Bury Local Area SEND Partnership

Self Evaluation

Annual Engagement Meeting October 2025





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Local Context – Population and Place

The population

- Last three Indices of Multiple Deprivation for England (2010, 2015 and 2019), Bury ranked 82nd, 86th and 75th for deprivation out of 151 upper tier authorities (1st = most deprived, 151st = least deprived), between the 50th and 57th percentile.
- Bury child ethnic make-up is average, with 65% White/UK compared to national average of 60% (both decreasing by 1% over the last year) and a larger Asian Pakistani population than is typical (13% compared to 5% nationally)
- Bury's proportion of EAL children is slightly lower than national average (19%, compared to 21% nationally (both rising by 0.5% across the past year)
- Bury child gender make-up is weighted more towards boys than girls (52.5:47.5, compared with 51:49 nationally the proportion of girls has decreased very slightly in Bury in the past year.
- Bury known Free School Meal eligibility (25.2%) is less than national average (26.6%) both rising by 1% in the past year.

The place

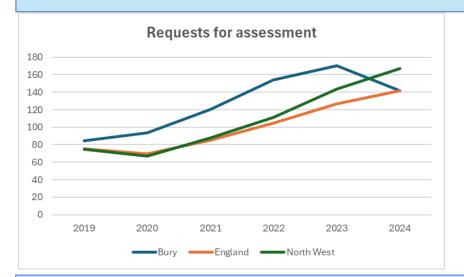
- Bury Council covers sub-areas with diverse characteristics from the sub-rural, small towns in the north to larger population centres in Bury and Radcliffe, fringing into north Manchester suburbia.
- The overall average of its demographic characteristics masks inequality and disadvantage experienced by our communities, with most of the work of the council's Children's Services focused on the areas of greater deprivation, with between two-thirds and three-quarters of the children in receipt of family help or social care support living in 7 of the borough's 17 wards, depending on the measure used. These 7 wards are predominantly in the east of Bury town or in Radcliffe, with some other specific hotspots dotted elsewhere in ex-council estate areas of housing. The pattern for demand in SEND is similar, albeit with a higher prevalence in parts of Prestwich.

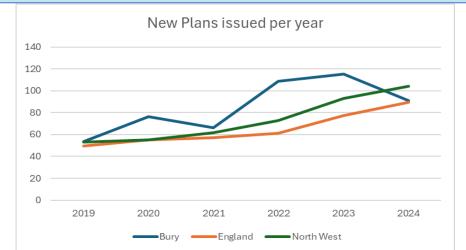




Local Context – SEND Key Facts, Recent Patterns and Emerging Trends

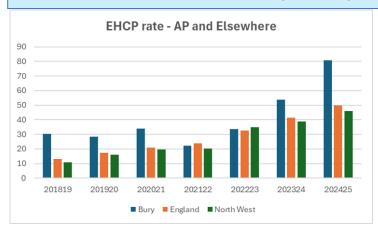
Total number of EHCPs per head of population remains higher than the national average (27%, down from 34% the previous year), but the last 18 months have seen signs of increasing confidence in the local system – fewer requests for assessment, bucking a strong regional and national upward trend and fewer new EHCPs issued.



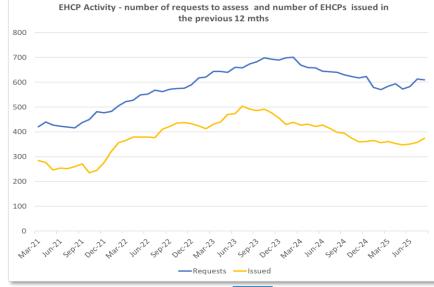


Finally, there are signs that the national policy uncertainty is beginning to affect the local system with rising numbers of requests for assessment during spring/summer 2025.

The ability of Local maintained school provision to meet need remains a crucial issue, with high rates of children with EHCPS in INMSS and in AP and other provision, per head of population.











Bury SEND Strategic Vision 2025-2028









Creating a positive and sustainable future for our Children and Young people

"We are a group of young people who come from Bury. We work with decision makers to ensure strategies like this deliver outcomes that matter to us. These are things like feeling healthy and well, freedom to choose our next steps, and feeling safe.

We, as young people, understand how everyone is impacted differently by their additional needs and disabilities. We want everyone to have aspirations and goals, and to be supported with those, with their individual needs taken into consideration.



This SEND strategy which has been co-produced by Bury Changemakers, Bury Youth Service and the SEND Improvement and Assurance Board is the result of conversations with young people about social reform and improvement to SEND for children and young people in Bury.

We hope this strategy will improve the lives of children and young people in Bury. The strategy is for them, and for parents/carers. This document is also for anyone who interacts with children and young people with SEND in the public and voluntary sectors. We hope they will better understand, accommodate, support and respect children and young people with SEND, their families, and those who support them."

The Changemakers & Bury Youth Service

This document has been co-produced by:

- Children and young people with Special Education Needs
- Bury2Gether
- NHS Greater Manchester
- Bury Council

Strategy on a page



Our goal is to deliver on the things that matter to children and young people. Our goal is to work as a partnership so that children and families can take control of their lives, access the support that they need, and reach their potential.







