan waiting times, with 71.5% of EHC plans written on time in Lambeth and 19.2% in Southwark.<sup>23</sup> We also challenged on differences in the proportion of children with EHC plans where, for 2023/24, this varied from 2.7% (Nottinghamshire) to 7.5% (London Borough of Tower Hamlets) for children aged 5 to 15 (Annex shows data by individual local authority, at January 2024).<sup>24</sup>
12. The Department told us that the single biggest factor in whether a child gets an EHC plan is the school they attend, and that some schools seek plans more than others.<sup>25</sup> It partly attributed this to the definition of SEN being a relative judgement comparing a child's need and the provision available within local schools. Local authorities differ in the support offered in mainstream schools - for example 73% of pupils in Richmond Park with EHC plans are in mainstream settings, whereas in Burnley it is 45%. The Department believed greater consistency would be possible through

19 Q 30; C&AG's Report, para 2.5

20 Qq 30-32

21 Q 31

22 C&AG's Report, para 2.3

23 Q 10

24 C&AG's Report, para 2.4

25 Q 51

improving the support offered.<sup>26</sup> It recognised it could better share good practice, which it had been doing through its regional teams and change programme involving 32 local authorities across nine English regions.<sup>27</sup> In further evidence provided after our session, the Department added that it funds a ‘What Works in SEND’ programme that produces academic primary research and case studies that harness best practice. It is also developing ‘Insight Guides’ to share learning from its change programme.<sup>28</sup>

## Understanding and responding to demand

- 13.** Since 2015, the number of children with EHC plans has increased each year. In 2024, 576,000 children aged 0 to 25 years had an EHC plan, 140% more than in January 2015.<sup>29</sup> Within state schools, pupils with SEN support rose by 14% to 1.14 million. Increases across certain identified primary needs have significantly contributed to growing demand.<sup>30</sup> The Department confirmed that demand was growing fastest across three areas: autism spectrum disorder (ASD); speech, language and communication needs; and social, emotional and mental health.<sup>31</sup> The Department said all three categories were broad, ranging from developmental needs requiring short-term interventions to more intrinsic needs requiring lifelong support.<sup>32</sup> It described how some of these trends mirrored other countries, citing a 2023 meta-study showing, across 29 countries, prevalence of ASD consistently increasing from about 0.25% during the period from 1994 to 1999, towards 0.99% over 2015 to 2019 - other trends, however, are only seen in the UK. It speculated this could be due to the challenges meeting needs in mainstream settings leading to people seeking plans.<sup>33</sup> DHSC also described a changing understanding of conditions in society, with an increase in people coming forward for diagnosis and, in some cases, shifting diagnostic criteria.<sup>34</sup> The factors influencing rapid increases in SEN can be hard to quantify which creates a risk that the Department’s response is neither targeted most effectively, nor addressing the underlying social, educational or medical causes.<sup>35</sup>

26 Qq 14, 17–18

27 Q 12,

28 Qq 42, 45; Letter from the Department for Education to the Chair of the Committee, 2 December 2024.

29 Not all children and young people with a qualifying diagnosis will necessarily have an EHC plan. Further, not everyone aged 0–25 years with a condition, or conditions, that could mean they would have an EHC plan will have that condition(s) diagnosed.

30 C&AG’s Report para 2.17–2.19

31 Qq 10, 13

32 Q 17

33 Q 13

34 Qq 9

35 C&AG’s Report para 16



14. The Department told us that earlier good-quality support could help identify needs more easily and reduce demand, with fewer children going through the EHC plan process and “sat in a queue” for support.<sup>36</sup> The Department does not have a defined process or specific funding to identify and support needs earlier.<sup>37</sup> It described how less funding would be available given resources are directed towards those with EHC plans.<sup>38</sup> Given the increases in demand, the Department told us it would like to move to a model where schools provide support to cohorts of pupils within and throughout the school system, focussing on more frequently identified needs, such as speech and language or ASD. This would mean children no longer relying on an individualised plan for support. The Department said many of the teachers it spoke to support this approach.<sup>39</sup> It outlined three programmes currently providing support at an earlier stage. Programmes have had some success, with one seeing some language and oral skills improvements across four- to five-year-olds. Also, the Department expects to upskill staff in around 10% of primary schools by March 2025 through strengthened training resources, with the programme continuing after this date.<sup>40</sup>
15. In 2023, the Department estimated that national demand for state special school places exceeded capacity by at least 4,000 pupils, with 63% of schools over-capacity and supporting 9,500 extra pupils.<sup>41</sup> Departmental evidence shows students in overcrowded settings have lower attainment and are not as well supported in transitioning between settings and preparing for adulthood.<sup>42</sup> The Department told us it had started using information collected over the last two years to identify the largest capacity gaps and allocate funding.<sup>43</sup> The Department said it had invested over £3 billion in high-needs capacity funding since 2018–19, with over £2.4 billion spent since 2022–23. Local authorities have flexibility over the type of provision they fund, and the Department’s data indicated this had created around 50,000 special school places.<sup>44</sup>
16. The Department stressed improving mainstream as a core focus for Ministers, with 42% of those with an EHC plan currently supported in mainstream settings. However, it wanted to ensure the right balance between mainstream and specialist provision for those who need it.<sup>45</sup> The

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36 Q 10

37 C&AG’s Report, para 16

38 Qq 10, 31, 50

39 Qq 10, 50–51

40 Q 18

41 C&AG’s Report, para 10

42 Q 23

43 Q 14

44 Qq 23, 77

45 Qq 23–25

Department has started to compare outcomes for children with similar needs in state special and mainstream schools, but acknowledges this analysis has limitations.<sup>46</sup>

