

SPECIAL EDUCATION NEEDS AND DISABILITIES AND INCLUSION STRATEGY 2024-2029



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List of Abbreviations

ACE	Action, Change, Equality
ADHD	Attention Deficit Hyperactivity Disorder
ASD	Autism Spectrum Disorder
CAMHS	Child and Adolescent Mental Health Services
CYP	Children and Young People
DSP	Designated Specialist Provision
EBSA	Emotionally Based School Avoidance
EHC	Education, Health and Care
EHCP	Education, Health and Care Plan
ELSA	Emotional Literacy Support Assistants
GPCPF	Greenwich Parent Carer Forum
RBG	Royal Borough of Greenwich
SEMH	Social, Emotional and Mental Health
SENCO	Special Educational Needs Coordinator
SEND	Special Educational Needs and Disability

SEND AND INCLUSION VISION DEVELOPED BY YOUNG PEOPLE AT SHOOTERS HILL CAMPUS

Our SEND and Inclusion Strategy 2024-2029 has been co-produced with children and their families, and our partners in the local area. We have captured views through a range of consultation activities including facilitated workshops, online questionnaires and individual meetings. This has been brought together with our recent self-evaluation for our Local Area Inspection (May 2024).

Children in one of our ACE (Action, Change, Equality) participation groups at Shooters Hill Campus created their own vision statement (below) in a workshop session, which is the foundation of our strategy.

*We want Greenwich to be a **safe** place where we have a feeling of **belonging**.*

We won't be judged and where everyone is important no matter who they are.

We want you to work with us to help others to understand diversity and difference.

We want to have opportunities to progress in our education with good support from our schools, the community, our families, and friends, so we are as independent as possible and prepared for adulthood.

Above all we want to do well, celebrate life and be happy!

FOREWORD

I. ACE

We are part of the ACE participation network in Royal Greenwich. ACE talk about how we can improve things and give new ideas to Royal Greenwich. We have helped decide what needs to go in this strategy and are proud of the photos and art that the ACE network sent to be included and hope you like them too! We like being listened to, sharing our opinions and meeting new people in the ACE network. We also like ACE celebrations and getting rewards for doing that like going to Nando's and the O2.

We think Royal Greenwich is great because it has history, exciting things like a cable car, quiet green spaces and the River Thames, good transport like the "Lizzy" line, great schools and colleges, and a rich culture and diversity. We also like the people in the Council we meet through ACE!

EXECUTIVE SUMMARY

This SEND and Inclusion Strategy sets out the ambition for children with Special Educational Needs and Disabilities (SEND) and their families from 2024-2029 by the Local Area Partnership in Royal Greenwich.

It has been led by our children, who have set the vision and ambitions for the strategy through a series of workshops and questionnaires. They have also provided artwork to illustrate the document. It builds on

our last strategy, recent Local Area Partnership Inspection priorities, and Self Evaluation Framework, which formed part of the inspection process.

Families have been involved throughout the process in determining the content and layout of the document. Professionals across the partnership have also been involved in workshops and surveys, so it is as inclusive as possible of the views of senior managers, frontline workers and our schools.

The strategy will support the inclusion of children and young people within their homes, schools and the wider community. It is supported by a detailed SEND and Inclusion Plan to ensure that the ambitions are realised.

The strategy has been written at a time when there are many changes in the landscape of SEND and significant challenges in meeting demand and responding to funding pressures. These have been recognised within the strategy, which is sufficiently flexible to respond to changing national guidance.

Our young people have established five key ambitions for the strategy:

- We want to be a part of our local community and go to inclusive fun activities like everyone else.
- We want schools and nurseries to support us better and have enough places so we can go to the right school for us.
- We want to be independent and ready for work and/or college when we leave school.
- We want to be as safe and healthy as we can be.
- We want ourselves, our families and friends to understand our needs and be able to support us well.

The SEND and Inclusion Strategy will develop inclusive practice in all our schools/settings and providers. This will prepare young people for their lives as adults and ensure that, wherever possible, they are able to stay in their local community and access the right provision to meet their needs.