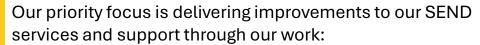
The outcomes we are trying to deliver are the ones that our Children and Young People want:

- I am safe
- The people that care for me are respected and supported
- I feel healthy and well
- I have fun
- I have the **freedom** to choose my next steps and I am as independent as possible
- I have my say and feel heard
- I feel included at home, school and in the community

We promise that we will ensure children and young people are **informed** and understand the service that they are being offered and how it will help them.

We recognise that **good relationships** with children and young
people are key to all who work with them
and we promise that professionals will
endeavour to build a strong, transparent
and honest relationship with the young
person they are working with.

We promise that staff who engage with children and young people will have the appropriate engagement skills and training"



- Co-production of improvements to service and support, and better communication with children and parents
- Ensuring the right support for children is available at the right time
- Ensuring effective transport to ensure children can access education
- Supporting our parents and carers
- Supporting children and young people to have fun

Our most important partners are our children and young people, and parents and carers. We are working with them through Youth Cabinet, Changemakers, Bury2Gether, Coproduction events, and school visits.

The organisations working together to deliver these improvements are Bury Council, NHS, Primary and Secondary schools, Early Years settings and Post-16 settings



Positive outcomes means adults valuing what we have to say, being supportive and encouraging.

This strategy is a key tool for us as a partnership to deliver the best outcomes we can for our Children and Young People with Special Educational Needs.

It will ensure that our local SEND system is focused on identifying the needs of children and young people as early as possible, meets their needs as soon as we can, and ensures there is a range of support available that can best meet their needs (known as a 'Graduated Approach').

Supporting children at all levels of our Graduated Approach requires partners from across our schools, the council and the NHS and others to work with children and young people, their parents, and/or carers to ensure that they have everything they need to live good lives and to thrive both in and out of school.

We know that we have changes that we need to make, and that these changes will not be simple to do.

It is important that all the work we do as a partnership fits together.

This strategy will help us do that, ensuring that we are all working towards a shared goal, and providing the link between the different parts of the system.

By ensuring that all of our teams are working to this strategy we are confident that we can make a positive impact working alongside our children, young people, parents, carers and families.

Local Area SEND Partnership Priority Impact Plan

July 2025 Stocktake with DfE & NHSE







Executive summary

In Bury we have progressed the strategic alignment of the 6 priority areas and 3 areas for improvement, supporting us to understand how different elements of the system are interconnected and foster a more collaborative approach across the partnership. These insights have shaped our focus during the last 6 months of our improvement plan, aimed at delivering better outcomes for children and young people with SEND, and their families. We have taken purposeful and effective action yet recognise there is still more to do to ensure every child, young person and their families receives the support they need, when they need it.

The December & July, Stocktake and supporting 'deep dive' activities have been instrumental in evaluating the current state and defining key next steps.

Strengths

We are very proud of the contributions made by groups of children and young people. Their voices, experiences, and aspirations have been at the heart of our work, shaping our priorities and driving our commitment to meaningful change. Our approach is grounded in the reality of our system—its strengths, its challenges, and its potential.

- Progress on the journey of developing our strategic partnerships, providing support and challenge and shifting the culture from silos to enhanced inter and intra-organisational collaborative working
- Strategic developments have reached fruition, with an agreed SEND strategy, Workforce Strategy and AP strategy and a graduated approach, with a well-attended launch event in late September 2025, laying the groundwork for long-term improvements across the SEND system.
- Strengthening early identification and enhanced support whilst waiting for Health services
- Improving EHCP quality & compliance, through increases in capacity and capability
- Strengthened transitional arrangements to promote joined up planning across services, including those preparing for adulthood

Priorities and development areas

- Availability of data, reporting, defining clear, measurable outcomes
- Ability to meet increasing demand and complexity of need across the system
- Strategic alignment, shared accountability
- Ongoing challenge of developing workforce capacity, consistency, and skills alongside delivering transformation and change
- Historical legacy & shifting national policy and reform (current landscape)
- Ability to reach and co-produce change with a wider group of children, young people and parents/carers



Local Area Partnership development

Over the course of our improvement, our partnership has made significant efforts in our commitment to deepen collaboration, building trust, and aligning efforts across the SEND system. This progress reflects a shared commitment to improving outcomes for children and young people with SEND in Bury.

Successes:

- We have actively worked closely with early years providers, schools, and post-16 settings to foster a more inclusive and responsive educational environment.
- Bury2Gether established as a key partner, and a commitment and start of the journey to establishing a more authentic and valued relationship with parents.
- Cross-sector collaboration has progressed, with clearer roles, shared priorities, and more integrated planning, through re-establishments of our joint commissioning group and multi-agency panels have enhanced coordination, though there is still work to do
- Deliberate efforts to improve how we communicate with stakeholders and act on feedback. Mechanisms such as a survey, listening events, and feedback loops are helping us to start to become more responsive and transparent.