## Establishing inclusive mainstream schools

- 17.** The Children and Families Act 2014 introduced major reforms which included mainstream schools being more inclusive. However, there is limited evidence of progress, despite the Department confirming that inclusivity remained at the heart of its approach so children with SEN could spend time both in mainstream classrooms and receiving wider support.<sup>47</sup> The Department recognised it needed to develop its thinking on what excellent inclusive mainstream education should look like and will consider how to measure success. It cited Education Endowment Foundation work as providing evidence for on the elements of a good inclusive school with this including the ethos of a school, a supportive environment for all, and high-quality teaching.<sup>48</sup> The Department also noted the importance of teaching assistants, recognising that it needs to look at how to use them most effectively.<sup>49</sup>
- 18.** We challenged the Department on how it planned to boost the skills and capacity of teachers, with only 56% of mainstream school teachers in June 2023 saying they felt confident to support the needs of SEN children.<sup>50</sup> The Department told us that it is: revising teacher training content to include more on supporting pupils with SEN; offering relevant continuing professional development which had been well taken up; and introducing a 18-month professional leadership qualification for SEN Coordinators (SENCOs). All SENCOs must complete training within three years, with the first cohort starting in autumn. The Department also highlighted additional funding to train up to 600 more educational psychologists (employed by local government), to help reduce workload pressures and allow more time to be spent supporting children.<sup>51</sup>
- 19.** The Department noted that most schools feel others are not taking their share of SEN children.<sup>52</sup> With Ofsted not having a separate judgement on SEN provision within its published reports, no specific school funding focused on inclusivity and school performance data focused on academic

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46 C&AG's Report, para 2.25

47 Qq 21, 24: C&AG's Report paras 15 and 1.3

48 Q 26, 28–29

49 Q 26

50 C&AG's Report para 2.13

51 Qq 11, 27, 49–50

52 Q 50

attainment, schools are not incentivised to be inclusive.<sup>53</sup> The Department acknowledged that the 2023 improvement plan did not look hard enough at the barriers and levers to encouraging inclusivity.<sup>54</sup> It described looking at how Ofsted could incentivise inclusivity and promote good practice, which it felt could be improved as some schools offered excellent inclusive provision.<sup>55</sup> We asked the Department about local authorities' powers to require academy trusts to accept SEN children. It told us local authorities can apply to the Secretary of State to direct an academy to take a child, and that it is looking at local authorities' admissions role and powers through the Children's Wellbeing Bill announced in the King's Speech 2024.<sup>56</sup>

- 20.** We pressed the Department on how it would ensure high quality SEN support was consistently provided across mainstream schools. It explained how the current Curriculum and Assessment review would consider accessibility of the curriculum for children with SEN, who too often feel it has not worked for them. Also, the Department agreed to keep its new school building designs under review to, for example, create more small group workspaces.<sup>57</sup> On 4 December, the Minister for Early Education announced a £740 million capital investment in 2025–26 which could be used to adapt classrooms to be more accessible for children with SEN, create specialist facilities within mainstream schools, or provide more special schools places for pupils with the most complex needs.<sup>58</sup>

## Accessing health support

- 21.** Within the SEN system, health organisations have a critical role undertaking assessments to identify SEN needs and then providing relevant healthcare support. DHSC, which oversees local health providers, jointly published with the Department the statutory code of practice and then, in March 2023, the improvement plan setting out actions to address recognised challenges across the system.<sup>59</sup>
- 22.** DHSC told us that meeting children's health needs remained challenging across the SEN system, acknowledging significant waits for children's and adolescents' mental health support (CAMHS) across the country. It described struggling to manage steep rises in demand, particularly relating to autism, speech and language, and mental health needs.<sup>60</sup> For those

53 C&AG's Report para 15

54 Q 78

55 Qq 21, 26, 58

56 Qq 57–58

57 Qq 21, 26, 28–29

58 High Needs and Capital Funding written statement, 4 December 2024 [Written statements - Written questions, answers and statements - UK Parliament](#)

59 C&AG's Report paras 1.7, 2.37 and Figure 2

60 Qq 10, 71

state school pupils with EHC plans, 86% of the increase from 2018/19 to 2023/24 related to autism spectrum disorders, where the number of EHC plans increased 40%; speech, language and communication needs, where EHC plans went up 27%; and social, emotional and mental health needs, with a 16%.<sup>61</sup> This will impact the specialist support required and we heard, for example, how some children were waiting up to four years for ADHD assessments in Bradford.<sup>62</sup> DHSC described having produced a national framework and operational guidance in 2023 for autism, but recognised there was still a great deal to do.<sup>63</sup>

- 23.** We pressed DHSC on how it would bring down CAMHS waiting times. DHSC told us that it was focusing on high priority needs, with 130,000 children seen for the first time in the last three months and a median wait time of 20 days. However, DHSC acknowledged a further 300,000 children on the waiting list having waited much longer.<sup>64</sup> Its latest data, for September 2024, show 352,682 referrals for children and young people waiting for a first contact with NHS funded mental health services. The median wait time for this group was over 34 weeks, with 10% of referrals waiting over 114 weeks.<sup>65</sup> DHSC said it had significantly invested, and referred to mental health spending increasing from £11 billion to over £17 billion as it tried to enhance existing services and work out what future services should look like. DHSC told us that there had been a 40% increase in the number of mental health staff and described how it had been working to put more mental health services in schools, with 500 schools-based mental health teams now covering about 40% of the school population.<sup>66</sup> DHSC's existing long-term workforce plan aims to significantly increase the NHS workforce, including community health services, but DHSC said there were plans to look again at staffing as part of its 10-year plan for the recovery of the NHS. DHSC acknowledged it would probably take time to see a full recovery, although it was trying to see immediate progress.<sup>67</sup>

- 24.** Waiting lists for speech and language therapy are significant, with more than 40,000 children waiting for more than 12 weeks as at June 2024.<sup>68</sup> DHSC described making progress increasing the number of speech and language therapists which now stood at 7,419, 20% more than 2019, and

