The Local SEND Reform Plan

June 2026

Department for Education

NHS England

Annex A: Local SEND Reform Plan

Developing a Local SEND Reform Plan is an important first step for local areas to set out how they will lay the foundation for reform, and design an approach tailored to their local context. A shared plan which focuses on co-designing the local approach as system partners and with children, young people and families will help foster collective responsibility for delivering the reforms.

It is critical that all system partners, including health, education and childcare settings, work together to design and deliver the Local SEND Reform Plan, under the local authority's leadership. It is also crucial that representative family carers e.g. the local Parent Carer Forum, are involved in the development of the plan.

The expectation is that this plan is discussed, agreed, and signed off at your relevant SEND Governance Board. As a minimum, the plan must be formally signed off by the Local Authority Chief Executive (CEO), the Integrated Care Board (ICB) Chief Executive, the Local Authority Director of Children's Service (DCS), the Integrated Care Board NHS Place Director, and the Local Authority Chief Financial Officer (CFO/Section 151 Officer). We encourage other colleagues and partners who have contributed to also review and sign-off the plan, particularly early years, school, college and trust leader

Name of Local Authority: **The London Borough of Hounslow**

Name of Integrated Care Board: **North West & Central London**

Local SEND Reform Plan SRO: **Phillip Walker (Director of Lifelong Learning, Skills and Employment) and Jennifer Roye (Chief Nursing Officer)**

Signatories

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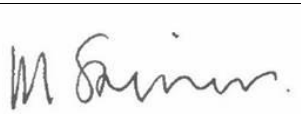
Local Authority Chief Executive	Mandy Skinner		Mandy.Skinner@hounslow.gov.uk	18/06/2026
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Executive Summary

Hounslow's change story is about moving from an improving but variable SEND and Alternative Provision system to a coherent, inclusive 0–25 partnership where children and young people receive the right support at the right time, in the right place. Our ambition is that needs are identified earlier, families have confidence in the support available, and education, health and care partners work together to deliver consistently positive outcomes.

Hounslow is a diverse and dynamic borough with strong educational foundations and increasing complexity of need. Most schools and early years settings are rated Good or Outstanding, children and young people with SEND achieve well across many measures, and strong partnerships already exist across education, health and care. However, rising demand, variation in family experience, pressures across neurodevelopmental and therapy pathways, challenges within annual reviews, alternative provision, post-16 transitions and the High Needs system require a more consistent and sustainable approach.

Our reform programme is built around four priorities.

Building a 0–25 Inclusion System

We will create a clearer graduated pathway from early help and Ordinarily Available Provision through to targeted, specialist and post-16 support. Through the Inclusion Bases Pathway, we will align and strengthen provision to create at least 370 recognised support base places supporting approximately 1,850 children in mainstream settings, alongside 515 specialist base places across key stages. This will increase mainstream inclusion from 42.5% to 52% by 2029 and enable more children and young people to access specialist expertise within their local communities. Alongside this, strengthened Ordinarily Available Provision, the Universal Offer and the Mainstream Inclusion Partnership will improve the capacity of mainstream settings to meet need earlier, contributing to a planned reduction in requests for Education, Health and Care Needs Assessments of 5% annually through to 2029 while maintaining timely access for those with the most complex needs.

Strengthening Workforce Capacity and Capability

We will improve the confidence and capability of mainstream and specialist settings to identify and meet need earlier. This includes expanding the Mainstream Inclusion Partnership, strengthening SENDCO networks and scaling the Specialist Practice and Advice Team ("Experts at Hand"). Increased capacity and earlier intervention will support growth in access to therapy and neurodevelopmental pathways from 2,922 to 7,472 children and young people, including a 30% increase in support for mainstream pupils. This will improve consistency in identification, planning and review processes while reducing escalation and waiting times. Through our Best Start in Life local plan, Family Hub model and Best Start Inclusion Practitioners (BSIPs), we will strengthen the identification of need from birth to five, ensuring that children and families receive timely support before needs escalate.

Improving Confidence and Experience

We will create a more transparent, responsive and co-produced system for children, young people and families. Governance, partnership working and participation will be strengthened to improve communication, pathway clarity and access to support. By 2029, EHC plan timeliness will improve from 58% to 90%, annual review quality and timeliness will be strengthened, and improvements in family confidence and satisfaction will be evidenced through Parent Carer Forum surveys and stakeholder feedback.

Delivering Financial Sustainability

Financial sustainability will be achieved through better outcomes rather than reduced ambition. Through the Safety Valve Programme, banded funding reforms, increased local provision and stronger mainstream inclusion, resources will shift towards earlier intervention and local support. This will eliminate the inappropriate use of Alternative Provision for pupils whose needs can be met within mainstream settings, improve post-16 participation, supported internships and employment outcomes, and reduce SEND NEET figures from 129 to 117. Progress will be monitored through quarterly High Needs reporting and delivery milestones.

By 2029, Hounslow will have a more inclusive, responsive and financially sustainable system where children and young people with SEND can thrive within their local communities. Success will be demonstrated through improved outcomes, greater family confidence, stronger mainstream inclusion and a sustainable High Needs system that delivers value through early intervention and partnership working.

(**See Appendix 2 for a pictorial representation of Hounslow Inclusion Model)**

Section 1 – Vision and Goals

1. **What the local area partnership is trying to achieve?**

Please set out your goals for your local system. These should be clear, aligned to the vision set out in the Schools White Paper, small in number and measurable. These goals should include clear reference to:

- ♣ Outcomes for children
- ♣ Confidence of parents, carers and young people in the system
- ♣ Management of finances to secure value for money

Hounslow's vision is that all children and young people with SEND receive the right support, at the right time, in the right place, enabling them to thrive in their local communities, achieve positive outcomes and be well prepared for adulthood. Through an inclusive, financially sustainable and partnership-led SEND system, children and young people will have greater access to support within mainstream settings, families will have confidence in the services they receive, and outcomes will improve across education, health, wellbeing and employment.

To achieve this vision, Hounslow will focus on five outcome-based goals:

1. More children and young people with SEND thrive in inclusive mainstream settings.
Success will be measured through increasing the proportion of children with EHCPs educated in mainstream schools from 42.5% to 52%, improving attendance from 90.2% to 93.6%, and reducing suspensions and permanent exclusions to 0%.

2. Children and young people with SEND achieve stronger outcomes and are better prepared for adulthood.
Success will be measured through reducing the Attainment 8 gap to national averages by 50%and reducing the proportion of young people with EHCPs who NEET are to align with national benchmarks.

3. Children and young people receive support earlier, reducing escalation of need.
Success will be measured through increasing EHCP timeliness from 58% to 90%, reducing requests for statutory assessment by 50%, and significantly increasing access to Speech and Language Therapy, Occupational Therapy and Educational Psychology support without the need for an EHCP.

4. Families and young people experience a more trusted, responsive and co-produced SEND system.
Success will be measured through a 23% reduction in complaints and dispute resolution activity, fewer tribunals, and at least 80% of families reporting confidence in the SEND system by 2029.

5. A sustainable and locally delivered SEND system provides support closer to home.
Success will be measured through increasing local specialist provision, reducing independent and non-maintained placements from 197 to 86, and expanding access to local specialist expertise through the Experts at Hand model.