Priorities and development areas:

- Deepen co-production and engagement in some parts of our overall system including in relation to some aspects of NHS commissioning, enhancing integration and joint working, particularly around transitions and PfA
- Creating a culture of collaboration: building and sustaining trust with families through visible action and accountability and timey responses to concerns, feedback
- Continue investing in workforce development across the system to build confidence and capability in inclusive practice, through targeted training and resources to meet increasing levels of demand
- Embed consistent early identification / support pathways across settings



Engagement & coproduction with children and young people

Across the partnership, we have created spaces for children and young people to contribute to our improvement journey, placing their voices at the heart of everything we do. Children and young people with SEND in these groups are becoming **active partners** in shaping the services that affect their lives. As a partnership we will expand on this work to create a cultural shift in moving from consultation to coproduction, doing so wherever we can, and with an increasingly broad number of children and young people. This change not only affirms their autonomy but also builds trust and confidence in the services designed to support them and there is a sense of optimism about their future among the children and young people who have contributed

Key achievements

- Young people feel listened to and are making their own decisions and are optimistic about careers, relationships and independence.
- Coproduction of the Local Area SEND Strategy
- Improved engagement and visible senior leaders and an appreciation that the partnership are working hard to support them
- Strengthened communication and engagement, described as very good and clear
- Feeding SEND voices into the wider participation work
- Changemaker group, driven by passionate children & young people, which they love!
- Some young people feel listened to and are making their own decisions and are optimistic about careers, relationships and independence.
- Good examples of professionals speaking directly to them, not just their parents

Areas for development

- Easing financial worries about the future and improved communication of the work being done behind the scenes
- Current Changemakers group reflects only a small number of children and young people

Changemaker priorities

- Develop training for professionals on engaging students with SEND and promoting early identification safety and effective support
- Create a "School Survival Guide" tailored for children and young people with SEND
- Broaden engagement and improve transparency to ensure all voices are heard







Theme 1 – PIP1 – Strategy

Impact of PIP to date

The process of developing and co-producing the SEND strategy for the borough was helpful in confirming the outcomes for children's and young people we are seeking, our priorities, our programme of work, and the importance of co-production, and has thus informed our delivery against priorities across the breadth of the programme. Having recently been finalised, we have begun to circulate the strategy to all partners and stakeholders in the borough. This will be part of and complement the strengthened and improved communication and engagement mechanism, including specifically the relaunch and strengthened compliance of the local offer.

The work of the SIAB is increasingly informed by a variety of feedback mechanisms capturing the voice of children and families, and via direct engagement with children and young people.

Governance routes are clear for the work of SIAB across the partnership including the ICB and there is evidence of utilisation of governance to effect prioritised action and change – for example in some NHS waiting times.

Changes we need to make in the next phase of the programme

Further work is required to demonstrate more clearly to children and families the impact of the strategic framework, and we also need to more clearly articulate the sense of the strategic framework with its focus on outcomes for children and young people operating as a golden thread through all other associated strategy and policy documentation – the graduated approach, the relaunched SENCo network and the workforce strategy.

Areas of strength		Areas for development	Selected data points to illustrate impact to date
 Strategic vision for Bury SEND improvement collaboratively developed and formally approved SEN Strategy fully co-produced with Bury2Gether and agreed at Improvement Board Other strategies agreed by Board and Council – such as the Workforce Strategy, the AP strategy – with the wider Education and Inclusion strategy to be launched in Nov. Improvements in communications through increased comms on Local Offer and through feedback loops such as 'You said , We are Doing' Programme governance approaching maturity; now able to propose changes to drive long-term sustainability 	2	 Much progress developing data/intelligence on the progress/impact of the improvement plan, but further work and coproduction required to reach maturity over next 6 months Use the information provided by assurance activity to develop greater oversight of the SEND system and better understand experiences of children, young people and their families and act upon whilst highlighting pressure, risk and progress to services. 	 In the last year, received 14.4 request for an assessment per 1,000 4–19-year-olds. This is the same as the North West rate, showing that we are performing in line with many of our comparators. Growth in the number and proportion of children supported at SEN Support in Mainstream schools in the past 18 months – a key change and previously a telling difference between Bury and the England as a whole Data on impact is currently unavailable, with a survey to collect views of children and families set to be carried out in the near-term.

Theme 1 – AFI1 – Communication

Impact of AFI to date

Foundations are now in place to enable the communication improvements identified, with the designation of a SEND Comms and Engagement Officer, temporary CYP Comms Manager & interim Head of Comms since the last stock take. An interim comms strategy and comms working group have been established to enable insights and the voice of service users, parents and carers to co-produce the comms strategy and drive delivery. SEND newsletters have been produced and published with improved curation and production. A programme of regular updates to the Local Offer is in implementation and publicised via social media pages to provide opportunities for corporate/mass comms activity and dialogue.

While there has been an uplift in comms and engagement activity via mass communication methods, a challenge remains around direct relationships and networks. This is being approached in multiple ways:

- A set of standards has been written into the interim comms strategy with the SEND delivery group, with SIAB asked on an ongoing basis to provide insight for embedding those;
- A standing item has been added to the SIAB agenda to ensure all board members take away a shared understanding of the key messages arising and specific calls-to-action;
- A stakeholder mapping exercise is proposed as part of the ongoing board development to understand connections, networks and what support might be needed for board member dialogues with those groups (as well as spotting and addressing gaps).

Changes we need to make in the next phase of the programme

The proposal for the Changemakers having a social media presence has been agreed in principle and is in research to understand what is possible while ensuring safeguarding and proper use. The work to mainstream communication and develop the culture of proactive updates and dialogue, and prioritising that as part of the work (and not an add-on) must be prioritised so that all areas of the system are clear with all about what they do, providing updates and information, and sharing their successes as well as being transparent about the challenges.