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61 C&AG's Report para 2.19 and Figure 9

62 Q 71

63 Q9

64 Q71

65 Letter dated 2 December 2024 from DHSC to Committee

66 Qq 10,71

67 Qq 10, 69

68 C&AG's Report para 2.10

working with the Department to provide earlier specialist support in schools. However, it recognised there was more to do with an aspiration for more speech and language therapists.<sup>69</sup>

25. DHSC told us that, while its data on community health services and mental health provision had improved over the last five to six years, that remained poor compared to hospital data, particularly for ADHD assessments where waiting lists were especially challenging.<sup>70</sup> DHSC subsequently provided details on the data it collects, including on waiting times.<sup>71</sup> It described working with the NHS and National Institute for Health and Care Research to improve data and with NHS Benchmarking, statisticians within the NHS, specifically on improving community health service data.<sup>72</sup>
26. DHSC told us it was working to make sure that each National Health Service Integrated Care Board (ICB), which brings together health organisations to deliver shared priorities locally, focuses on SEN. Currently only 2 out of 32 competing priorities for the NHS relate to SEN. DHSC said that in 2023 it focused on every ICB appointing an executive director responsible for SEN to better work alongside local authorities and the education system. It also described how planning guidance last year asked ICBs to look at community health services, including SEN support. It hoped these changes would lead ICB's to focus on community and mental health services for children across all their plans.<sup>73</sup>

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69 Q 79–80

70 Qq 7, 10, 15

71 Letter dated 2 December 2024 from DHSC to the Committee

72 Qq 7, 15

73 Qq 69–71, C&AG's Report para 17

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## 2 Financial sustainability and reforming the system

### Local authorities' immediate financial challenges

- 27.** Alongside core funding, the Department provides specific high-needs funding to local authorities to support children with SEN.<sup>74</sup> Over the period 2014–15 to 2024–25, high-needs funding increased by 58% in real terms to £10.7 billion, but an increase in EHC plans meant that funding per plan fell by 35%. Each year since 2016–17, most local authorities have spent more than their annual high-needs funding, with 101 local authorities (66% of those submitting returns) reporting they had done so in 2022/23. This has contributed to growing dedicated schools grant (DSG) deficits for many local authorities, which the Department estimates will reach £3.2 billion in March 2025.<sup>75</sup>
- 28.** The Department explained that since 2020, local authorities could account for DSG deficits separately, meaning they do not impact their overall financial position.<sup>76</sup> The Ministry of Housing, Communities and Local Government (MHCLG) introduced this accounting treatment, known as the “statutory override”, to help those local authorities in deficit deal with what the Department described as short-term pressures. The Department described how it had felt the challenges to be relatively localised and short-term whilst reforms were bedding in, but that was no longer the case. In 2022, government extended the statutory override, which the Department agreed was unusual, but felt necessary given the continued growth in pressures on local authorities.<sup>77</sup>
- 29.** We asked the Department what would happen when the statutory override ends in March 2026. If local authorities cannot balance their books, or have enough reserves to finance their day- to-day spending, they must issue a section 114 notice, triggering intervention by central government.<sup>78</sup> Some

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<sup>74</sup> C&AG's Report, para 1.9

<sup>75</sup> C&AG's Report, paras 11, 2.30

<sup>76</sup> Q36: C&AG's report, para 2.31

<sup>77</sup> Q 36

<sup>78</sup> C&AG's Report, para 2.29



66 (43%) of local authorities risk issuing a section 114 notice in March 2026, effectively declaring bankruptcy, and potentially impacting other services. The Department confirmed it was working closely with HM Treasury and MHCLG to consider solutions, and how it would manage the impact of the deficits on local government finances, but it could not say what the outcome would be. It assured us it would not wait until 2026 to decide on what will happen once the statutory override ends, since the sooner local authorities know the better, so they can plan.<sup>79</sup> The Department confirmed it would expect to report back to this Committee once a solution was agreed.<sup>80</sup> The Department has estimated that the cumulative deficit will be between £4.3 billion and £4.9 billion, but told us it believed this would be worse without its ongoing financial support work with the worst-affected local authorities.<sup>81</sup>

30. We pressed the Department on how it would ensure any solution to the statutory override would be fair to all local authorities. The Department recognised this challenge, with those local authorities in deficit having received differing support through financial intervention programmes, whilst it would not want to penalise those local authorities who had managed their budgets including some using their reserves to do so. For this reason, the Department described this as not straightforward and required some careful thinking, working with HM Treasury and MHCLG, to find the right solution.<sup>82</sup>

## Longer-term financial viability

31. Looking beyond the statutory override, the Department estimates continuing longer term financial challenges with forecast costs exceeding current funding, maintained in real terms, by between £2.9 billion and £3.9 billion in 2027–28 alone.<sup>83</sup> It has introduced programmes to help address financial challenges for those local authorities under most pressure, but local authorities still forecast significant deficits. The 97 local authorities participating in DfE’s Safety Valve or Delivering Better Value programmes, forecast cumulative deficits totalling an estimated £9.1 billion in 2028–29, taking account of savings realised through these programmes.<sup>84</sup> The Department recognised that, putting it all together, it needed to take a fundamental look at the system from end-to-end as the system does not give local authorities many levers, particularly when considering cost.<sup>85</sup>