Please see Appendix 3 for a pictorial representation of Hounslow's Vision and Values

Section 2 – Strategy

1. **Where the local area partnership expects to be in the next 3 years**

   A description of what your local system would look like in the next 3 years in line with the national vision set out in the Schools White Paper and set within the context of where you are starting from as a local system.

   In particular, as commissioning system partners, you should reflect on and agree what your fully fledged **Experts At Hand Offer** model should be and how this will be deployed via mainstream settings and providers (including those not based in your area – e.g. further education colleges attended by your young people) to build their capacity as well as identify and meet the needs of children and young people earlier and without the need for a statutory assessment for Education, Health and Care.

   To help you fully consider the scope and scale of change required, you may find it useful to structure your response using these 4 building blocks of an inclusive system, reflecting on what is working well in your system, what you are most worried about, what needs to change, and how the enablers will help you achieve your 3 year vision.

   When summarising where your local area partnership currently is, please include an assessment of where you are in reference to the core minimum requirements above and how you bridge the gap, making reference to and attaching additional documents that provide underlying evidence for your summary.

Strengthening inclusion across education settings– organising places and provision to meet as many needs as possible, as close to home as possible, with all settings and providers moving towards a shared understanding and consistent practices around inclusion.

System leadership, local partnership collaboration and co-production – putting in place the enabling conditions across a local area that ensures planning and provision reflects the local area & is joined up, including strategic co-production with parent carers and children and young people.

Access to specialist support and local placements – improving collaboration between settings and deploying expertise from a range of specialist and expert sources, to support schools and settings to meet the needs of children and young people earlier and locally.

Encouraging inclusive culture & behaviours – using funding and shared accountability towards a system that works for children and families while achieving value for money.

Local blueprint for the next 3 years	Where we are	Where we will be in the next 3 years
Strengthening inclusion across education settings: How we are organising places and provision to meet as many needs as possible, as close to home as possible, with all settings and providers moving towards a shared understanding and consistent practices around inclusion.	**At present – what is working** Hounslow has a strong foundation for inclusion, with a co-produced Ordinarily Available Provision (OAP) framework (ordinarily-available-provision-oap-guidance-documents) setting consistent expectations across early years, schools and post-16. A locality-based cluster model supports collaboration and earlier intervention (e.g. through the Mainstream Inclusion Partnership). **Specialist bases** are established through 13 primary and 6 secondary SEN Centres, transitioning into Specialist Bases linked to special school outreach, driving more consistent practice and workforce development. Expansion is underway, including 16 additional primary places (2025/26) and a further 60 places (2026/27) across primary and secondary. **Support Bases**, including SLCN provision and planned early years places, schools have established 31 informal support bases which are strengthening early intervention within mainstream settings. **SEMH expansion** (replaces the previously planned DfE SEMH Free School (Wings) has enabled 16 young people to remain in-borough at secondary transfer for September 2026. Capital investment is aligned across early years, mainstream and post-16 provision. There is strong multi-agency working across education, health and care, alongside a developing Alternative Provision model. Workforce development is progressing through borough-wide training across	**Where we will be** We will have delivered a sufficiency-led expansion, including 240 additional primary and secondary Specialist Base places, alongside 150 SEMH places and 200 post-16 places, with 2 expanded early years and 37 formalised primary and secondary Support Bases. We will have a fully embedded Experts at Hand offer across all phases, providing specialist outreach, therapies and advice in all settings. There will be clear step-up and step-down pathways, with most children supported locally. Reliance on out-of-borough placements and statutory processes will be significantly reduced, and provision will be consistent in quality. **How this addresses what needed to change…** Increased capacity across all phases will reduce placement pressures and reliance on out-of-borough and independent provision. Experts at Hand will improve access to specialist advice and outreach, reducing variation and enabling earlier intervention. Clear pathways will address fragmentation across phases, while outreach and training will strengthen workforce capability across settings, delivering a more coherent and proactive system. **(For Post 16 see appendix 8)** **System enablers (fully embedded)** • Workforce: Skilled across phases, with embedded specialist

	schools and early years. Data systems support forecasting, sufficiency planning and performance monitoring, and inclusion funding reforms are strengthening shared accountability **What needs to change…** Demand continues to outstrip capacity across provision, including early years, specialist bases and post-16, with reliance on out-of-borough placements remaining too high. There is variation in practice across settings, leading to inconsistent quality. Access to specialist advice, therapies and outreach is not yet timely or consistent, and services remain fragmented. Support is often reactive, with escalation to statutory processes where earlier intervention could be effective. Pathways across universal, targeted and specialist provision are not yet coherent, particularly across phases. Workforce capacity and capability require further strengthening to meet increasing complexity of need. While significant progress has been made in developing inclusive practice within early years settings, there remains variation in practitioner confidence, access to specialist advice and the consistency of support available to children with emerging SEND. Earlier intervention pathways need to be strengthened further to ensure children receive support at the earliest opportunity and families experience a seamless journey across health, education and Family Hub services. **Status of system enablers** • Workforce: Emerging – outreach and training established but inconsistent • Funding: Emerging – improved model but demand pressures remain • Partnerships: Emerging – effective multi-agency working and co-production • Systems & data: Emerging – robust forecasting, further integration required • Delivery: Active – sufficiency, early years and outreach programmes in place Experts at Hand is in early implementation and will shift the system towards earlier, consistent, needs-led support embedded in settings.	expertise, including BSIP for EYFS. • Funding: Aligned, sustainable, supporting early intervention • Partnerships: Fully integrated education, health and care system • Systems & data: Mature and real-time, driving planning and performance • Delivery: Embedded sufficiency, capital and outreach programmes delivering at scale