Areas of strength	Areas for development	Selected data points to illustrate impact to date
 Initial comms approach & framework (i.e. strategy) now in place, driving better use of the Local Offer, council website, and other channels – newsletter and Facebook page. A set of standards have been integrated into the interim comms. Strategy and is a standing item added to the SIAB agenda to promote shared understanding and messages The voices of children in the Changemakers group and parents in the Bury2Gether steering group included in the co-design of the strategy 	 Completion of a full SEND Comms strategy Continued development of the Changemakers group, expanding reach and engagement of a wider cohort of pupil voices A more coordinated, systematic, and two-way approach is required for continually gathering the feedback and experience of parents/families 	 They are making young people's voices heard and are validating their thoughts and feelings" "[I like] being a mouthpiece for young people with additional needs and disabilities" "I appreciate all the effort you have put into the group and help and support you have offered." Young person Substantial reduction in the number of complaints received from parents, compared to late 2023/early 2024.
		Greater Manchester

Theme 1 – AFI3 – Workforce

Impact of AFI to date

A high-level workforce strategy, informed by best practice, has been developed to define the required training levels for specific staff cohorts. An implementation plan is in development. The programme sets a clear framework, though it's too early to assess impact. Work is underway to complete a stocktake of current training provision, with assessment of demand by competency level and comparison of training uptake against cohort size and identify gaps in provision.

Whilst our implementation plan is under development, training remains at the heart of our efforts to support inclusive practice and continuous learning. As part of this commitment, Changemakers will be designing training for school staff on how to effectively engage with and support young people with additional needs and disabilities in education. This important work is set to begin in the summer term.

Areas of strength	Areas for development	Selected data points to illustrate impact to date	
 A comprehensive partnership Workforce Strategy developed to outline the required training levels for specific staff groups Completed stocktake of existing training provision, across sector to identify training gaps and inform the implementation plan Changemakers design and planned delivery of the targeted training for school staff and leaders Re-launch of the SENCo network, engaging 91% of schools across the borough Development of our Communities of Practice model to provide a team around the school approach to create capacity and develop shared learning through structured support, across school clusters. 	 Workforce Learning and Development plan, informed by the workforce strategy Develop robust metrics to assess the effectiveness of the Workforce Strategy and training programs. Ensure long-term engagement and support for the SENCo network beyond initial re-launch. Introduce mentoring or coaching within the network to support new or less experienced SENCos. 	It is currently not feasible to collect data points to demonstrate impact, as the strategy is in early stages of implementation. We have developed a framework for training of staff across the council and NHS, which is delivering positive impact. A programme of induction sessions has been run with SENCOs, and further 'Strategic Priorities for SENCOs' sessions have been run. A session was also run by the EHC team on Annual Reviews. This is accompanied by a growing set of supporting information to give SENCOs information and advice.	



Theme 2 – PIP2 – Early identification and support

Impact of PIP to date

There has been a notable increase in statutory compliance across the Local Offer, with the rollout of an enhanced Graduated Approach Toolkit and targeted CPD leading to growing uptake in schools. The development of Section 23 notifications and follow-up support has strengthened early identification pathways. Inclusion Services have been redesigned to include a community of practice model and expanded capacity. Establishment of specific SEND Health Visiting Service, is receiving very positive feedback from families.

Areas of strength	Areas for development	Selected data points to illustrate impact to date
 Increased statutory compliance across the local offer Enhanced Graduated Approach Toolkit, supported by targeted school CPD and growing uptake across settings Development of Section 23 notifications and follow up support Development of Bury's Ordinarily Available Inclusive Provision (OAIP) based upon the GM approach Redesigned and launched graduated approach, supported by tiered support services, available to all schools Redesign a of Inclusion Services, incl. a community of practice (CoP) model to build collaboration, capacity and structured support across school clusters Establishment of dedicated SEND HV team using increased Health Visitor capacity and mental health in school's team 	 Capacity to keep the Local Offer consistently updated, mitigating actions are now in place. These include the introduction of dedicated communications support and a compliance audit to drive improvements in content quality, accessibility, and user experience Develop a monitoring and evaluation framework to capture impact, share learning, and inform iterative improvements across the CoP model Ensure long-term engagement and support for the SENCo network beyond initial re-launch. Arrange parent/carer engagement events to ensure they are fully aware of the SEND Service re-launch and the support available to schools, as part of a graduated approach 	 Increase from 33% to 42% of SENCOs reporting that over 50% of staff are using the Toolkit, with an overall increase in confidence in using it. Reports of Toolkit being embedded increased from 38% to 42%. Attendance rates for children with SEND were 91.6% for the academic year 2024-2025 60% of parents are satisfied/very satisfied with the early identification of their child's SEND needs. 57% of parents surveyed found the local offer somewhat or very useful 30% of new EHCPs are for children aged 11+ years, down from 54% in 2023 & growth in the proportion of secondary school age children supported at SEN Support 63% of attendees reported increased confidence in Bury's SEND Partnership, and 100% believed the new Community of Practice will positively impact inclusion and outcomes. Encouragingly, 66% of attendees now feel clearer about where to access SEND and Inclusion support, a vital step in strengthening our collective response.