79 Qq 37, 40–43, 81–82

80 Q 39

81 Q 36: C&AG’s Report, para 2.35

82 Qq 36, 38, 40, 81–82

83 C&AG’s Report, para 11

84 C&AG’s Report para 2.34, Figure 13

85 Qq 1, 78, 85

**32.** In 2021, the Department introduced the ‘Safety Valve’ programme to support local authorities with the highest deficits. In exchange for funding, local authorities agree how they will reduce the deficit through savings and delivering SEN services differently, particularly with earlier intervention. The Department explained that over £750 million of the £1.2 billion programme budget had been spent. It stressed that the Safety Valve programme did not aim to reduce the number of EHC plans, rather meet people’s needs more quickly to help local authorities better manage their budgets.<sup>86</sup> In 2022, the Department launched the ‘Delivering Better Value’ programme, which works similarly, for local authorities with slightly lower deficits and no Safety Valve agreement. It involves a smaller amount of funding.<sup>87</sup> The Department cited examples of good practice from Oldham and Blackpool, where changes to how SEN services are provided have led to lower deficits and improved parent confidence. The Department also wrote to us and told us that it encourages local authorities within the Safety Valve programme to learn from each other, that it has commissioned a qualitative evaluation study due to report in summer 2025, and that it has published an insights report on Delivering Better Value.<sup>88</sup>

**33.** We pressed the Department on its rationale for allocating financial support to local authorities based on deficits rather than SEN needs. The Department described that although funding was only available to those in deficit it was applying learning, such as intervening earlier, more widely. It recently encouraged local authorities to apply lessons from the Safety Valve and Delivering Better Value programmes in spending the extra £1 billion high-needs funding announced for 2025–26. The Department believes local authorities’ financial situation would be worse without the two interventions, as deficits have started to come down for those with agreements. However, it accepted that using the funding efficiently and effectively as a whole system continued to be challenging.<sup>89</sup> On 4 December, the Minister for Early Education confirmed the Department would not enter any more Safety Valve agreements pending wider reform of the system, whilst continuing to work with those having pre-existing agreements.<sup>90</sup>

**34.** We challenged the Department on the value for money of local authority spending on independent schools to provide for children with an EHC plan. This totalled £2 billion in 2022–23, a 46% real-terms increase since 2018–19, with a 17,000 (87%) rise in children with EHC plans at independent

86 Qq 42, 45

87 Q 42; C&AG’s Report, para 14

88 Qq 42, 45; Letter from the Department for Education to the Chair of the Committee, 2 December 2024.

89 Qq 36, 43–44, 72, 83–84

90 High Needs and Capital Funding Statement, 4 December 2024, [Written statements - Written questions, answers and statements - UK Parliament](#)



schools.<sup>91</sup> The Department said it remained committed to reducing the current high reliance on the independent sector, with it being more cost effective to support a child in mainstream school.<sup>92</sup> It costs £61,500 a year per pupil to support children with an EHC plan in an independent school, compared to £23,900 for special schools and £19,100 in mainstream secondary.<sup>93</sup> However, the Department recognised some needs will always need to be met in a specialist setting, with independent schools having a role to play. The Department told us it sees a lot of variation in how well needs are met in mainstream schools and local authorities use of different settings. It has started work looking at costs and tariffs, and recognised there is more to do to ensure that independent provision represents good value for money.<sup>94</sup>

35. We asked the Department about pressures on local authorities' wider budgets from the increased costs of home-to-school transport, which is not covered by high-needs funding. The Department stressed this was an important element of the SEN system, and highlighted a 77% increase since 2015 (from £0.6 billion to £1.3 billion) in home-to-school transport budgets for those with SEN. The Department noted that the main driver for increased costs was more children travelling further to their school or other settings. It told us it has worked with local authorities to understand the pressures, including through meeting transport and SEN teams, and is looking to gather better data, for example on types of school transport. The Department said that greater use of taxis and individual transport is more expensive, and more thinking is needed on how transport is organised. It felt that the best way to reduce transport cost in the longer term was making sure children's needs are met in their local communities.<sup>95</sup>

## Delivering system reforms

36. In March 2023, after launching a major review of the SEN system following recognition of challenges in September 2019, the Department and DHSC jointly published their improvement plan which listed 42 commitments to reform the system.<sup>96</sup> The Department told us it understood the frustration over the time taken to develop the plan. It cited reasons for the slow progress which included: the pandemic response which diverted resources; needing to adapt the plan post-pandemic; and consulting as widely as

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91 C&AG's Report, para 10 and 1.12

92 Qq 52, 56

93 C&AG's Report, para 10

94 Qq 47–48, 52–53, 56

95 Q 46

96 C&AG's Report paragraphs 5, 1.17 and Figure 6

possible. The Department said it had continued to work on reforms while the plan was developed, such as teacher training improvements, and it would use what it had learnt in developing a new plan.<sup>97</sup>

**37.** Drawing from the improvement plan, the Department developed an internal list of 136 aspirations and actions, including the 42 commitments, and Spending Review 2021 interventions. Some elements were specific (such as national standards) but others were framed as broad aspirations.<sup>98</sup> The Department agreed it needed a much clearer, costed plan detailing what it needs to achieve, how and when. Having a process to track likely outcomes and benefits was fundamental in demonstrating improvements to families.<sup>99</sup> Nevertheless, the Department accepted it could better track progress and committed to better understanding the costs and interdependencies of measures in its new plan. This had been complicated by shared responsibilities across the system.<sup>100</sup> The Department was not consistently tracking progress implementing its 136 internal aspirations and actions or have clear processes to understand the potential and likely outcomes and benefits.<sup>101</sup>

**38.** The Department's underpinning objective for the SEN system is to improve outcomes for children and young people. Improvements in educational attainment have been inconsistent, albeit with some positives.<sup>102</sup> We asked the Department how it would measure outcomes beyond focussing on educational attainment. The Department explained that the SEN code of practice contained expectations, such as children being supported to develop independence, and being prepared for education or employment.<sup>103</sup> The Department told us that it was challenging to measure wider outcomes consistently as the definition of SEN is broad and covers a range of needs, which vary in severity and can change over time.<sup>104</sup> It described how, to better understand what works well for children with SEN, it would need a range of measures. Alongside educational attainment, these should include children's experience of the system, with attendance one measure indicating how well supported children feel. The Department also described developing more transparent measures, for example on how well services work together, as part of its Change Programme covering 32 local authorities.<sup>105</sup>