HOW WE HAVE DEVELOPED THIS STRATEGY

The council's culture of co-production with our children, families, schools and settings, formalised in the Our Greenwich borough plan, was recognised in our Local Area SEND Inspection (May 2024): "The voice of children and young people, parents and carers is heard loud and clear in Greenwich"

We developed this strategy using information from past consultations, but also consulted specifically with different groups between November to March 2024, including:

- 428 children in our wider ACE network, from Royal Greenwich mainstream and special schools, were supported to use differentiated questionnaires so everyone could be included.
- 116 of our parents either completed an online questionnaire or attended an in-person session.
- 43 of our schools and several nursery settings through an online survey and facilitated in-person sessions.
- Health professionals who work with us, including therapists, health visitors, GPs, specialist Child and Adolescent Mental Health Service (CAMHS), school nurses and dieticians.
- Royal Borough of Greenwich staff who support us, including the people who are responsible for our Education, Health Care Plans, Educational Psychology, and Outreach and Inclusion services that visit us in school.
- Royal Borough of Greenwich social workers, including those who focus on moving to adulthood, as well as the people who organise our Short Breaks.

The areas for improvement from our recent Local Area SEND Inspection (May 2023) are embedded in the priorities as appropriate:

- Ensure that the Annual Review process results in EHC plans reflecting the child's current needs, aspirations and objectives.
- Ensure that expectant mothers receive the mandated antenatal contact, in-line with the healthy child programme.

We've also embedded the areas identified in our Self Evaluation Framework, where we could do better.

All the photographs and artwork have been produced by us as part of the consultation process.

WHAT DO WE WANT YOU TO KNOW ABOUT ROYAL GREENWICH?

I. Data section

- 96,400¹ children and young people aged 0-25 in Royal Greenwich, about 32% of the overall population
- As of January 2024:
 - Education, Health and Care Plan (EHCP) for 2,738 children and young people aged 0-25, an 11% increase in the 12 months since January 2023
 - Almost 3% of all 0–25-year-olds in Royal Greenwich have an EHCP
 - 2,003 pupils in our schools have an EHCP with a further 7,524 identified as SEN Support: 21% of all pupils – this is higher than London and England;
 - ASD is the most prevalent need for CYP with an EHCP - c45%;
 - Speech Language and Communication is the most prevalent need at c.40%.
- Boys make up 50% of all CYP in Royal Greenwich / pupils but 72% of CYP with SEND.
- Number of CYP with an EHCP continues to grow
- A further 250 CYP will need specialist placements over the next year.

Where are our EHCP CYP placed?²	RBG %	London %	England %
Type of Provision			
Mainstream School	46%	48%	40%
Independent Mainstream	1%	2%	1%
Special School	22%	24%	28%
Independent or non-maintained special school	4%	5%	6%
Alternative provision / pupil referral unit	3%	1%	1%
Further education	15%	14%	15%
Educated elsewhere	4%	3%	4%
Other	5%	4%	5%

Children in the Early Years receiving Special Educational Needs Inclusion Fund at Band3/4 (a high level) so likely to get an EHCP:

April 2024- up till 01/05/2024- 24

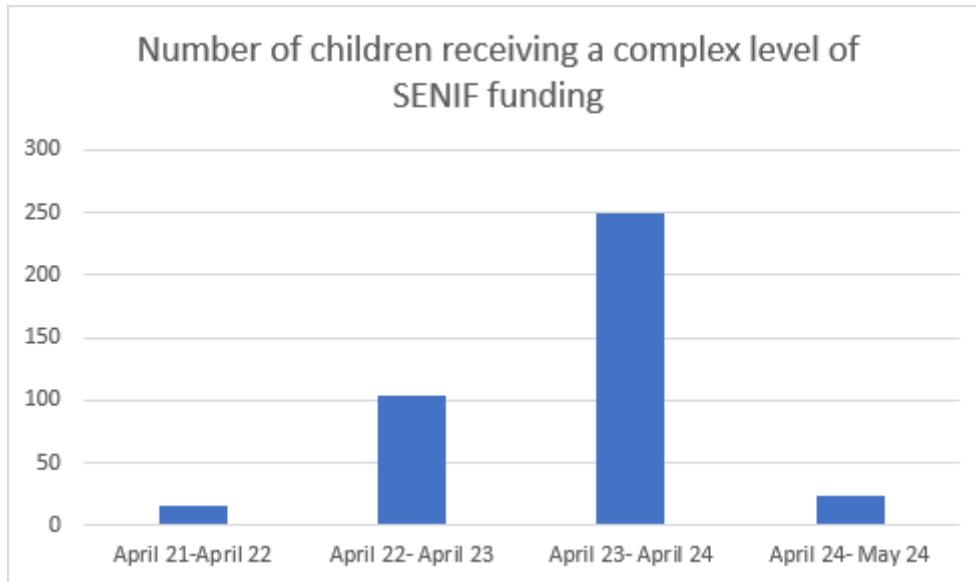
April 2023- 2024- 249

April 2022-2023- 104

April 2021-2022- 15

¹ 2021-based GLA BPO projections

² mainstream school means any state funded school that is not a special school; so includes both LA maintained and academy/free schools Educated elsewhere covers settings such as educated at home and tuition. Other includes settings such as apprenticeships/training/work placements, not in education and anything else not covered by a main category