Local blueprint for the next 3 years	Where we are now	Where we will be in the next 3 years
Access to specialist support and local placements: Improving collaboration between settings and deploying expertise from a range of specialist and expert sources, to support schools and settings to meet the needs of children and young people earlier and locally.	**At present – what is working** Hounslow has established a strong and effective foundation for specialist support through its Specialist Practice and Advice Service and Inclusion Advisors within the Standards, Practice and Partnerships Service. These services provide timely, accessible advice, support and challenge to education settings and are highly valued across the system. A structured programme of Inclusion Audits **(see appendix 5.)** enables schools to evaluate the quality and consistency of their Ordinarily Available Provision (OAP), supporting continuous improvement in inclusive practice. The audits also provide assurance regarding the effective use of Mainstream Inclusion Funding, ensuring resources are aligned to identified need, strengthening accountability and supporting better outcomes for children and young people with SEND. Building on this success, capacity will be further increased and strengthened through the 'Experts at Hand' offer (**see appendix 6**), expanding provision and improving access to specialist input. This includes the integration of additional expertise, with 22 new posts created, to include: Speech and Language Therapy, Occupational Therapy, Clinical Psychology, Specialist and Advisory Teachers, and Education Inclusion Advisors. This development will enable all settings to access high-quality advice and support more quickly, equitably, and flexibly. Delivery will be through a cluster model, aligned to existing locality arrangements, including the Mainstream Inclusion Partnership and Family Hub networks, ensuring consistency, accessibility, and stronger place-based collaboration. Best Start Inclusion Practitioners (BSIPs) will form an integral part of the Experts at Hand model for children aged 0–5. Working across Family Hubs, early years settings, childminders and health services, BSIPs will provide consultation, coaching, modelling of inclusive practice and support for the graduated response. They will strengthen early identification, facilitate access to targeted interventions, support transitions into Reception and act as a bridge between education, health and family support services. This strengthened offer is underpinned by effective multi-agency working, ensuring a coordinated approach across education, health, and care. Close collaboration with partners including Mental Health Support Teams (MHST), neighborhood health teams, Best Start	**Where we will be...** We will have a fully embedded Experts at Hand operating as part of a wider core offer, delivering multi-agency support across education settings, early years and post-16. Through a joint recruitment campaign with Health colleagues, we will ensure stakeholder confidence in building a strengthened team of experts. A mature 3-tier Alternative Provision model **(Please see appendix 7.)** will provide time-limited support focused on reintegration. Outreach from special schools and AP will be fully aligned within a single system, ensuring equitable access. Clear pathways will ensure children receive timely, needs-led support, reducing escalation. Using the expertise of our AP provision in Hounslow, we will monitor and assess the impact of the new system on placement numbers and reintegration. Workforce Development and Continuous Professional Learning - A key enabler of Hounslow's SEND Reform Programme will be the development of a highly skilled, confident and inclusive workforce across education, health and care. We will establish a coordinated 0–25 workforce development strategy that ensures all professionals have access to high-quality, evidence-informed learning and development opportunities. An inclusive and responsive CPD program will be created through a "one stop shop" system for all stakeholder access in order to improve confidence and expertise. Through a graduated programme of training, coaching, professional networks (like IQM) and specialist support, we will strengthen understanding of inclusive practice, Ordinarily Available Provision, the graduated response, preparation for adulthood, and the needs of children and young people with speech and language needs, autism, social, emotional and mental health needs, and other areas of SEND. The use of local talent in schools and settings through "inclusion champions", trained through the AoEA accreditation, to offer mainstream outreach to colleagues in order to embed strong inclusion practices. **How this addresses what needed to change** Experts at Hand will standardise access to specialist advice, reducing variation and improving timeliness. Integrated pathways will remove

	Family Hub Navigators, and Children's Social Care (CSC) supports early, more accurate identification and intervention, improving outcomes for children and young people with SEND. All our Special Schools currently provide some level of outreach support to mainstream settings. However, this offer varies in structure, with some outreach delivered on an informal or ad-hoc basis and others operating through more formal, commissioned arrangements with defined frequency and scope. There is growing workforce capability as we develop our Experts at Hand offer, through recruitment of therapists (SaLT, OT, EP) and advisory services. Data systems support monitoring of demand and access, and funding is aligned to support early intervention. A 3-tier AP model is developing, supporting inclusion, reintegration and reduced reliance on statutory processes. **(See appendix 7.)** **What needs to change** Access to specialist advice and therapies is not yet consistent or equitable across settings and localities, with variability in timeliness and thresholds. Services remain fragmented, with pathways unclear across education, health and AP. Support is often accessed too late, contributing to escalation and increased reliance on statutory processes and specialist placements. Outreach support from our Special Settings, AP and Specialist Bases is not yet fully coordinated, and workforce capability remains variable across settings. Commissioning arrangements for therapies are not yet optimised to ensure quality, value and consistency. **Status of system enablers** • Workforce: Emerging – strong expertise but uneven reach • Funding: Emerging – supports delivery but lacks full coordination • Partnerships: Emerging – established multi-agency working • Systems & data: Emerging – further integration required • Delivery: Active – AP and outreach models in place but not yet fully aligned Inclusion support through Specialist Practice and Advice and Standards, Practice and Partnership teams are well developed	fragmentation, ensuring coordinated support across education, health and Alternative Provision. Earlier access to specialist support, alongside insights from Inclusion Audits, will provide a stronger understanding of need across settings, strengthen accountability for the delivery of Ordinarily Available Provision and the effective use of inclusion funding, and enable earlier intervention. This will reduce escalation, improve outcomes and decrease reliance on statutory assessment and specialist provision over time. Aligned outreach and commissioning will improve quality and value, while strengthening workforce capability across all settings. The Experts at Hand model will play a central role in transferring knowledge and expertise into mainstream settings, supporting sustainable workforce development rather than reliance on individual specialist interventions. High quality training will be delivered across schools, early years settings, post-16 providers, health services and wider partners to create a shared understanding of inclusion and collective responsibility for outcomes. In partnership with University of West London, we will develop sustainable workforce pathways that strengthen local SEND expertise and address workforce capacity challenges. The partnership will explore training, placement and development opportunities across specialist disciplines, including Speech and Language Therapy, Occupational Therapy and wider clinical services. This will support delivery of the "Experts at Hand" model by increasing access to specialist expertise. The initiative will help create a sustainable pipeline of SEND professionals, improve service resilience and strengthen inclusive practice across the borough. **System enablers (fully embedded)** • Workforce: Multi-disciplinary expertise embedded across all settings • Funding: Coordinated and outcome-focused commissioning • Partnerships: Fully integrated education, health and AP system • Systems & data: Shared, real-time data informing access and impact Success will be demonstrated through increased workforce confidence, improved quality of provision, greater consistency of practice, reduced escalation of need and increased numbers of children and young people successfully supported within local mainstream settings.

	across localities, with the Experts at Hand offer in development. Hounslow's Experts at Hand offer will provide a single, consistent access model for settings across all localities to access specialist support and outreach from Specialist settings with the Standards and Inclusion team ensuring that graduated response from Early Help and OAP through to Post 16. **3-year state – summary and structure** Within three years, we will have a fully integrated system of specialist support, ensuring timely access to advice, therapies and outreach within all settings across localities. This will be underpinned by a fully embedded Experts at Hand offer, reducing fragmentation and improving consistency.	

Local blueprint for the next 3 years	Where we are	Where we will be in the next 3 years
System leadership, local partnership collaboration and coproduction: Putting in place the enabling conditions across a local area that ensures planning and provision reflects the local area and is joined up, including strategic co-production with parent carers and children and young people.	**Where we are now** Hounslow has a strong universal offer, underpinned by co-produced OAP guidance (ordinarily-available-provision-oap-guidance-documents) shaped by over 100 stakeholders. There are well-established governance arrangements, including the Inclusion Board and Borough Education Board, with representation across all partnerships. (Borough Education Board Terms of Reference) Since January 2024, we have implemented borough-wide AET / Neuroinclusive Education Network training across mainstream settings at no cost, strengthening support for autism and wider neurodivergence. By year-end, coverage will reach 41/53 primary, 7/21 secondary, and 1/3 all-through schools. In Early Years, 245 practitioners across 93 PVIs, plus school staff, Family Hub practitioners and childminders, have been trained—marking strong progress toward SEND Reform Plan delivery. Once published, the National SEND and Inclusion Training Programme will complement our commitment that all staff in every setting complete Autism Education Trust / Neuroinclusive Education Network training, with access to further modules such as Anxiety and Inclusion. Multi-agency working is strong, supported by data-led oversight and quality assurance processes, including inclusion audits. **What needs to change** Variation remains in how the universal offer is implemented across settings, leading to inconsistency in practice. Co-production is emerging at a strategic level with parents, carers and young people, and needs to be developed at an operational level. Workforce capability and confidence remain variable, particularly across phases and wider partnership. Data is not yet systematically utilised across the partnership, limiting system-wide insights and accountability.	**Where we will be** Over the next three years, we will deliver a coordinated, whole-setting SEND training offer, jointly led by the local authority and health partners. This will embed AET / Neuroinclusive Education Network training (including anxiety and inclusion), alongside ELKLAN and whole-setting SEMH training—aligned to the primary needs in mainstream and specialist provision (autism, SLCN and SEMH). Health partners will continue to upskill staff across settings and Family Hubs, including nursing-led training to ensure readiness to meet pupils' medical needs. We will have a fully embedded universal offer making accessing training more streamlined and which is consistently delivered across all settings. Governance structures will drive continuous improvement and accountability. Experts at Hand will support delivery of inclusive practice at scale, embedding expertise across the system. **(See appendix 6)** A fully integrated early years and post-16 system will provide clear pathways into adulthood. **How this addresses what needed to change** Consistent training and outreach will reduce variation in practice. Experts at Hand will provide practical, in-setting support, strengthening workforce capability. Integrated governance and co-production will ensure system accountability and responsiveness. Improved data will enable better oversight and planning. **System enablers (fully embedded)** • Workforce: Highly skilled, with consistent training and embedded expertise • Funding: Aligned to outcomes and inclusive practice • Partnerships: Fully integrated and co-produced at all levels • Systems & data: Shared dashboards, real-time and driving improvement • Delivery: Embedded QA, training and governance structures