Theme 2 – PIP3 – Access to support

Impact of PIP to date

Waiting times for NHS services have consistently been flagged by young people and families, in Bury and nationally. SIAB has been routinely updated on steps taken to improve the position. Broadly access to Community Physio, Community OT, and Core CAMHS services are consistent across GM. Speech and Language therapy services have been challenged but improvement is evident and supported by the implementation of Can-do app well regarded by parents. Community Paediatric waiting times remain challenging, but this has been highlighted with NCA and local transformation work and waiting time initiative work is having an impact.

Progress is being made but we recognise this is a key factor for parents and providers and commissioners strive to improve at every opportunity. We understand progress is hard to recognise when the waiting times remain too long.

Data on the uptake of the use of padlets across a range of subjects have been routinely reported to SIAB and all NHS organisations are challenged on impact.

Changes we need to make in the next phase of the programme

The most significant challenge is the waiting time for Autism and ADHD assessment via CAMHS for young people. SIAB have been updated on the ICB wide proposals for the ND pathway, including access to an ND Hub. This is due for implementation in October – work is progressing to ensure he ND hub proposition is properly co-produced.

Areas of strength	Areas for development	Selected data points to illustrate impact to date
 Average waiting time reduction in some areas Several evidence-based services now available to families while waiting for support Launch of NHS GM Adult ADHD consultation 	 Some of the challenges for waiting times remain, with demand pressures and financial position of providers and commissioners, as well as availability of work, impacting these Implementation of the GM ND Hub implementation program in coproduction with stakeholders Review how the ICB health data dashboard will inform the local area partnerships SEND data dashboard Ensure that children, young people and their families are aware of how to access support whilst waiting opportunities. Further work on waiting times past first appointment – GM Health data focuses on time to first appointment, rather than more detailed pathway analysis. 	In terms of % children's waiting less than 18 weeks for an appointment, as of June/July 2025: CAMHS – 69% (8/10 in GM), June Children's Occupational Therapy – 72% (4/10 in GM), July Community Paediatrics – 79% (4/10 in GM), July Physiotherapy – 71% (7/10 in GM), July SALT – 34% (9/10 in GM), July - up from 9% in August 2024

Greater Manchester

Theme 2 – PIP6.1 – EHC Plans

Impact of PIP to date

Bury has maintained strong statutory compliance with EHCP timelines while progressing quality improvements, particularly in respect of new assessment. To tackle common QA issues—such as unclear aspirations and limited social care input a new EHCP template has been introduced to improve clarity and completeness, CPD has been delivered on writing legally compliant EHCPs to all SEND Officers, and an EHC Link Officer and Designated Social Care Officer has been appointed to strengthen contributions and compliance.

Changes we need to make in the next phase of the programme

- There is a need to strengthen our partnership working in this area to ensure shared ownership of outcomes.
- Improve messaging and engagement with partners, families, and communities.
- Expand Training and Quality Assurance: Build staff confidence and consistency through ongoing professional development and robust QA processes.
- Improve Data Use and Impact Tracking: Develop clearer milestone indicators and use data to drive continuous improvement.
- Balance Timeliness with Quality: Prioritise meaningful support and outcomes over meeting statutory deadlines alone.

Areas of strength	Areas for development	Selected data points to illustrate impact to date
 Successful recruitment into EHC Team, incl. Team Manager and recruitment to senior case officer structure and increased case officer capacity Improved data quality, to include compliance from 	 Invest in sustainable staffing models and targeted professional development to address ongoing capacity challenges and build specialist expertise across services. 	Average 20-week compliance this year – remains above 90%: in the top quartile of local authorities nationally and markedly better than at the point of inspection (2023 full calendar year: 74%)
services in respect of the EHCNA/annual reviews 3. High levels of statutory compliance with the 20-week timeframe have been sustained, whilst quality improvements have been underway	 Increase audit volume and improve partner commitment through clearer expectations, shared accountability, and more collaborative audit planning. 	Invision 360 report highlights evidence of early improvements in quality, including a substantial reduction in plans audited as "inadequate" and an increasing proportion of plans rated as "good".
Develop streamlined induction pathways, processes and procedures in accordance with the statutory framework and supported by a core programme of training and development	 Implement transparent service improvements and user engagement strategies to rebuild trust and mitigate the pressures stemming from historical perceptions. 	Positive qualitative feedback is indicative of early signs of improvements, from some services users and settings
	4. Accelerate the implementation of communication systems that support timely updates, cross-service coordination, and responsive engagement with stakeholders.	NHS 20 Rury

Theme 3 – PIP4 – Preparing for adulthood

Impact of PIP to date

Improvements to the information and guidance available has been improved, with the creation of factsheets and development of the local offer site that aligns with information from comparable authorities. Significant progress has also been made for individuals transitioning to adult social care, highlighted by the establishment of a PFA transition team, which facilitates a smoother shift into adult care services.

Although progress has been made in improving information about Preparing for Adulthood (PfA) and in developing guides for annual reviews, we are still working to ensure that this information is effectively integrated into annual reviews at the correct times. This effort is in parallel with other initiatives aimed at updating the EHCP and review documentation, as well as establishing quality assurance processes for these reviews.