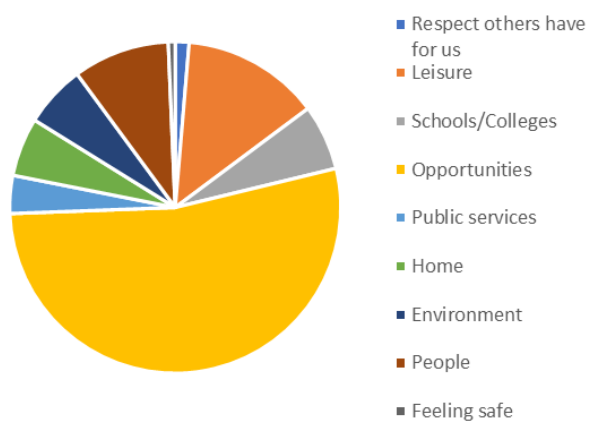
Autistic Spectrum Disorder (ASD) DATA

- In Royal Greenwich, the average number of referrals per month in 2021 was 29, in 2022 it was 52 and in 2023 it was 82 – an increase of 183%.
- The number of CYP waiting for assessment has increased by 68% between 2022 and 2023.

2. What's great about Royal Greenwich?

- 70% of us have said we are happy at school.
- Most of us think that there are lots of opportunities in Royal Greenwich including: parks/places to visit like the river, the cinema, bowling, funfair, and playgrounds including slides and swings.
Easy access to places like London Zoo and the O2.
Shops including chicken shops, and the market.
History, including museums, the Cutty Sark and the ice cream van!
- School
 - *"It is like a big family"*
 - *"At school I am happy we get to do fun things ...It's good – life"*
 - *"I am happy – I like the DSP"* (specialist provision in a mainstream school)

THE BEST THINGS ABOUT GREENWICH ARE....



- **Quotes**

“Greenwich is the best place”.

“Greenwich is the centre of the world”.

- **Artwork**

AMBITION 1: WE WANT TO BE A PART OF OUR LOCAL COMMUNITY AND GO TO FUN ACTIVITIES LIKE EVERYONE ELSE DOES

Our children have told us:

- Royal Greenwich has lots of different opportunities open to them like parks, museums, the cinema, O2 and easy access to Central London.
- Short breaks/activities outside of school “keep me occupied, gives me more energy, are my safe place, keep me active and fit and takes my mind off things”, and we would like an evening disco event “with mocktails”.
- There need to be different activities including sports, arts and activities like IT.
- There should be “more respite and for others to have more understanding of neurodiversity, including autism”.
- There is not enough awareness of the needs of Deaf people across Royal Greenwich, including in schools and community facilities.

Our parents have told us:

- There need to be more options for activities and providers, with “at least one alternative provision available for kids with complex needs”.
- They would like opportunities which include sensory rooms and that days out are “fun but they need to be a full day, as most time is spent getting ready to go out with too little time to enjoy the outing”.
- They don’t get enough sessions and these need to be longer, so they don’t have to find additional wrap-around care.
- There needs to be more staff training, so activities are more engaging.
- That mainstream activities need to be more inclusive for children with additional needs.

Other professional staff from across the partnership have said we need to develop:

- A better offer for independent travel training.
- Information for front line staff to signpost and promote available benefits/organisations, including support with transport costs to access available support/groups.
- More specialist short breaks:
 - to allow more allocations for our children
 - additional providers for young people 19yrs+, children with autism and behaviour that challenges, complex medical needs, and overnight short breaks
- Links with providers/youth clubs/museums etc. to develop inclusive practice and a focus on supporting children with physical disabilities.
- Different offers of support and education for those with SEND who are too anxious to attend school. (Emotionally School Based Avoidant EBSA).
- Clear accessible information about the housing offer for Young People so they can think about options from Year 9+.

WHAT IS IN PLACE ALREADY?

Our last strategy has resulted in the following new initiatives:

Our short breaks offer was co-produced with families and children who were involved in developing the specification and the provider selection process. We have responded to families' concerns that the difference between specialist and targeted short breaks was unclear and made this clearer in our short breaks' brochure and on the Local Offer.

Our Short Breaks offer 2023-2027 is jointly funded with the Integrated Care Board (ICB)/NHS. The additional funding has enabled us to include short breaks for young people moving into adulthood, aged 19+, with a focus on developing and supporting independence.