	Status of system enablers • Workforce: Emerging – strong training programme, uneven impact • Funding: Stable – supports universal offer but needs alignment with outcomes • Partnerships: Emerging – effective governance and collaboration • Systems & data: Emerging – further integration required • Delivery: Active – training and QA processes in place Experts at Hand will strengthen consistent implementation of the universal and targeted offer. **3-year state – summary and structure** Within three years, we will have a fully embedded, high-quality universal offer, with consistent practice across all settings, underpinned by strong co-production and system leadership.	

Local blueprint for the next 3 years	Where we are	Where we will be in the next 3 years
Encouraging inclusive culture and behaviours: Using funding and shared accountability towards a system that works for children and families while achieving value for money.	**Where we are now** Hounslow has established a progressive inclusion funding model, including school's MIP (Mainstream Inclusion Partnership) and an innovative model for the distribution of SENDIF, promoting shared accountability and early intervention. Locality clusters already support collaboration between schools and early years providers, enabling shared practice and group approaches. A co-produced Top-Up Funding model is in place, aligned to Specialist Bases, in-borough Special Schools and supporting inclusive provision within mainstream settings. Quality assurance processes, including audits and advisor support, ensure effective use of funding and alignment with OAP. **What needs to change** Funding is not yet used consistently strategically across all settings, with variation in impact. Accountability for outcomes needs strengthening, with clearer links between funding, provision and impact. Practice remains variable, and inclusion is not yet fully embedded across all settings. Data on impact of funding is not yet consistently used to inform decision-making. **Status of system enablers** • Workforce: Emerging – improving understanding of inclusive practice • Funding: Emerging – requires further consistency and targeting Partnerships: Emerging – collaboration through clusters • Systems & data: Emerging – improved tracking needed • Delivery: Active – funding and QA processes in place Experts at Hand will support more effective use of funding through earlier, needs-led intervention. **3-year state – summary and structure**	**Where we will be** We will have a fully embedded inclusion funding system that drives early intervention, strengthens Ordinarily Available Provision and enables more children and young people to have their needs met successfully within local mainstream settings. Funding decisions will be informed by Inclusion Audits, robust data and evidence of impact, ensuring resources are targeted where they will have the greatest effect. The Experts at Hand model **(please see appendix 6 for full explanation of model)** will provide consistent access to specialist advice across all localities, translating expertise into everyday practice through coaching, consultation, workforce development and integrated multi-agency support. This will improve the quality of provision, reduce variation between settings and support earlier identification and intervention. Locality clusters will operate as collaborative partnerships with shared accountability for inclusion, outcomes and resource deployment. Supported by Inclusion Audits, performance data and peer challenge, clusters will use intelligence to identify emerging needs, coordinate support, evaluate impact and continuously improve provision. This will create a more responsive, evidence-informed system that reduces escalation, improves family confidence and delivers better outcomes for children and young people with SEND. **How this addresses what needed to change** Aligned funding and accountability will reduce variation in practice and improve outcomes. Experts at Hand will ensure funding is used proactively, not reactively, supporting earlier intervention. Improved tracking and QA will strengthen accountability, linking investment to impact. **System enablers (fully embedded)** • Workforce: Confident in inclusive practice and funding use • Funding: Fully aligned, sustainable and outcomes-focused • Partnerships: Strong collaboration across clusters • Systems & data: Robust tracking of impact and value • Delivery: Embedded QA and "Inclusion in Action" processes

	Within three years, we will have a fully inclusive system culture, where funding, accountability and practice are aligned to deliver improved outcomes for children and young people.	

Success Measures: ***Drawing on metrics from the accompanying data template E.g.*** *Improve attendance of pupils in all maintained schools (mainstream and special) with SEN* *Reduce reliance on independent special school places* *Mainstream settings with increased access to Education Psychologists/SaLT/OT* *Reduced NEET rates for SEND YP at age 16*	**Baseline (2025):*****(outline the baseline for your success measures reflecting where you are now – these should be drawn from the metrics in the data template)***	**Target metrics (in 3 years time):** ***(outline the target metrics that will demonstrate you have achieved the vision summarized above – these should be drawn from the metrics in the data template)***
Children and young people with SEND (EHCP and SEND Support) remain in mainstream settings.	% of children and young people with EHC plans in mainstream school (including Specialist Bases): 42.5%	% of children and young people with EHC plans in mainstream schools (including Specialist Bases): 52% (or to be at least in line with London average)
	Suspension and PEx rate for SEND (EHCP and SEN Support) pupils: 0.14%	Suspension and PEx rate for SEND (EHCP and SEN Support) pupils: 0%
	Attendance rates for SEND (EHCP and SEN Support) pupils: 90.2%	Attendance rates for SEND (EHCP and SEN Support) pupils: 93.6% (or at least in line with Hounslow's universal cohort)
Children and young people with SEND achieve better outcomes and are well prepared for adulthood.	Attainment 8 gap-to-national for SEND (EHCP and SEN Support) pupils: -12.8	Attainment 8 gap-to-national for SEND (EHCP and SEN Support) pupils: -6.4 (reduce the gap by 50%)
	Number of young people with an EHCP not in education, employment or training (NEET): 129	Number of young people with an EHCP not in education, employment or training (NEET): 117 (3% of EHCP cohort on average nationally)
Children and young people with SEND are identified earlier and receive timely support.	% EHCPs issued within 20 weeks: 58%	% EHCPs issued within 20 weeks: 90%
	Number of EHC NA requests: 815	Number of EHC NA requests: 407 (50% reduction)