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97 Qq 60, 61, 66

98 C&AG's Report para 1.17

99 Qq 60, 61, 63–64, 65

100 Qq 60, 61, 63–64, 65

101 C&AG's Report, para 13, 1.17, 1.20 and 1.21

102 C&AG's Report para 1.6

103 Q 2

104 Q 5

105 Q15

39. The Department does not have data on a range of issues, such as places available for children with SEN in mainstream schools; different types of school transport; number of schools refusing to admit children; and whole system costs.<sup>106</sup> The Department acknowledged that it could do better with its data to really understand children's experiences.<sup>107</sup> However, radically improved data may not solve the issue given challenges defining SEN.<sup>108</sup> It told us it currently gets data through the school census but continues to develop its overall data strategy to understand the full picture. The Department said it had also invested in a longitudinal study, looking in more detail at children's experiences of the system, and had been working to establish much better data flows from the local authorities to understand different experiences and practices across the country. The Department's ongoing change programme aims to develop and test better dashboards to understand how and why experiences differ and help share good practice.<sup>109</sup>
40. We asked the Department how it was improving cross-government working and building a shared understanding of priorities. The Department noted that shared responsibilities across the system made delivering support more complex.<sup>110</sup> It agreed that the join-up between health and education was critical and said that representatives from the two departments talked regularly.<sup>111</sup> The Department told us it had created a new cross-government Portfolio Board, bringing together all the key departments alongside local government representatives. The Department highlighted its plans to draw on wider expertise, including on inclusive practice and in working closely with families. The Department said it had made internal changes, moving its SEN directorate into the schools group, to focus better on integrating SEN support within mainstream education<sup>112</sup> DHSC added that it was working to make sure that, at a local level, integrated care boards were focused on better engagement between the local authority and the education system.<sup>113</sup>

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106 Q 46, 59; Supplementary evidence in correspondence from the Department of Education to the Chair of the Committee, 2 December 2024; C&AG's Report para 9 and 1.8

107 Q6

108 Qq 8, 15–16

109 Qq 6, 7, 15, 16; Supplementary evidence in correspondence from the Department of Education to the Chair of the Committee, 2 December 2024.

110 Q64

111 Q67

112 Q20, 64, 67

113 Q 69–70

## Annex: Local authority data

Local authority data showing the percentage of children aged 5 to 15 years with Education and health care (EHC) plans, timeliness of EHC plans, and proportion of EHC plan decisions taken to SEN tribunal

| Local Authority                     | Percentage of children aged 5 to 15 with EHC plans in January 2024 (1) | Percentage of new EHC plans issued within 20 weeks in 2023 | Proportion of EHC plan decisions taken to SEND tribunal 2023 |
|-------------------------------------|--|--|--|
| Range                               | 2.7% to 7.5%   | 0.0% to 100.0%   | 0.2% to 7.0%   |
| Average across England              | 5.2%   | 50.3%  | 2.5%   |
| Barking and Dagenham                | 4.6%   | 14.4%  | 1.3%   |
| Barnet                              | 4.5%   | 100.0%   | 3.6%   |
| Barnsley                            | 6.1%   | 91.7%  | 1.3%   |
| Bath and North East Somerset        | 6.6%   | 39.1%  | 1.0%   |
| Bedford                             | 4.8%   | 90.0%  | 1.1%   |
| Bexley                              | 5.5%   | 84.8%  | 1.5%   |
| Birmingham                          | 4.1%   | 60.5%  | 4.4%   |
| Blackburn with Darwen               | 4.2%   | 91.4%  | 0.6%   |
| Blackpool                           | 5.4%   | 85.0%  | 0.5%   |
| Bolton                              | 5.0%   | 46.3%  | 0.6%   |
| Bournemouth, Christchurch and Poole | 5.3%   | 4.8%   | 2.1%   |
| Bracknell Forest                    | 5.6%   | 40.3%  | 2.8%   |
| Bradford                            | 4.9%   | 71.4%  | 2.5%   |
| Brent                               | 5.4%   | 38.1%  | 1.2%   |
| Brighton and Hove                   | 5.5%   | 80.5%  | 2.6%   |
| Bristol, City of                    | 5.4%   | 57.1%  | 2.1%   |
| Bromley                             | 5.8%   | 34.9%  | 2.7%   |
| Buckinghamshire                     | 5.6%   | 49.0%  | 2.6%   |
| Bury                                | 6.7%   | 74.1%  | 1.3%   |