We have invested in additional training for providers, using the skills of services within Royal Greenwich to deliver the programme. This ensures all staff have a basic level of training in SEND, alongside the core training already delivered.

We have delivered training to organisations within Royal Greenwich including the museums and planetarium and are also part of a SEND forum they have set up to ensure this is part of their offer e.g. specialist sessions such as SENSory Sailors and Morning Stars (relaxed planetarium shows).

WHAT WILL WE DO NOW?

- Co-produce new guidance for SENCOs, so that activities outside of school are routinely reviewed as part of an Annual Review, with signposting for parents to the Local Offer for all students with an EHCP.
- Review activities with families and children on an ongoing basis to ensure that children want to access them, strengthening the arts-based offer and piloting an evening disco for young people with SEND with mocktails.
- Develop a market review of additional providers for future options available through the Short Breaks offer, particularly for young people with complex medical needs and students aged over 19.
- Review the opportunities for Deaf children, including ensuring staff are Deaf aware in community facilities and the at the council.
- Develop accessible information about housing services for young people, so they can think about future housing options.
- Develop a more responsive independent travel training programme.
- Deliver the commissioned training programme for short breaks providers to develop staff skills and confidence to meet children's needs, including for children with complex medical needs.

WE WILL KNOW THIS IS WORKING WHEN:

- Activities on offer reflect the gap analysis in the "Your Shout" survey with an arts offer.
- Parents and children consistently report that activities outside of school have been sign-posted in Annual Reviews evidenced in the council's quality assurance systems.

- Parents report that staff in the identified Short Breaks provider for their child can meet their needs.
- SENCOs report that they know where to find activities that children can access through “ordinarily available provision” at SEND support.
- We have increased the offer of opportunities in the borough for young people aged over 19 with complex needs.
- We have a Deaf awareness training video available to all council staff, that is co-produced with Deaf children.
- The Local Offer has clear accessible information about housing services for young people, coproduced with the council’s housing team.
- An independent travel training programme is in place, understood by schools and other professionals, and more children are travelling independently.

AMBITION 2: WE WANT SCHOOLS AND NURSERIES TO SUPPORT US BETTER AND HAVE ENOUGH PLACES SO WE CAN GO TO THE “RIGHT” SCHOOL FOR US

Our children have told us:

- It’s important we are involved *“in public speeches, representing the school and involved in the community, having roles and responsibilities like being part of ACE and changing services”*.
- The most important things in school are leisure, including quiet areas/sensory rooms, as well as discos and clubs, and learning including life skills (like finance).
- We think achievements should be celebrated including award scheme development and accreditation network (ASDAN), British Sign Language (BSL) and that specialist provisions like a DSP (designated specialist provision (DSP) are good. *“It is like a big family”*.
- That reasonable adjustments and the environment including designated spaces like sensory rooms and good outdoor space make schools successful.
- Schools need to understand and support more with mental health.
- Not enough of us (34%) know what an Education Health Care Plan is and only 47% go to our Annual Review: *“I have heard of it”, “Don’t really remember what is said.”*
- Our Education Health Care plans need to be regularly updated *“as some of the things in it are wrong”*.

Our parents have told us that they think:

- *“There should be a hub with information for parents as too much is found out through other parents”* with particular emphasis on short breaks and benefits.
- There needs to be more specialist provision including special school places, DSPs (units in mainstream schools) and provision for young people aged over 19. *“In his ASD specialist secondary school, things have been so much better... where he is taught by professionals who are fully trained... has had such a positive effect on our son’s mental health and willingness to learn and actually enjoy learning.”*
- School experiences need to be consistent and build on existing good practice; *“The support from our son’s nursery is amazing. They have identified his needs and sought advice where needed”*
- There needs to be more input from health professionals like psychologists, speech and language and occupational therapists, including attendance at Annual Reviews.

- That EHCP and diagnostic assessments take too long, and EHCPs need to be more accurate and specific, using digital processes so they can be shared.
- That staffing levels in the central SEND Assessment and Review team should be increased so that EHCPs can be updated, and staff can attend review meetings.
- Staff in mainstream schools need more training in neurodiversity, including ASD and ADHD.