Changes we need to make in the next phase of the programme

Effective communication and collaborative partnerships will be vital for the next stage of this initiative, ensuring that PfA is meaningfully addressed within reviews, with educational institutions playing a crucial role in enhancing pathway planning. This is closely linked to the EHC team's ability to quality assure reviews; the feedback mechanisms established will be instrumental in driving necessary changes.

Areas of strength	Areas for development	Selected data points to illustrate impact to date
 Preparing for Adulthood pathway and factsheets developed, tested, and launched with settings. Dedicated ASC team becoming well embedded Preparing for adulthood local offer redesigned and updated with pathway information Mapping and audit of existing provision to inform future commissioning discussions. Communication with SENCOs has been successfully enhanced to improve access to key information, support and expectations 	 Strengthen workforce planning and resource allocation within the EHC team to ensure timely preparation meetings for all children with an EHC plan by age 14, supporting smoother transitions into adulthood. Develop targeted strategies to increase parent participation in co-production meetings, such as flexible scheduling, accessible formats, and proactive outreach ensuring that adult social care transition policies reflect lived experience and family insight. 	 "[PfA staff member] has been brilliant – very understanding and helpful to me and my daughter, giving support whenever he can." Parent PFA team working with all 17yrs old on PfA tracker. Current caseload 72 with 30 LD cases. 72% of 19-year-olds previously supported at SEN Support in Bury qualified to level 2 (England average 65%); 34% of those with an EHCP (England 30%). 40% of 19-year-olds previously supported at SEN Support in Bury qualified to level 3 (England average 35%); 21% of those with an EHCP (England 14%). Amongst top 50 LAs nationally for all the measures above.

Theme 3 – PIP5 – Transitions

Impact of PIP to date

All primary schools are now consistently inputting data into the 6 into 7 software, and secondary schools are accessing this, enabling a more standardised approach to transition and the exchange of quality information. The current service level is due to end in September 2026, with no identified funding to sustain it beyond that point. Despite the potential for this platform to support transitions from PVI nurseries to primary, and from secondary to further education, financial constraints cast doubt on continued and expanded use. Further support has been provided by education services in our continued endeavor to improve the effectiveness of transition (e.g. sharing of best practice events, portage support group, planned MA transition for parents, summer support sessions delivered from the Family Hub, targeted support from the Virtual School and Youth Service).

Additionally, all relevant health agencies have implemented Standard Operating Procedures for transition, and a system for ongoing quality assurance is planned to ensure these remain effective, including SEND Health visiting & School Nursing. MDT led meetings are in operation for children and young people with complex health needs and epilepsy however, health partners have indicated that current capacity limits their ability to deliver this. All health services a **Changes we need to make in the next phase of the programme**

Areas of strength	Areas for development	Selected data points to illustrate impact to date
 All primary schools are inputting transition data into 6into7, and all Secondary Schools have access. Identification of further transitional support for schools, families and young people, however impact needs to be established Standard Operating Procedures established across all health services 2024-2025 phase transfers were largely completed within statutory timescales 66% of c/yp subject to a statutory plan had a completed annual review involvement in 2024-25 	 Evolve Bury's transition best practice guide to incorporate health and social care for use by education partners Understanding the cohorts of CYP in receipt of a statutory plan and those at SEN support, as well as the interdependencies across service areas QA to measure effectiveness of Transition Standard Operation procedures in practice Identify mitigating actions to address further decline of NEET figures Measuring wider outcomes, such as independent living, community participation and health and wellbeing. 	 100% of school settings using the 6into7 platform. Attendance rate for children with SEND in year 7 is now 92%, from a baseline of 89% Recent feedback from ILACS inspection, identified transitions for children in care are planned sensitively and timely, in ensuring best outcomes for children Achievement for children with identified SEND in RWM measures at the end of Primary school and Secondary school (A8) above national average. Slight decline in the percentage of children and young people in education & training aged 16-17, from 85% in March 2025, from 88% in 2024. A recent parent survey is indicative that 18% were satisfied with the support they received through transitions, it is unclear if these pupils were subject to a statutory plan or receive SEN Support

Theme 3 – PIP6.2 – EHC Plans

Impact of PIP to date

Key stage transfer amendments were largely completed within statutory timelines, supporting smoother transitions. Over 70% of EHCPs had a completed annual review in 2024–25, reflecting strong engagement. Improved data systems now enable comprehensive tracking of review activity, while newly developed procedures—aligned with statutory requirements and supported by staff training and CPD—are strengthening consistency and accountability across the service. Notifications for key stage transfers for the forthcoming academic year have been issued in advance to enable timely planning and preparation, with a new template introduced to ensure that Annual Reviews address all aspect of the EHCP and are supported by evidence.

Changes we need to make in the next phase of the programme

Whilst the number of EHC Plans which have had a review completed is now understood, within a 12-month period, this is a single performance indicator. The focus next will require the maintenance and strengthening of data, to understand statutory compliance with annual review timescales and a focus on quality of outcome and experience. Ensuring timely communication is an urgent issue for addressing, as well as ensuring sufficient capacity required for sustained improvement.