| Local Authority           | Percentage of children aged 5 to 15 with EHC plans in January 2024 (1) | Percentage of new EHC plans issued within 20 weeks in 2023 | Proportion of EHC plan decisions taken to SEND tribunal 2023 |
|---------------------------|--|--|--|
| Calderdale                | 5.4%   | 97.8%  | 0.7%   |
| Cambridgeshire            | 5.9%   | 64.9%  | 1.6%   |
| Camden                    | 4.7%   | 96.6%  | 2.9%   |
| Central Bedfordshire      | 6.2%   | 33.4%  | 2.6%   |
| Cheshire East             | 6.4%   | 67.8%  | 1.9%   |
| Cheshire West and Chester | 5.3%   | 6.5%   | 1.3%   |
| Cornwall                  | 4.0%   | 1.6%   | 2.3%   |
| County Durham             | 4.7%   | 1.9%   | 4.4%   |
| Coventry                  | 4.5%   | 35.7%  | 2.6%   |
| Croydon                   | 5.4%   | 82.5%  | 1.2%   |
| Cumberland                | 5.8%   | 27.1%  | 1.0%   |
| Darlington                | 5.2%   | 83.9%  | 1.3%   |
| Derby                     | 5.9%   | 26.8%  | 1.9%   |
| Derbyshire                | 4.4%   | 17.8%  | 4.0%   |
| Devon                     | 6.7%   | 4.9%   | 4.1%   |
| Doncaster                 | 4.4%   | 43.4%  | 1.7%   |
| Dorset                    | 6.4%   | 60.2%  | 2.6%   |
| Dudley                    | 5.7%   | 46.6%  | 2.5%   |
| Ealing                    | 5.5%   | 83.4%  | 1.4%   |
| East Riding of Yorkshire  | 5.8%   | 98.7%  | 1.3%   |
| East Sussex               | 4.7%   | 87.6%  | 7.0%   |
| Enfield                   | 6.4%   | 95.6%  | 1.1%   |
| Essex                     | 4.6%   | 0.9%   | 4.1%   |
| Gateshead                 | 5.2%   | 86.9%  | 6.3%   |
| Gloucestershire           | 5.2%   | 35.0%  | 3.9%   |
| Greenwich                 | 4.6%   | 63.5%  | 2.4%   |
| Hackney (3)               |  |  | 1.8%   |
| Halton                    | 6.4%   | 26.3%  | 1.4%   |
| Hammersmith and Fulham    | 5.9%   | 81.0%  | 1.6%   |
| Hampshire                 | 6.2%   | 75.4%  | 3.3%   |
| Haringey                  | 6.0%   | 97.7%  | 2.8%   |
| Harrow                    | 4.5%   | 21.2%  | 1.0%   |

| Local Authority             | Percentage of children aged 5 to 15 with EHC plans in January 2024 (1) | Percentage of new EHC plans issued within 20 weeks in 2023 | Proportion of EHC plan decisions taken to SEND tribunal 2023 |
|-----------------------------|--|--|--|
| Hartlepool                  | 4.7%   | 44.3%  | 2.4%   |
| Havering                    | 4.8%   | 94.3%  | 1.2%   |
| Herefordshire, County of    | 4.8%   | 77.1%  | 1.3%   |
| Hertfordshire               | 4.7%   | 40.2%  | 4.5%   |
| Hillingdon                  | 5.2%   | 56.5%  | 1.5%   |
| Hounslow                    | 5.3%   | 94.0%  | 1.8%   |
| Isle of Wight               | 7.0%   | 0.0%   | 2.7%   |
| Islington                   | 6.7%   | 65.9%  | 4.7%   |
| Kensington and Chelsea      | 4.0%   | 98.9%  | 4.0%   |
| Kent                        | 6.0%   | 18.0%  | 3.6%   |
| Kingston upon Hull, City of | 5.4%   | 28.5%  | 1.5%   |
| Kingston upon Thames        | 5.5%   | 47.3%  | 2.4%   |
| Kirklees                    | 4.4%   | 13.0%  | 1.2%   |
| Knowsley                    | 7.0%   | 46.9%  | 1.0%   |
| Lambeth                     | 6.8%   | 71.5%  | 1.4%   |
| Lancashire                  | 4.8%   | 80.2%  | 2.1%   |
| Leeds                       | 3.1%   | 8.4%   | 1.8%   |
| Leicester                   | 4.5%   | 0.0%   | 1.4%   |
| Leicestershire              | 4.6%   | 6.0%   | 2.9%   |
| Lewisham                    | 6.6%   | 98.6%  | 1.3%   |
| Lincolnshire                | 6.0%   | 99.5%  | 1.4%   |
| Liverpool                   | 6.8%   | 98.8%  | 3.5%   |
| Luton                       | 5.0%   | 32.1%  | 0.7%   |
| Manchester                  | 7.1%   | 61.6%  | 0.9%   |
| Medway                      | 5.0%   | 26.0%  | 2.7%   |
| Merton                      | 6.4%   | 67.3%  | 1.2%   |
| Middlesbrough               | 6.1%   | 96.8%  | 0.6%   |
| Milton Keynes               | 4.1%   | 66.1%  | 2.8%   |
| Newcastle upon Tyne         | 5.5%   | 6.5%   | 0.2%   |
| Newham                      | 4.0%   | 79.6%  | 1.9%   |
| Norfolk                     | 6.4%   | 42.6%  | 3.2%   |
| North East Lincolnshire     | 5.6%   | 38.7%  | 0.3%   |
| North Lincolnshire          | 4.5%   | 30.0%  | 0.6%   |

| Local Authority        | Percentage of children aged 5 to 15 with EHC plans in January 2024 (1) | Percentage of new EHC plans issued within 20 weeks in 2023 | Proportion of EHC plan decisions taken to SEND tribunal 2023 |
|------------------------|--|--|--|
| North Northamptonshire | 5.3%   | 73.6%  | 3.4%   |
| North Somerset         | 5.0%   | 41.7%  | 3.4%   |
| North Tyneside         | 5.7%   | 78.7%  | 3.8%   |
| North Yorkshire        | 4.6%   | 44.8%  | 3.5%   |
| Northumberland         | 6.5%   | 41.6%  | 0.5%   |
| Nottingham             | 3.3%   | 67.1%  | 2.1%   |
| Nottinghamshire        | 2.7%   | 32.3%  | 2.2%   |
| Oldham                 | 5.7%   | 95.0%  | 1.6%   |
| Oxfordshire            | 4.8%   | 53.7%  | 5.1%   |
| Peterborough           | 4.4%   | 82.9%  | 0.9%   |
| Plymouth               | 4.9%   | 17.8%  | 5.1%   |
| Portsmouth             | 5.1%   | 1.6%   | 1.0%   |
| Reading                | 5.7%   | 74.9%  | 2.9%   |
| Redbridge              | 4.5%   | 76.4%  | 1.3%   |
| Redcar and Cleveland   | 5.8%   | 48.4%  | 1.2%   |
| Richmond upon Thames   | 4.8%   | 45.1%  | 2.4%   |
| Rochdale               | 5.4%   | 47.0%  | 1.0%   |
| Rotherham              | 6.1%   | 76.7%  | 1.5%   |
| Rutland                | 4.6%   | 65.7%  | 2.3%   |
| Salford                | 5.9%   | 49.6%  | 2.2%   |
| Sandwell               | 4.6%   | 35.2%  | 0.7%   |
| Sefton                 | 5.8%   | 40.4%  | 1.0%   |
| Sheffield              | 5.0%   | 53.1%  | 5.0%   |
| Shropshire             | 4.4%   | 38.3%  | 0.9%   |
| Slough                 | 4.5%   | 18.5%  | 1.5%   |
| Solihull               | 5.0%   | 99.4%  | 3.9%   |
| Somerset               | 4.9%   | 42.1%  | 3.1%   |
| South Gloucestershire  | 5.2%   | 43.1%  | 2.4%   |
| South Tyneside         | 6.0%   | 74.6%  | 2.0%   |
| Southampton            | 5.7%   | 100.0%   | 3.0%   |
| Southend-on-Sea        | 5.1%   | 3.8%   | 1.7%   |
| Southwark              | 6.0%   | 19.2%  | 2.5%   |
| St. Helens             | 4.9%   | 10.8%  | 2.4%   |
| Staffordshire          | 4.7%   | 31.1%  | 3.4%   |