Other professional staff from across the partnership have said: *"the wide range of services are the main reason I stay in Greenwich as a SENCO"*

- There needs to be better co-produced paperwork, guidance and information/videos for children and families about EHCPs and Annual Reviews, that capture pupil voice. This needs to include digital solutions to support information sharing.
- Plans need to be updated with information from Annual Reviews, so they reflect children's needs accurately.
- SEND Assessment and Review officers need to build strong relationships with their schools and families, with more consistent staffing to support this process.
- More specialist provision needs to be established including for children with severe/complex learning needs, girls with SEMH and provision for young people aged over 19.
- School funding/systems to moderate funding at a whole school and individual child level need reviewing.
- There needs to be more support, provision and training for staff supporting children with SEMH and/or neurodiversity, including ADHD.
- We need to establish a shared "inclusive schools" ethos across all our schools, underpinned by an RBG SEND Charter mark for SEND and Inclusion, with increased opportunities to share practice and create consistency across settings.
- We need a sustainable strategy for ensuring the quality assurance for EHCP processes, Alternative Provisions and independent specialist providers.

Our last strategy resulted in the following new initiatives:

The opening of a number of new specialist provisions including new DSPs for autistic children, the embedding of the school for children with ASD and challenging behavior/mental health needs, and expansion of places at Willow Dene and Charlton Park Academy, including post 16 provision.

The training offer to nurseries and schools has been reviewed in-line with the current evidence base. This is to ensure it is relevant for schools with new courses (that have been developed with families and schools) including 'Autism and Girls', and 'Emotion Based School Avoidance (EBSA)'. Training has also been developed to implement programmes such as Emotional Literacy Support Assistants (ELSA), Early Years ELSA and Early Talk Boost.

Services have been reviewed and new provision established, such as the Early Communication Together Team (ECTT), to respond to the high number of young children with social communication needs and/or ASD.

The ACE network has been expanded to ensure there is representation from a wider group of children, including those in alternative provision. Systems have also been put in place to support consistent feedback on the impact of their views on service developments and regular celebration events.

WHAT WILL WE DO NOW?

- Ensure that timescales for completing Needs Assessments and Annual Reviews are closely monitored and consistently improve, with an ambition that all are completed within the statutory timeframes.
- Distribute/create co-produced easy read documents/videos to use with children and families so they understand their EHCP and Annual Reviews. This will include an ACE consultation about Annual Reviews, building on the existing work with the ACE group at Woolwich Poly Boys DSP, and a new working group with families.
- Co-produce guidance for schools including best practice examples about Annual Reviews and pupil voice, using the SENCO network to disseminate best practice.
- Develop an ongoing review programme for existing/new provision to ensure “value for money” and that it is meeting current priorities.
- Review our current funding banding systems in collaboration with our schools.
- Establish new planned provision including the post 19 provision and 5-19 years ASD school.
- Widen the ACE network to include low incidence needs, such as dyslexia and Down’s syndrome on a “cross schools” basis.
- Develop an Inclusion Charter mark alongside “The Difference” training, to create a shared RBG ethos for inclusive practice, including the new Wellbeing and Chill Hubs.
- Engage in the Partnerships for Inclusion of neurodiversity in Schools (PINS) programme, focusing on supporting neurodiverse children.
- Focus on the induction/ongoing support of staff in the SEND Assessment and Review team to support retention of quality staff who can build relationships with their schools.
- Explore digital solutions to the EHCP process alongside the national initiatives in this area.
- Develop our quality assurance systems and linked Continuing Professional Development /service development to meet identified needs, so we can be sure that practice is consistent across the partnership.

WE WILL KNOW THIS IS WORKING WHEN:

- Children and their families report that they understand their EHCP and Annual Review and their voice is evident in all paperwork.
- EHCPs are updated using the Annual Review process at key transition points, reflecting pupil voice and current needs.
- We have a digital EHCP system that allows children, their parents or carers, schools, professionals and SEND services, to share information and work in a more efficient and collaborative way.
- We have co-produced information (including video materials) available for children, families and schools to support the statutory processes.
- We have sufficient local specialist provision, so children remain in their local communities.
- We have an established Inclusion Charter mark with schools using this as a measure of their inclusive ethos/provision.

- Our ACE network reflects a wider group of children with low incidence needs including dyslexia and Down's syndrome.
- We have a stable SEND Assessment and Review team who are consistently knowledgeable, responsive and know their schools and families.
- Schools will report that the funding system in place is fair and transparent.

AMBITION 3: WE WANT TO BE INDEPENDENT AND READY FOR WORK AND/OR COLLEGE WHEN WE LEAVE SCHOOL

Our children have told us:

- 82 % of us think it's important to work when we are an adult.
- We want to know more about supported internships, with better information and publicity about the current offer.
- There needs to be accessible information available on the Local Offer about leaving school and gaining employment.
- 100% of us think we are involved in planning for our future and that we get help to be able to be part of it.
- We want a wider variety of supported employment options with 44% of us wanting to work outside and with animals.