Area of strengths	Areas for development	Selected data points to illustrate impact to date
Most key stage transfer amendments, involving a placement change, were completed in accordance with the statutory transfer timelines.	 Workforce capacity and capabilities remain a challenge, against meeting the current levels of demand, though refinement of processes, training, recruitment are 	Key Data Summary of completed reviews within a 12-month period: • Total number of EHCPs due: 2,549
2. Annual review data is indicative that in the academic year 24-25, 66% of EHCPs had a completed review involvement, albeit timeliness or quality is not established	mitigating this, further resource is required.2. Annual reviews are reliant on sufficiency across the system.3. Data quality on annual review timeliness has been a	 Annual reviews currently overdue: 862 (34%) - either not started or in process Reviews either completed or not yet due: 1,687 (66%)
3. Development and improved use of data systems for tracking and reporting systems, and which now include all annual review involvements4. Written processes and procedures have been developed	longstanding challenge and resource intensive. A revised annual review plan to achieve statutory compliance is in development to determine priority areas and greater statutory compliance, including notifications	
in accordance with the statutory framework and supported by training to all staff	 4. Historical legacy continues to impact user trust and has placed additional pressure on service capacity 5. Timely communication remains an area of concerns, systems are currently being explored to address this 	



Theme 3 – AFI2 – Alternative Provision (AP) & Education otherwise than at school (EOTAS)

Impact of AFI to date

The co-production and formal approval of the EOTAS policy by the Council marks a significant step in ensuring inclusive and consistent educational provision. Comprehensive training for case officers has enhanced understanding and implementation of the policy, while the establishment of a multi-agency panel ensures that all EOTAS requests are considered through a collaborative and holistic lens.

The formation of the AP Strategy Group and the drafting of a strategic framework demonstrate a proactive approach to improving outcomes for learners requiring alternative education pathways. Robust systems for the oversight of placements have been implemented, supported by targeted training, ensuring quality assurance and safeguarding standards are consistently upheld across all provisions.

Changes we need to make in the next phase of the programme

- Further work is required to effectively plan new EOTAS packages and systematically review existing ones to ensure they deliver strong educational outcomes and support clear progression routes for learners.
- Complete and publish the draft AP Strategy. A new ILP format has been launched for AP placements but now requires consistent implementation to ensure focus on outcomes.
- Explore opportunities to broaden the range of Alternative Providers available locally and in surrounding areas to better meet diverse learner needs and improve access to quality provision

Areas of strength Areas for development Selected data points to illustrate impact to date 1. EOTAS policy has been co-produced and approved by the 1. AP strategy is in draft and further consideration required • There are currently 69 children in registered or Council, training has been delivered for case officers unregistered AP. We were at 65 in July 2024 and 32 in by strategy group to approve. regarding policy and practice, and all EOTAS requests are February 2024. 2. Short term intervention AP has been requested from considered by a multi-agency panel and more robust providers but further procurement may be required on an Case officers report better understanding of EOTAS, S19 practices are in place to review children and young ongoing basis. and EHE people subject to longstanding EOTAS arrangements and 3. Ongoing work is now being supported with regard to • Improved processes will result in better quality packages to support effective planning through key stage transfer development and implementation of EOTAS packages and outcomes for young people year groups Issues raised by parents regarding FSM, transport, school 2. AP strategy group has been established and a strategy nursing and Connexions advice have been addressed. co-produced and approved by council and SIAB. Wider range of providers available with work ongoing to 3. Systems for oversight of placements are in place and develop this further. embedded and training has been provided.

Greater Manchester



Principal current risks within the programme

PIP/AFI	Risk	Raised	Potential impact	Mitigation
PIP2	Qualified main grade EPS availability/capacity risks provision of the EPS service	Nov 2024	Families' expertise and experience is not as embedded in the improvement process for the EPS and families do not feel that their experience is taken on board on how SEND services can be improved.	Further consultation has been conducted in respect of the EPS offer with families with a good response (54 families). Development of service plan running to 2028 to set the EP offer to parents and carers.
PIP2/PIP4	Lack of capacity in key service professionals responsible for providing updated on the Local Offer creates a risk that updates will not be made in a timely way.	Oct 2024	The local offer is a key tool to enable families to drive forward the support of their children and to ensure it is as easy as possible to navigate the system. The quality of the local offer impacts both of these.	Comms and engagement officer has introduced new processes to support timely updates in content and routes for escalation when needed.
PIP3	Health services for children and young adults have long waiting times, reduced follow-up capacity, & staffing shortages (esp community paediatrics, CAMHS, SALT). This is undermining service stability and limiting the positive impact of recent improvements, especially with no long-term plan for 18–25 Autism and ADHD pathway.	Oct 2024	Wait times means SEND CYP do not receive the services at the time they need them, which has a particularly significant impact on those who will be transitioning in the next 12 months	Where appropriate local staffing has been agreed in the short term to ensure the stability of services. The issues have been raised to Greater Manchester level and are being discussed and form part of ongoing reviews. Local programmes of work focusing on waiting times have
PIP5	12-into-13 solution: Communication challenges with 6-into-7 provider impacting on the ability to progress with wider age solutions.	May 2025	A key enabler for this area is at risk of delivery, impacting on the quality of service being provided to families.	Delivery Group to chase provider for response and escalate as required. If no response alternative solutions are to be pursued.
PIP6	Limitations and issues with the EHCP data system, risking the ability for teams and management to plan effectively and prioritise how to best meet demand.	May 2025	Inability for services to best utilise the limited resource available to be directed to those cases and families that are most in need.	Additional staff currently working through data issues, with expected completion date in June.
PIP6	Lack of capacity in the LA SEND team to tackle demand and deliver improvements; including working with parents and schools on improvements and provision.	Nov 2024	Potential negative impact on either operational delivery or delivering improvements to timescales.	Resourcing and team development.