| Local Authority         | Percentage of children aged 5 to 15 with EHC plans in January 2024 (1) | Percentage of new EHC plans issued within 20 weeks in 2023 | Proportion of EHC plan decisions taken to SEND tribunal 2023 |
|-------------------------|--|--|--|
| Stockport               | 5.2%   | 9.9%   | 1.1%   |
| Stockton-on-Tees        | 5.5%   | 99.4%  | 2.8%   |
| Stoke-on-Trent          | 5.5%   | 48.9%  | 2.8%   |
| Suffolk                 | 5.0%   | 3.9%   | 2.3%   |
| Sunderland              | 5.1%   | 61.0%  | 2.5%   |
| Surrey                  | 5.9%   | 16.2%  | 4.7%   |
| Sutton                  | 5.0%   | 92.9%  | 2.9%   |
| Swindon                 | 5.5%   | 73.7%  | 2.7%   |
| Tameside                | 6.3%   | 57.2%  | 0.9%   |
| Telford and Wrekin      | 5.1%   | 98.1%  | 3.1%   |
| Thurrock                | 6.0%   | 88.5%  | 0.9%   |
| Torbay                  | 6.9%   | 46.2%  | 1.2%   |
| Tower Hamlets           | 7.5%   | 48.3%  | 0.8%   |
| Trafford                | 5.4%   | 62.4%  | 0.6%   |
| Wakefield               | 5.3%   | 89.3%  | 1.7%   |
| Walsall                 | 6.5%   | 60.2%  | 1.2%   |
| Waltham Forest          | 6.5%   | 90.7%  | 0.9%   |
| Wandsworth              | 6.0%   | 99.7%  | 2.4%   |
| Warrington              | 4.7%   | 30.4%  | 0.4%   |
| Warwickshire            | 4.6%   | 42.9%  | 2.5%   |
| West Berkshire          | 4.7%   | 73.9%  | 2.9%   |
| West Northamptonshire   | 4.4%   | 6.2%   | 3.6%   |
| West Sussex             | 4.7%   | 3.6%   | 3.3%   |
| Westminster             | 5.6%   | 99.4%  | 2.4%   |
| Westmorland and Furness | 5.7%   | 55.3%  | 0.4%   |
| Wigan                   | 5.2%   | 64.4%  | 0.8%   |
| Wiltshire               | 6.2%   | 27.5%  | 2.1%   |
| Windsor and Maidenhead  | 4.1%   | 95.3%  | 6.1%   |
| Wirral                  | 7.1%   | 32.5%  | 2.5%   |
| Wokingham               | 4.8%   | 71.6%  | 4.2%   |
| Wolverhampton           | 4.9%   | 75.8%  | 0.7%   |
| Worcestershire          | 5.1%   | 27.7%  | 1.5%   |
| York                    | 4.3%   | 96.2%  | 2.2%   |



Notes:

1) The percentage of children aged 5 to 15 with EHC plans in January 2024 refers to children living in each local authority

2) The percentage of pupils with SEN without EHC plans in January 2024 includes all state and independent schools

3) Detailed EHC plan data are not available for the London Borough of Hackney for 2024

4) The City of London and Isles of Scilly are not included

Source: <https://explore-education-statistics.service.gov.uk/find-statistics/education-health-and-care-plans>

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# Formal Minutes

**Thursday 9 January 2025**

## Members present

Sir Geoffrey Clifton-Brown, in the Chair

Mr Clive Betts

Nesil Caliskan

Anna Dixon

Peter Fortune

Rachel Gilmour

Sarah Green

Rebecca Paul

Oliver Ryan

## Declaration of interests

The following declarations of interest relating to the inquiry were made:

### **18 November 2024**

Mr Clive Betts declared the following interest: Vice President of the Local Government Association.

Nesil Caliskan declared the following interests: Former Leader, London Borough of Enfield, former Leader of the Labour Group, Local Government Association.

Mr Luke Charters declared the following interest: wife is a primary school teacher.

Anna Dixon declared the following interests: previously worked at DHSC and has relative with autism who was supported by a Civil Service internship.

Chris Kane declared the following interest: wife is a primary school teacher.

Rebecca Paul declared the following interest: Surrey County Councillor

Michael Payne declared the following interests: Nottinghamshire County Councillor, Vice President of the Local Government Association, and a member of GMB and Unison.