	Number of children without an EHCP supported by SaLT: 1941 Number of children without an EHCP supported by OT: 862 Number of children without an EHCP supported by EP: 119	Number of children without an EHCP supported by SaLT: 4541 Number of children without an EHCP supported by OT: 2526 Number of children without an EHCP supported by EP: 395
Families and young people report improved confidence in and experience of the SEND system.	Number of Tribunals: 125 (av. 10.4 per month)	Number of Tribunals: 96 (av. 8 per month) c23% reduction in SEND-related complaints and dispute resolution activity by 2029.
	Baseline to be established in 2026 through a borough-wide survey of children, young people and families. Success will be measured through annual increases in the proportion of respondents who report confidence in the SEND system, feel listened to, and feel involved in decisions about support and service development.	The percentage of children, young people and families who report confidence in the SEND system and feel involved in decisions affecting them will increase year-on-year, reaching at least 80% by 2029
The SEND system is jointly delivered, financially sustainable and supported by strong local provision.	Increased local specialist provision Number of Specialist Bases: 19 Number of Support Bases: 31	Increased local specialist provision Number of Specialist Bases: 34 Number of Support Bases: 37
	Number of CYP with and EHCP in non-maintained Special or Independent placements: 197	Number of CYP with and EHCP in non-maintained Special or Independent placements: 86
	Number of EHCNA slows down over the three years from baseline figure – 3500 (6.26%)	2027 – 5.35%, 2028 – 4.41%, 2029 – 3.59%

3. What is the local area partnership's strategy for delivering on the above?

A brief summary of your local system's theory of change or reform strategy. Reflect on the output of your **Local Partnership Maturity Assessment Tool**, particularly your *Local System 'change story.'*

Hounslow's local area partnership is underpinned by a clear theory of change and strong foundations for integrated working: if children and young people's needs are identified earlier, mainstream settings are better equipped to meet need, specialist expertise is available closer to home, and families are active partners in decision-making, then more children and young people with SEND will thrive in their local communities, experience better outcomes and require less intensive intervention.
The Local Partnership Maturity Assessment identified a system that is increasingly collaborative and ambitious, but where practice, family experience and outcomes remain variable. Our reform strategy therefore focuses on moving from reactive, service-led responses to a more integrated, preventative and outcomes-focused approach.

Strong progress is evident in co-production and partnership working **(evidenced in appendix 1)** which demonstrates how our ICB priorities support SEND reforms. In addition, The Hounslow Parent Carer Forum (HPCF) is well established, contributing at strategic and operational levels, including co-producing the Local Offer and Top Up Funding model. Wider parental engagement is also developing through Family Hubs, CAMHS and Children's Social Care. The voice of children and young people is increasingly embedded through SEND programme work and youth ambassador schemes, with further development planned through the Wellbeing and Learner Voice role.

This will be achieved through four interconnected priorities. First, we will strengthen early identification and intervention through enhanced Ordinarily Available Provision, a clear graduated response and alignment with the Best Start in Life strategy. Second, we will build mainstream capacity through a borough-wide workforce development programme, a SEND training "one stop shop", an Inclusion Framework and the Experts at Hand model, ensuring specialist knowledge is embedded across education, health and care services. Third, we will expand and align local provision through the Inclusion Bases Pathway, enabling more children and young people to access specialist support within their local communities. Finally, we will strengthen co-production, governance and accountability through shared data, partnership dashboards and meaningful participation by children, young people and families, while ensuring resources are aligned to early intervention, inclusion and long-term financial sustainability.

Strong foundations already exist, including an established Parent Carer Forum, improving partnership governance and growing collaboration across education, health and care. By building on these strengths and focusing on inclusion, early intervention and partnership working, Hounslow will create a more consistent, responsive and financially sustainable SEND system that improves outcomes, experiences and confidence for children, young people and families.

4. Local Partnership Maturity Assessment Tool (Attached as a separate document – Appendix 7)

5. What is the local area partnership roadmap for the next 3 years?

Reflecting on the broad timescales and expectation for deliverables set out in the Schools White Paper, key documents and core minimum requirements set out in this document, please provide a high-level roadmap for the next 3 years. Please highlight key milestones and a trajectory to the target metrics identified above, including leading indicators.

In the 2026-27 column, in particular, please reference how you plan to meet the core minimum requirements in your narrative, including details and evidence in supporting documents.

Local roadmap for the next 3 years	2026/27	2027/28	2028/29
Hounslow will transition from an emerging system (2026) to a developing and increasingly maturing system (by 2029), characterised by: • Earlier intervention through Experts at Hand and enhanced CPD offer • Increased local sufficiency and mainstream inclusion • Stronger co-production and partnership governance • Integrated data-driven decision making • Improved outcomes and experience for CYP and families **(Full Experts at Hand Model in appendix 6)**	**Key focus** Establish consistent delivery infrastructure, expand local capacity, and launch Experts at Hand **(core model- See appendix 6)** **Key milestones** Deliver: • +16 primary specialist places • SEMH in-borough placements embedded (16 places) • Formalise: 15–20 Support Bases (from existing informal provision) • Recruitment of BSIP into BSFH • IQM / AoEA Cohort 1. **Implement Experts at Hand:** • Mobilise & Govern (Months 1–2) • Appoint SRO and establish programme infrastructure, governance boards, decision-making, and assurance frameworks. Outputs: • Programme charter, governance structure, risk/finance controls, stakeholder map, comms plan.	**Key focus** Scale capacity and outreach, embed integrated pathways across education, health (Child Health Hubs), AP and strengthen consistency and workforce capability **Key milestones** Deliver: • Additional 60+ Specialist Base places (primary + secondary) • Expansion of early years specialist provision • Set up and launch of 5 Child Health Hubs Formalise: • All 37 Support Bases operational (primary & secondary) **Embed and stabilise Experts at Hand:** • Fully implement across all phases and localities. • Strengthen consistency in thresholds, triage, and pathways. • Embed workforce model, supervision, and quality assurance.	**Key focus** Deliver a fully mature, inclusive system, optimise quality, consistency, and impact and achieve sustained reduction in demand pressures **Key milestones** Deliver: • Full sufficiency programme: • 240 Specialist Base places (cumulative) • 150 SEMH places • 200 post-16 places • Embed the Child Health Hubs. **Optimise & Integrate Experts at Hand (Year 2–3):** • Use demand, impact, and equity data to refine pathways and resource allocation. • Strengthen integration with SEND, AP, and health commissioning. • Reduce duplication and improve inclusion outcomes across the