Our parents have told us:

- There needs to be more information about the financial and work options for children when they become an adult.
- Life skills programme provision in every school for SEND children, so they start learning life skills from primary school age.
- There needs to be a clear pathway for schools to prepare young people for adulthood including how to be self-reliant in terms of self-care.
- There are not enough options available as young people with complex needs move into adulthood.

Other professional staff from across the partnership have said:

- There needs to be more information on supported internships and other education, employment, and training options post ages 18/19.
- There needs to be more information on the Preparation for Adulthood pathways including housing and employment support.
- A consistent strategy approach to supporting children with Emotional School Based Avoidance (EBSA) and their schools and families should be developed.
- There needs to be local provision for students with complex learning needs (including medical needs) post 19.
- The transition to adult education and support services for young people with a Deprivation of Liberty Safeguards order (DOLS) and those transferring to adult mental health services needs to be strengthened.

Our last strategy has resulted in the following new initiatives:

Our supported internships programme has been set up with three local employers involved and our third group of young people has already started.

The previous transition service for young people aged 18-25 years has moved to Children's Services. Now, all children with EHCPs requiring a Care Act Eligibility Assessment (pre-18) or moving from children to adult social care services, are supported to move to adulthood through the Disabled Children and Young People Service.

A multiagency, transitional safeguarding protocol is being developed with local safeguarding partners outlining new ways of working.

WHAT WILL WE DO NOW?

- Combine the new Moving to Adulthood processes to support best outcomes for young people as they move into adulthood.
- Develop a co-produced approach to supporting EBSA children, their families and schools.
- Build an improved local market to meet the needs of young people with SEND as they move into adulthood, focusing on employment opportunities, building independence and local peer-based activities. (A market development plan has already been developed which will look into micro enterprises, Individual Service Funds, and personal budgets, with a focus on community resources for young people).
- Expand the supported internship programme to include more young people and employment choices and develop accessible information to support this.
- Open a local Transitional Learning Centre for pupils aged 19-25 and with complex needs, including complex medical needs.
- Develop our independent travel offer to support young people's ability to travel independently to employment and training opportunities.

WE WILL KNOW THIS IS WORKING WHEN:

- There is an increased range of employment options and choices for young people with SEND.
- More young people are engaging in the supported internships programme.
- Families and children report that there is accessible information available to support decision making.
- The Transitional Learning Centre at Bexley Road is open, delivering high quality local education to young people aged 19-25 with complex learning/medical needs and an EHCP.
- More children with SEND are travelling independently.

AMBITION 4: WE WANT TO BE AS SAFE AND HEALTHY AS WE CAN BE

Our children have told us:

- Support for our mental health is a priority *“I want to have better mental health and be able to manage my emotions better”* to help us manage, accept and understand our own diagnoses, and make and maintain safe relationships. *“I don’t like who I am” “I’m scared of people making fun of me”*.
- Staff need better training on mental health needs *“school to understand and support more with mental health”*.
- We cannot get assessments in areas like ADHD and wait too long for others.
- Our families need more support and childcare.

Our parents have told us:

- It is difficult to get appointments with GPs and dentists. Staff don’t always understand children’s needs.
- It is too hard to get support from an occupational therapist in schools.
- Waiting lists are too long for neurodiversity assessments including ASD and ADHD and services such as specialist CAMHS and Speech and Language Therapy (SALT).

Other professional staff from across the partnership have said:

- Waiting lists are too long for an ASD or ADHD assessment.
- Inconsistency of staffing is sometimes difficult to manage.
- Services that aren’t based in schools/settings are not always well connected such as health visiting and specialist CAMHS.
- The transition for young people moving to adult services needs to be strengthened in health, particularly linked to specialist CAMHS services.
- There are gaps in the mental health services when children move into adulthood.
- There needs to be more consistency in the offer for children with medical needs who are not attending full-time school.

WHAT IS IN PLACE ALREADY?

Our last strategy and post-COVID action plan have resulted in the following new initiatives:

- The ELSA programme is now embedded across schools and settings.
- A programme of one-off grants was available to support the development of new mental health and wellbeing initiatives.
- Mental health support in school teams is available in 30% of our schools. This will increase to 50% by the end of 2024, following a successful bidding round of expanding provision.