The next 6 months will see a shift in the programme to focus on sustaining change

Following our review of progress to date and a thorough assessment of current risks, our focus over the next six months will be on consolidating gains, addressing identified gaps, and embedding sustainable improvements.

Key priorities include:

Implement mitigation plans for high-priority risks

Re- assess and revise some PIPs/AFIs based on our honest self-assessment of impact to date and forward challenges and future priorities

Condense and /rationalise current impact/milestone measures into a more concise, manageable set of regular programme data to provide regular and more effective intelligence about programme impact, including development of a dashboard to support intelligence-led assessment of the progress being.

Develop a sustainable governance model that ensures the improvement journey continues beyond the Monitoring Inspection- continuing to build confidence across the local partnership and ensuring continued strategic alignment.

Embed strategic developments and maintain momentum in key areas, including;

Strengthening support for families during waiting periods.

Advancing the Local Offer and ensuring it is accessible, helpful and supported by a local offer live event in the autumn term

Embedding the Communities of Practice model to support shared learning and ensure more effective partnership working - developing the workforce

Enhancing transitions to ensure they are timely, well-planned, and coordinated across services

Improving communication to keep stakeholders informed of progress and impact

Widening the group of children and young people and families engaged in co-production and the shaping and focus of local strategy



Cross-referencing the Inspection Framework to Priority Action Plan and wider activity

Leaders are ambitious for children and young people with SEND – see the strategy on a page 7, the work being undertaken within the Priority Action Plan and the plans for future provision in the Safety Valve Agreement with the DfE.

Leaders actively engage and work with children, young people and families – see information on page 6 about the co-production of the strategy, page 13 about partnership development and page 14 about the work of the changemakers, in addition to the work being undertaken across the breadth of the plan. Senior leaders meet regularly with Bury2Gether and with the Changemaker group. The SEND Improvement and Assurance Board (SIAB) has the work and views of the Changemaker group as a standing agenda item at every meeting.

Leaders have an accurate, shared understanding of the needs of children and young people in their local area – see the JSNA, which underpins development of the strategy and informs commissioning and plans for future provision (see the Safety Valve Agreement). The views of young people and their families are actively sought by services and by the SIAB.

Leaders commission services and provision to meet the needs and aspirations of children and young people – see the commissioning of more local specialist provision and additional funding for redesigned Education Psychology and Inclusion Services and the establishing of the SEND Health Visitor team. We will review the Short Breaks Service (& commission in the next 12 months)

Leaders evaluate services and make improvements – the SEND Improvement and Assurance Board provides a focus for ongoing evaluation of service effectiveness and emerging issues; the Board sits above a Delivery Board that focuses on granular delivery of the plan. Bury2Gether (the local parent-carer forum) sit on both boards and sense check

Leaders create an environment for effective practice and multi-agency working to flourish – see the new Workforce Strategy, the additional services funded as part of the plan and the recent relaunch of the SENCO Network (now supported in-house) and Communities of Practice Approach (Sept 29th)

Cross-referencing the Inspection Framework to Priority Action Plan and wider activity

Children and young people's needs are identified accurately and assessed in a timely and effective way – see PIP Theme 2 – Early Identification and Support (p. 19), EHC Plans (p.21). EHCP assessments remain timely and their quality is improving. There is some evidence of improving early support in schools, with growth in the number of children supported at SEN Support, esp. in Secondary Schools. The partnership has reviewed services supporting children in schools and the support available to the network of SENCOs.

Children, young people and their families participate in decision-making about their individual plans and support – involvement of children and families in their planning and reviews is strong, with considerable challenge still present. The council's oversight and amendment of reviews is improving but remains an area for further improvement (see p.24)

Children and young people receive the right help and support at the right time – see PIP Theme 2 Early Identification and Support (p. 19), Access to Support (p.20), EHC Plans (p.21). Improvement has been made for waiting times for some therapies, but the NDP remains the key challenge – with the ICB implementing changes currently to positively change the current situation

Children and young people are well prepared for their next steps and achieve strong outcomes – see Preparing for Adulthood (p.22) and Transitions (p.23). Bury is among the top 50 Local Authorities for qualifications achieved by age 19. For young people previously on SEN Support, 72% achieve a level 2 qualification (compared to a 65% England average), while for those with an EHCP the figure is 34% (against a 30% national average). At level 3, 40% of those on SEN Support achieve the qualification (versus a 35% England average), alongside 21% of those with an EHCP (against a 14% national average). This relatively strong achievement for children with identified SEND is also reflected in RWM measures at the end of Primary school and in GCSEs at the end of Secondary school.

Children and young people with SEND are valued, visible and included in their communities – see information on page 6 about the co-production of the strategy, page 13 about partnership development and page 14 about the work of the changemakers, in addition to the work being undertaken across the breadth of the plan. Also see the development of new resourced provision in mainstream primary schools as part of the Safety Valve Agreement, and new local special schools for ASD (open) and SEMH (planned)