	• Analyse & Map (Months 2–3) • Complete borough SEND needs analysis and map existing provision to identify gaps, duplication, and priority cohorts. Outputs: • Needs profile, inclusion risk map, workforce (including JD's) and system maps, baseline metrics. • Design the Service (Months 3–6) • Define service offer, thresholds, access routes, triage model, and workforce structure. • Outputs: Service model, eligibility criteria, access/referral system, triage SOP, staffing model. • Build & Assure (Months 5–9) • Develop pathways (EY, C&I, C&L, SEMH, AP, sensory/physical, PfA, whole setting). • Finalise all documentation, governance, data, safeguarding, and funding/commissioning frameworks. • Launch recruitment campaign with Health colleagues. Outputs: • Service specification, QA framework, protocols, commissioning and finance model. • Co-produce & Pilot (Months 4–10) • Undertake structured co-production and pilot across selected settings and pathways. Outputs: • Pilot evaluation, refined model, updated thresholds and processes. Launch (Months 10–12) • Implement borough-wide service with full governance, workforce, and systems in place. Outputs:	• Deliver regular performance reporting and co-production cycles. • Multi-agency model (SaLT, OT, EP, MHST integrated) Align: • Commissioning of therapies into a single coordinated model Implement: • Clear step-up / step-down pathways across all phases Strengthen: • Outreach from special schools fully commissioned and standardised Expand: • Workforce pathways (UWL partnership – trainees, placements, pipeline roles) **Outputs for Experts at Hand (Years 1-2)** • Pilot feedback to inform next steps • Strengthen analytical use of dashboards and reporting through governance levels • Annual evaluation and commissioning recommendations • Evaluate, review and report aligned to SEND Reform Plan **System shift** • From reactive to proactive support • From fragmented services to coordinated pathways • From variable practice to increasing consistency • *ND Pathway* - Implement learning from ND pilots and support pathway improvements informed by findings. Share learning of ND profiling tool pilots across WNL.ND waiting list backlog reduced across WNL • Strengthen implementation of neighbourhood approaches and	system. **Sustain Experts at Hand as a Learning System (Year 3)** • Operate continuous improvement cycle (monthly, termly, annual reviews). • Update thresholds, pathways, and commissioning based on evidence. • Demonstrate impact on inclusion, reduced escalation, and improved outcomes. **Outputs for Experts at Hand (Years 2–3)** • Embedded, high-quality borough-wide service • Routine dashboards and reporting • Annual evaluation and commissioning recommendations • Continuous model refinement aligned to SEND Reform Plan Achieve: • Fully integrated education, health, and AP pathways Implement: • Real-time integrated data dashboards across partners Standardise: • Consistent QA, inclusion audits, and funding accountability framework Sustain: • Workforce pipeline (therapy, specialist teachers, inclusion advisors) • Coproduction across all stakeholders, embedding CYP voice in shaping and reviewing services Demonstrate: • System-wide inclusion impact through outcomes and inspection readiness

	• Live service, Local Offer publication, dashboard, first performance report. • Standardised referral and triage pathway Align: • Outreach from special schools, AP and Specialist Bases into one framework • Coproduction through SEND Summit (October 2026) Embed: • 3-tier AP model (universal, targeted, specialist tiers defined) • coordinated co-production approach by mapping and strengthening CYP voice across the Directorate, building leadership and frontline capability in co-production, and establishing a borough-wide network of practitioner-nominated youth ambassadors to embed CYP voice in shaping and reviewing education, health and care services. Launch: • Borough-wide 0–25 workforce strategy • Core training on OAP and graduated response (all settings) • Inclusion Board re-established as strategic partnership forum • Inclusion Dashboard operational (Phase 1) • Attendance, exclusions, EHCP timeliness, NEET, placement data established and live. • Alternative Provision (AP) tiered model launched (Phase 1) in co-production with local AP school. • Clear pathways for reintegration • SEND workforce "one-stop shop" training hub launched	integration with CYP transformation programmes. • Family response to first year of reforms through collaboration with settings and PCF, analysed and used to inform progress. **Leading indicators (2027–28)** • Out-of-borough placements reduced by 15–20% (from 2025 baseline) • 95% of settings accessing Experts at Hand regularly • 30–40% reduction in escalation to statutory assessment (relative growth slowed) • 85% of settings consistently delivering OAP • All clusters operating fully integrated multi-agency support • Improved attendance for SEND cohort (+2–3%) • Parental engagement to engagement and satisfaction activities increases across all localities.	**System state** • Most children supported locally and earlier • High confidence in mainstream inclusion • Reduced reliance on statutory processes and high-cost placements • Strong shared accountability across partners • *ND Pathway* - ND waiting list backlog reduced across WNL Scale successful approaches and use insights to inform commissioning and service planning. Needs-led approaches embedded within ND pathways • West and North London ICB therapies transformation programme fully embedded; sustainable therapy models in place supporting better outcomes across all 13 boroughs **Leading indicators (2028–29 targets)** Access & Placement • Out-of-borough placements reduced by 25–30% • 90%+ CYP with SEND supported in local mainstream or local specialist provision Early Intervention • 50% increase in early intervention support (compared to 2025 baseline) • Significant reduction in tribunal cases / disputes Quality & Consistency • 95%+ settings meeting OAP expectations • All settings engaged in cluster-based delivery and peer support

	• HPCF engagement model strengthened with systematic involvement in programme design • Data integration programme initiated (education, health, social care alignment) • Review learning to inform shared vision and principles for CYP neighbourhood working across WNL • West and North London ICB neighbourhood commissioning approach aligned with Experts at Hand and Family Hub model from Year 1, with health neighbourhood boundaries aligned with school cluster geography where possible to support integrated working across health, education and local authority services **Core minimum requirements delivered** • Consistent Targeted and Targeted Plus offer through OAP + EaH • Early intervention pathways established (via MIP, SENIF, EaH) • Multi-agency governance in place (Inclusion Board, strengthened operational feedback loops) • Clear local pathways across universal, targeted and specialist provision • Workforce development system established • Initial integrated data reporting supporting planning and accountability **Leading indicators (2026–27)** • Out-of-borough placements reduced by 5–8%		System Performance • Reduction in EHCP growth rate to sustainable level • Improved attainment and attendance for SEND cohort (closing gap trend) • Increased parent/carer confidence (survey-based improvement year-on-year) Workforce • All settings access multi-disciplinary support within agreed timelines • Sustained recruitment pipelines across therapy and specialist roles Stakeholders * Parental satisfaction surveys show an increase in participation to 85% and demonstrate better confidence in the system.

	• 80% of schools accessing Experts at Hand • 20% increase in early intervention (pre-EHCP support cases) • Reduction in EHCP requests growth rate (stabilisation vs previous year) • 75% of settings meeting OAP expectations (QA audits)		

6. What will the local area partnership deliver in the first year?

Please outline the key workstreams, milestones and trajectory your local area partnership will deliver and achieve in 2026-27 as well as how you plan to spend the investment allocation that will help fund this year's delivery. Please share key milestones and anticipated dates, success measures, cost breakdown and category. These should incorporate the core minimum requirements, be mapped to the building blocks above and should reflect a more detailed trajectory to the narrative, milestones and target metrics outlined in the 2026-27 column above.

2026-27 Local delivery plan		**Q2**		**Q3**		**Q4**	
Workstream outline – mapped to building block ***Outcome -*** *what you want to achieve with this workstream* ***Success measures –*** *how you measure progress drawing on metrics from the accompanying data template*	***Responsible lead per workstream*** *– accountable for the delivery of the workstream and the identified outcome.*	***Milestones per workstream*** *What key milestones will enable you achieve your targeted trajectory*	***Target trajectory per workstream*** *Where do you expect your data to be?*	***Milestones per workstream*** *What key milestones will enable you achieve your targeted trajectory*	***Target trajectory per workstream*** *Where do you expect your data to be?*	***Milestones per workstream*** *What key milestones will enable you achieve your targeted trajectory*	***Target trajectory per workstream*** *Where do you expect your data to be?*