- A fixed amount of additional capacity has been sought to address the long waits for an ASD assessment, preventing further escalation in waiting times.
- A new service has been developed to support the youngest children with social communication needs (many of whom will get an ASD diagnosis). This is the Early Communication Together service, providing multi agency intervention whilst waiting for (or immediately after) an ASD assessment.
- Mental health provision in the Royal Borough of Greenwich has been consolidated through setting up a multi-disciplinary Mental Health and Wellbeing Partnership board. This ensures there is strategic oversight of all mental health and wellbeing services in the borough.
- A Principal Educational Psychology and Strategic Lead for Emotional Health and Wellbeing post has been developed to offer expertise and guidance for emotional wellbeing support in schools.
- There has been additional investment into specialist CAMHS to reduce waiting times for assessment targeting those waiting the longest.

WHAT WILL WE DO NOW?

- Develop new initiatives, training and sharing learning from good practice within our schools and settings. This includes “The Difference” training, introducing a SEND Inclusion Charter mark, and participating in the PINS neurodiversity project with a focus on ADHD.
- Develop training and support for staff in schools to understand SEMH and neurodiversity, including ADHD.
- Extend mental health support in school teams to over 50% of Royal Greenwich schools.
- Develop support and training for primary healthcare professionals on disability and statutory health checks.
- Develop the 0-2 offer from the Educational Psychology Service in Family Hubs, as part of the perinatal mental health and parent-infant relationships stream and parenting interventions via the Children's Centres on attachment and attuned interactions ('connecting and communicating with your baby'), emotion coaching and Video Interaction guidance (VIG).
- Review information and signposting on the Local Offer with a focus on expending local co-produced short videos.
- Review pathways for children with medical needs who are not in full-time school.
- Reduce waiting times for ASD and ADHD assessments. This will be achieved through developing best practice models, ongoing reviews of commissioning arrangements, monitoring waiting times and integrating the pathways for ASD and ADHD assessment to create a single neurodiversity assessment.
- Further invest in reducing the specialist CAMHS waiting times and identifying "waiting well" services that will support those waiting for an assessment. Strengthen the transition processes for young people moving to adult services, particularly leaving specialist CAMHS services.
- Evaluate and embed the Early Communication Together programme and information available on the Local Offer.
- Ensure our systems for expectant mothers to receive the mandated antenatal contact in-line with the healthy child programme are robust.

WE WILL KNOW THIS IS WORKING WHEN:

- Children receive neurodiversity assessments including ASD and ADHD at the right time and within NICE guidelines.
- Our health visiting and midwifery services are securely linked into settings for children in the Early Years, delivering against the ambitions of the Healthy Child Programme.
- Children are consistently supported by staff who have well developed skills through a targeted training programme.
- Our family of schools consistently have an inclusive whole school ethos to supporting children, signing up to the Inclusion Charter mark and PINS project as appropriate.
- Families and children have access to a range of co-produced, accessible “waiting well” resources to support them when they are waiting for a specialist assessment.
- There is a range of support accessible to those waiting for/without a diagnosis.
- Integrated neurodiversity assessment pathways are in place for children and their families, negating the need for serial assessments.
- Children and families report that their EHCPs accurately reflect their health and wellbeing needs and are updated at key transition points through the Annual Review process.
- Consistent pathways will be in place for all children with complex medical needs not attending school full-time.
- Expectant mothers will receive the mandated antenatal contact in-line with the Healthy Child Programme.

AMBITION 5: WE WANT OURSELVES, OUR FAMILIES AND FRIENDS TO UNDERSTAND OUR NEEDS AND BE ABLE TO SUPPORT US WELL

Our children have told us that:

- We want to understand ourselves better so we can: understand our neurodiversity; no longer feel we don't want to be autistic; have friends/fall out less with friends.
- We want to understand friendships better so we can “*choose better people to hang around with*”, .
- We want to have better control of our emotions, better listening and a better attitude to family/friends. “*I don't like who I am.*”
- We want to have “*better mental health and to smile more and not be sad*”, have less depression and anxiety, and be more confident.
- We want more training for staff and understanding in schools about mental health. “*I want to join back in with my class as this will help my mental health*”, “*Not too much support, make people more comfortable and don't pressure me*”.

Our parents have told us that:

- Support is hard to access until the point of breakdown.
- Waiting times for specialist CAMHS support are too long.
- There is a lack of support for families through parent groups.
- Have a SEND Parent Champion in every school in Royal Greenwich.