Sarah Hall declared the following interest: Cabinet Member for Children's Services at Warrington Council

## **Support for children and young people with special educational needs**

Draft Report (*Support for children and young people with special educational needs*), proposed by the Chair, brought up and read.

*Ordered*, That the draft Report be read a second time, paragraph by paragraph.

Paragraphs 1 to 40 read and agreed to.

Annex and Summary agreed to.

Introduction agreed to.

Conclusions and recommendations agreed to.

*Resolved*, That the Report be the First Report of the Committee to the House.

*Ordered*, That the Chair make the Report to the House.

*Ordered*, That embargoed copies of the Report be made available (Standing Order No. 134).

## **Adjournment**

Adjourned till Monday 13 January at 3 p.m.

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# Witnesses

The following witnesses gave evidence. Transcripts can be viewed on the [inquiry publications page](#) of the Committee's website.

## Monday 18 November 2024

**Susan Acland-Hood**, Permanent Secretary, Department for Education;

**Juliet Chua CB**, Director-General Schools, Department for Education;

**Alison Ismail**, Senior Responsible Officer for SEN, Department for Education;

**Jonathan Marron**, Director General Primary Care and Prevention,  
Department for Health and Social Care

[Q1-87](#)

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# Published written evidence

The following written evidence was received and can be viewed on the [inquiry publications page](#) of the Committee's website.

SFC numbers are generated by the evidence processing system and so may not be complete.

|    |  |                         |
|----|--|-------------------------|
| 1  | Day, Dr Anne-Marie; and Westwood, Dr Kate  | <a href="#">SFC0078</a> |
| 2  | ADHD 360   | <a href="#">SFC0039</a> |
| 3  | Action Cerebral Palsy  | <a href="#">SFC0001</a> |
| 4  | Ambitious about Autism   | <a href="#">SFC0074</a> |
| 5  | Anonymised   | <a href="#">SFC0071</a> |
| 6  | Auditory Verbal UK   | <a href="#">SFC0035</a> |
| 7  | Better Communication CIC   | <a href="#">SFC0073</a> |
| 8  | British Association of Teachers of Deaf Children and Young People  | <a href="#">SFC0030</a> |
| 9  | Carers Trust   | <a href="#">SFC0060</a> |
| 10 | Centre for Studies on Inclusive Education  | <a href="#">SFC0080</a> |
| 11 | Challenging Behaviour Foundation   | <a href="#">SFC0070</a> |
| 12 | Children's Services Development Group (CSDG)   | <a href="#">SFC0057</a> |
| 13 | Contact  | <a href="#">SFC0017</a> |
| 14 | Council for Disabled Children  | <a href="#">SFC0065</a> |
| 15 | Devon SEND Parents and Carers for Change   | <a href="#">SFC0072</a> |
| 16 | Disabled Children's Partnership  | <a href="#">SFC0037</a> |
| 17 | Early Education and Childcare Coalition  | <a href="#">SFC0043</a> |
| 18 | Family Fund  | <a href="#">SFC0024</a> |
| 19 | Farran, Professor Emily (Professor of Cognitive Development, University of Surrey)                           | <a href="#">SFC0061</a> |
| 20 | Herwegen, Professor Jo Van (Professor of Developmental Psychology and Education, UCL Institute of Education) | <a href="#">SFC0010</a> |
| 21 | IPSEA (Independent Provider of Special Education Advice)   | <a href="#">SFC0004</a> |
| 22 | Information, Advice and Support Services Network   | <a href="#">SFC0047</a> |

|    |   |                         |
|----|---|-------------------------|
| 23 | Kids  | <a href="#">SFC0052</a> |
| 24 | Learning in Harmony Trust                                     | <a href="#">SFC0032</a> |
| 25 | Local Government Association                                  | <a href="#">SFC0040</a> |
| 26 | Minerva's Virtual Academy                                     | <a href="#">SFC0056</a> |
| 27 | NASS (National Association Special Schools)                   | <a href="#">SFC0029</a> |
| 28 | NASUWT  | <a href="#">SFC0048</a> |
| 29 | NEU   | <a href="#">SFC0044</a> |
| 30 | NHS Confederation   | <a href="#">SFC0038</a> |
| 31 | National Association of Head Teachers (NAHT)                  | <a href="#">SFC0053</a> |
| 32 | National Autistic Society                                     | <a href="#">SFC0045</a> |
| 33 | National Development Team for Inclusion                       | <a href="#">SFC0075</a> |
| 34 | Natspec   | <a href="#">SFC0033</a> |
| 35 | Nexus Multi Academy Trust                                     | <a href="#">SFC0015</a> |
| 36 | Royal College of Speech and Language Therapists               | <a href="#">SFC0042</a> |
| 37 | SEND Crisis Hertfordshire                                     | <a href="#">SFC0025</a> |
| 38 | Selective Mutism Information and Research Association (SMiRA) | <a href="#">SFC0022</a> |
| 39 | Sense   | <a href="#">SFC0034</a> |
| 40 | Somerset SENDIAS Service                                      | <a href="#">SFC0036</a> |
| 41 | Special Educational Consortium                                | <a href="#">SFC0051</a> |
| 42 | Speech and Language UK  | <a href="#">SFC0077</a> |
| 43 | The BUSY Group UK   | <a href="#">SFC0063</a> |
| 44 | The British Psychological Society                             | <a href="#">SFC0028</a> |
| 45 | The Disability Policy Centre                                  | <a href="#">SFC0003</a> |
| 46 | Thomas Pocklington Trust                                      | <a href="#">SFC0014</a> |
| 47 | Triple P UK   | <a href="#">SFC0054</a> |
| 48 | West Sussex County Council                                    | <a href="#">SFC0059</a> |
| 49 | Westcott, Karen (Secretary, F40)                              | <a href="#">SFC0079</a> |
| 50 | Witherslack Group   | <a href="#">SFC0055</a> |