Expansion of Local Specialist & Inclusive Provision *Outcome:* Increased local capacity across phases, enabling more CYP to be educated locally in inclusive settings and reducing reliance on independent and out-of-borough provision. *Success measures:* Increase in local specialist places (Specialist Bases and post-16) Reduction in independent/non-maintained placements Increase in % CYP accessing in-borough provision	Head of Service for Resources, Planning & Funding.	Expand pilot Specialist Bases (8 → 16 places per base) Introduce post-16 pathways (Independence Hub and Employability Hub) Begin transition from SEN Centres to Specialist Bases Finalise SEMH all-through expansion model Map all support bases (31 baseline)	+56 additional specialist places in development Post-16 pathways operational planning complete	Agree and publish Specialist Base standards (entry/exit, outreach, purpose) Confirm special school outreach model linked to all bases Define role of Support Bases within OAP Begin Oaklands post-16 expansion planning	Clear, consistent borough-wide model for Specialist and Support Bases Improved consistency of inclusive practice across settings	Deliver +30 additional post-16 places Progress early years expansion and formalisation of Support Bases Embed transition planning for in-borough placements	Increased local sufficiency Reduction trajectory established for out-of-borough placements
Access to Specialist Support		Finalise and publish 3-tier AP model	AP model in place with clear reintegration pathways	**Experts at Hand offer:** Weeks 12–18 – Set thresholds and	Increasing % of settings accessing EaH	Fully operational AP Directory and	Increase in reintegration from AP

and Local Placements *Outcome:* Earlier, equitable access to specialist advice and support through a single, locality-based system (Experts at Hand), reducing escalation to statutory processes. *Success measures:* % settings accessing Experts at Hand Increase in Targeted and Targeted Plus interventions without escalation Reduction in EHCP requests Increase in AP reintegration rates	Head of Service for Access, Inclusion & Participation	Strengthen Fair Access Panel as gateway for early intervention and placements Implement 6+6 model for Tier 3 AP placements **Experts at Hand offer:** Weeks 1–4 – Mobilise programme: Appoint SRO, establish programme team, and put in place core infrastructure (charter, plan, risk/finance controls, comms, equality screening, stakeholder map). Weeks 2–8 – Establish governance: Implement multi-agency governance linking to the Area SEND Partnership Board, with clear decision-making, escalation, data sharing, safeguarding, and accountability frameworks across all groups. Weeks 4–10 – Complete needs analysis: Develop a comprehensive SEND evidence base (demand, inclusion, workforce, capacity, equity), including a borough dashboard, priority cohorts, and initial demand model.	EaH workforce recruited and mobilised Baseline therapies review completed and draft model of care developed. Engagement and co-production on draft model completed. Review existing neighbourhood models across legacy NCL / NWL	eligibility: Establish clear, consistent thresholds, eligibility and exclusions (with sector testing and equality review) to ensure fair access and prevent drift from ordinarily available provision. Weeks 14–22 – Design access and referral system: Develop a simple, multi-route access model (Local Offer, consultation, request form, outreach, escalation), with defined response categories, timescales and consent processes. Weeks 18–24 – Build triage model: Implement a multi-agency triage system with clear membership, decision-making framework and protocols to ensure timely, appropriate and safe responses. **Outcome by Week 24:** A transparent, equitable access and triage system is established, with clear thresholds, streamlined referral routes, and a coordinated multi-agency response model in place.	Reduction in delays to specialist advice Recruitment for Speech and Language Advanced Practitioner launched WNL neighbourhood vision and principles agreed. Strengthen links with Family Hubs and Best Start in Life programmes	placement monitoring system Strengthened oversight of reduced timetables **Experts at Hand offer:** Weeks 24–36 (Build Capacity, Operationalise the Model) Develop workforce and delivery model: Finalise staffing structure, roles, supervision, caseload weighting and quality assurance to ensure capacity aligns with demand. Create priority pathways: Implement clear, operational pathways for key areas (early years, autism/C&I, SLCN, SEMH/EBSA, AP prevention, sensory/medical, PfA and whole-setting support). Finalise protocols and documentation: Complete and approve all operational, safeguarding, clinical governance, data, and recording frameworks required for delivery. Strengthen funding and commissioning controls: Align budgets, SLAs and	Reduction in escalation to EHCP/ statutory routes Advanced Practitioner role(s)in post. System mapping and baseline assessment completed. Established pan WNL MHST network for shared learning and best practice Child Health Hub implementation incorporated into future neighbourhood model. Priorities for 2027/28 agreed

		Weeks 6–12 – Map the system: Map all existing services and pathways to identify gaps, duplication, and dependencies, clarifying the scope and added value of Experts at Hand. Weeks 10–12 – Define service offer (initial): Begin shaping a clear, tiered service offer and pathway structure, including draft service menu and delivery model. **Outcome by Week 12:** Strong programme foundations in place, with governance live, robust evidence established, system mapping complete, and a clearly defined direction for the service model.		Map baseline demand, response times and access routes Implement 6-weekly EOTAS review processes		monitoring to evidence impact, additionality and sustainability. **Outcome by Week 36:** A fully specified, staffed and quality-assured service model, with priority pathways live and ready for pilot delivery. Alignment of special school outreach within EaH model	
System Leadership, Partnership and Co-production *Outcome:* Strengthened governance, consistent inclusive practice, and embedded co-	Head of Service – Access, Inclusion & Participation Head of Service – Standards, Practice & Partnerships	Complete baseline inclusion audits Introduce universal offer self-evaluation process Establish locality cluster model (West/Central/ East) Map post-16 pathways and transition gaps	Baseline understanding of inclusion quality across system Improved visibility of gaps in provision and transition	Launch SEND workforce training one-stop shop for all mainstream schools, PVI's, MATs and Specialist settings Embed training into SENCo networks and inclusion visits Strengthen governance (Inclusion Board and Borough Education Board) Expand Step into School and early identification	Increased workforce training uptake Improved consistency in graduated response 1/3 of Specialist Bases achieving the IQM 100% pass rate for School Leaders and LA Professional Leads in AoEA	Complete rollout of NEN/AET training across majority of settings Strengthen multi-agency working with health and Family Hubs Expand co-production with HPCF and CYP (systematic engagement model)	Improved parent/carer engagement Stronger co-production embedded in delivery

production with parents, carers and CYP. *Success measures:* Parent/carer engagement participation rates % settings completing inclusion audits/self-evaluation Increased CYP and parent voice in decision-making Improved consistency in inclusive practice				programmes for Transition. AoEA Cohort trained – to include internal and external colleagues in collaboration – "inclusion champions" to offer focus support to mainstream settings and build capacity.			
Inclusive Culture, Behaviour and Funding Reform *Outcome:* Funding and accountability aligned to support earlier intervention, consistent inclusive practice, and value for money.	Head of Service – Access, Inclusion & Participation Head of Service – Standards, Practice & Partnerships	Embed MIP into early years (replace SENDIF) Implement consistent funding decision-making framework Apply Top-Up Funding model to new EHCPs Establish expectations for group-based interventions	Increased early intervention at Targeted and Target Plus levels Reduction in immediate escalation	Continue Top-Up Funding application to annual reviews (priority cohorts) Begin transition planning from out-of-borough placements Begin baseline tracking of funding use and outcomes	Improved alignment between funding and provision Early evidence of reduced demand on high-cost placements	Align funding model with Specialist Base expansion and sufficiency planning Embed tracking of impact of funding decisions	Clear link between funding, outcomes and inclusion Strengthened accountability and value for money

Success measures: Reduction in EHCP requests Improved impact of SEN Support interventions Baseline established linking funding to outcomes Increased % of CYP supported earlier							