Other professional staff from across the partnership have said that we need to:

- Prioritise listening to families to understand their needs and directly work with them.
- Develop more parent and family groups to support families and siblings of children with additional needs.
- Involve fathers more in assessments and challenge the assumption that a child is the mother's responsibility.
- Develop the interface between health visiting, schools and other services, including Family Hubs and Young Greenwich, through the "Healthy Child Programme".
- Create more universal and targeted provision in Family Hubs and Children's Centres for pre-school children with additional needs.
- Reach out to wider networks like charities, churches and local groups to support families.
- Develop joined up partnership working, particularly with other emotional health and wellbeing services and specialist CAMHS.
- Develop creative solutions to supporting children with EBSA.
- Extend training for teams, schools and families on neurodiversity, including ASD/ADHD, EBSA, and restorative approaches.
- Develop the partnership forum responsible for the design and delivery of an all-age ASD strategy.

Our last strategy has resulted in the following new initiatives:

The COVID-19 pandemic offered the opportunity for services to create different ways to engage with children and their families. This included video materials and appointments, some of which have been continued.

Post COVID, there was a significant investment in getting children back into school and supporting their mental health and wellbeing through initiatives such as ELSA and EBSA training for staff. These initiatives are now an integral part of the offer to schools and families. Materials have been developed by services to support the understanding of neurodiversity, and to support families in having these conversations with their children.

There has been a decline in attendance post COVID (including children who are on part-time timetables) in-line with the national picture. We have started to develop new initiatives to manage this issue including the pilot "Chill Hub" for students not attending school due to EBSA.

We have co-produced a suite of videos with our Parent Carer Forum to support families and provide practical strategies to use at home.

What will we do now?

- Create training and materials for schools to support children to understand/recognise safe relationships and friendships.
- Roll out the EBSA training and 'Trauma Informed Practice' to front line staff so they better understand and support as a 'child first educator'.

- Increase the tracking of attendance of vulnerable children, who are not attending school or on part-time timetables. Develop systems to facilitate getting them back into school full-time, including children with EBSA.
- Strengthen the systems to support children with additional needs and their families using Family Hubs, Children's Centres and local community resources.
- Create a targeted provision offer for pre-school children with additional needs.
- Strengthen the interface between some health services, in particular health visiting and specialist CAMHS, with educational settings.
- Ensure services across the partnership work together to support children with emotional health and wellbeing needs and their families, so that they complement each other. Children have integrated plans to support them.
- Develop a structure where every school in Royal Greenwich has a SEND Parent Champion through the GPCPF.
- We will build on the success of the GPCPF event and ensure there are regular days like so that families are supported through coordinated events to share information and network.

We will know this is working when:

- Children, families and professionals can find information to support mental health (including EBSA) and know how to access services.
- Robust systems will be used consistently to track the attendance of vulnerable children, including part-time timetables.
- All appropriate frontline staff will be knowledgeable about trauma informed practice and EBSA.
- We have a robust universal and targeted offer in Family Hubs and Children's Centres for pre-school children with additional needs and their families.
- Specialist CAMHS services and health visiting services work together with educational settings/provision, so children have integrated plans of support.
- Every Royal Greenwich school has a SEND Parent Champion, and we have regular parent training and support days coordinated by the GPCPF.

HOW WILL WE DELIVER THIS STRATEGY AND MAKE SURE OUR AMBITIONS ARE REALISED?

The strategy has been co-produced with our children, families and the different agencies across the Local Area Partnership. All agencies involved have specific plans in place to implement the ambitions. These are pulled together in an overarching Local Area SEND and Inclusion Improvement Plan.

Our new SEND Improvement Board, has been set up with representation from all agencies at the most senior level, including representatives from our Parent Forum (GPCPF) and children with SEND through our SEND Young Champion. This group will be responsible for challenging and monitoring the progress of the strategy and the SEND/Inclusion Improvement Plan.

Through the SEND Young Advisor and the ACE network, our children will engage in many of the work streams, support us to design new models of service delivery in the Improvement Plan, and be active participants in working groups. Our Parent Forum (GPCPF) will consult with our families through the forum activities and events and the SEND Champion network.

Our new governance structures under the SEND Improvement Board, including the working groups in key areas, will ensure the plans are implemented and quality assured at a service level. These will have clear reporting lines into the SEND Improvement Board.

The SEND and Inclusion Improvement Plan will include the key areas of improvement from our Local Area SEND Inspection (May 2023) and be the mechanism that we use to ensure those recommendations are implemented.

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- Our network of ACE (Participation) groups across our special and mainstream schools who have helped us to make Royal Greenwich services “children centered” and have lots of fun in the process!
- The wider group of 428 children who have given us their views as we develop this strategy.
- Greenwich Parent Participation Forum (GPCPF) and their network of Parent Champions who have supported us to know and understand what our families think, co-produced many services with us and influenced many meetings with our families' views.

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