£1Projected Investment Spend per quarter *Please specify funding source for each category* *Example categories*: Programme oversight/additional leadership capacity. Workforce Recruitment Workforce training and development Data/Digital **Total Spend –** £3.5m - staffing and systems £2.2m - allocations (SENDIF & MIP) £10.6m – capita **<u>Projections and Forecasts can be viewed in appendix 11 as well as in the Data spreadsheet (attached).</u>**	• 80% EAH team – 4 roles £325K + Special School & AP Outreach £125K + CB - £2K • Transformation £57.5K = 10% • Data £57.5K = 10% **(See Appendix 12 for full breakdown)** • Programme Oversight / Additional capacity (Transformation Funding) - Equivalent to Professional Lead in staffing structure - £185K (per annum) • Data / Digital (Transformation Funding) Data Performance Officer £52k (per annum) • Workforce – IQM Funding for Expert Specialist Schools and Specialist Bases – 19 x £3000 (£57,000) over 3 years • Workforce (Experts at Hand) - recruitment of Professional Lead (SaLT) £92.5K (per annum) • Workforce Training and Development - NEN license - £6.3K (per annum) • SENIF Funding £1,200K and MIP Funding (HNB) £1,000K (per annum • Data/Digital - Digital improvement – LBH capital allocation £90K	• 80% EAH team – 4 roles £325K + Special School & AP Outreach £125K + CB - £2K • Transformation £57.5K = 10% • Data £57.5K = 10% • Workforce (Experts at Hand) - £1,705K (per annum) • Workforce Training & Development (CPD Funding / Inclusion Funding) - £10K (per annum) • Workforce (Experts at Hand) Outreach from Special Schools - £500K (per annum) • Best Start Family Hubs – 3 x Dedicated SEND Practitioners £513K (per annum) • Data/Digital - Digital improvement – LBH capital allocation £90K	• 80% EAH team – 4 roles £325K + Special School & AP Outreach £125K + CB - £2K • Transformation £57.5K = 10% • Data £57.5K = 10% • Spend on CPD and key officer - (Professional Development Lead for Reforms and Professional Lead for Standards & Inclusion). - £90K per annum) • Additional places (HN Capital Funding) - £10,603K (2026/27 (Sources HNCF and future capital allocations from DfE • Data/Digital - Digital improvement – LBH capital allocation £90K

7. How will the local area partnership deliver the first-year plan?

Please set out how you will ensure the required capacity and capability is in place from organisational corporate functions to support implementation of the plan. This could include reference to how you plan to build or bring in project delivery capability to manage delivery against the plan, support prioritisation, and effective use of resources; and how you plan to build the capacity and capability in data and analytics to support effective tracking against the measures in the plan and reporting that informs decision making.

The SEND Reform Programme will be delivered as a partnership-wide, service-led programme, with accountability shared across the Local Authority, Integrated Care Board (ICB), education providers and wider partners. Delivery will be embedded within existing education, health and care structures to ensure that reform activity becomes part of sustainable system transformation rather than a standalone programme.

Transformation funding will be used to create dedicated capacity to design, implement and sustain reform activity. This will include the establishment of a dedicated SEND Reform Manager within the Innovation and Development Service to provide programme management expertise, coordinate delivery across workstreams, oversee governance and reporting, manage risks and dependencies, and ensure delivery remains aligned to national SEND reform expectations.

Funding will also support the creation of two programme delivery and transformation posts at management level to lead implementation across the reform pillars, coordinate locality-based delivery, and drive improvements in inclusion, early intervention and preparation for adulthood pathways. These roles will provide the additional capacity required to implement reform at pace while maintaining day-to-day service delivery.

Recognising the importance of robust data and evidence, transformation funding will support dedicated data and analytical capacity to strengthen performance monitoring, forecasting, benefits realisation and evaluation. This will enable the development of integrated SEND dashboards, locality-level reporting and outcome tracking across education, health and care services.

Funding will also support a dedicated Inclusion Quality Mark (IQM) and Inclusion Development role, working directly with schools, early years settings and partners to embed inclusive practice, support implementation of the Universal Inclusion Offer, and build confidence within mainstream settings to meet a wider range of needs. Alongside this, through mainstream outreach – "inclusion champions" the use of local talent and expertise to support colleagues

Alongside this additional capacity, existing resources across the Local Authority and ICB will support delivery through established service leadership, operational management and corporate functions. Heads of Service across Learning, Lifelong Skills and Employment, Children's Services, Health and Commissioning will lead delivery of reform activity within their areas of responsibility. Existing corporate functions, including finance, commissioning, workforce development, communications, digital services, human resources and business intelligence, will provide specialist support through resource planning, integrated commissioning, workforce development and performance management.

Delivery will also be strengthened through Hounslow's locality-based "Experts at Hand" model and partnership with the University of West London to develop sustainable workforce pathways across specialist disciplines, including Speech and Language Therapy, Occupational Therapy and wider clinical services.

Together, the combination of dedicated transformation capacity and existing partnership resources will provide the leadership, programme management, workforce development, data capability and operational infrastructure required to deliver sustainable SEND reform and improved outcomes for children and young people with SEND.

Please see Appendix 12. for breakdown of the funding.

8. Other funding Local Authorities.

Block Transfers: If you have made a block transfer (Schools Block to High Needs Block) for 26-27, please set out how your plans for this funding align with the activities outlined above.

Following the allocation of funding to agreed priorities, including the National Funding Formula (NFF), Minimum Funding Guarantee (MFG), growth funding and the Falling Rolls Fund, the remaining Schools Block balance has been identified for transfer to the High Needs Block. The Council is seeking approval, in line with Schools Forum agreement, to transfer £449,204 (0.17%) from the Schools Block to the High Needs Block.

This transfer directly supports the objectives of Hounslow's SEND Reform Programme by enabling investment in earlier intervention, inclusive mainstream provision and sustainable local support arrangements. The transfer forms part of a wider strategy to reduce escalation of need and strengthen the capacity of mainstream schools to meet the needs of children and young people with SEND closer to home.

Funding will support the continued implementation of the banded funding model, ensuring resources are aligned more transparently and equitably to levels of need. This will help schools deliver high-quality Ordinarily Available Provision and targeted SEN Support, reducing reliance on statutory assessment and high-cost specialist placements where needs can be met effectively within mainstream settings.

The transfer will also contribute to the expansion of local provision and the development of the Inclusion Bases Pathway, supporting the reform ambition to increase the number of children and young people educated within mainstream schools and local specialist provision. In addition, it will support wider inclusion activity, including workforce development, specialist outreach and to enable expertise to be embedded within local settings.

By investing resources earlier in the pathway, the transfer supports the reform priorities of improved inclusion, stronger mainstream capacity, reduced use of independent and out-of-borough placements, and better outcomes for children and young people. It also contributes to the long-term financial sustainability of the High Needs system by shifting investment towards prevention, early support and locally delivered provision.

The Schools Forum has agreed the recommendation that £449,204 (0.17%) is transferred from the Schools Block to the High Needs Block to support these priorities.

Capital: We have announced at least £3 billion in high needs capital between 2026-27 and 2029-30 to support children and young people (CYP) with SEND, or those requiring alternative provision (AP). This funding is intended to support place delivery across the full 0-25 age range, including early years and post-16. We expect funding to support the following outcomes:

a. Inclusion at the core of high needs sufficiency strategy, resulting in more children and young people with SEND accessing suitable places in mainstream settings, across all phases of education
b. Every child or young person who needs a place in an inclusion base can access one
c. Fewer children and young people with SEND needing to travel a long way to access a suitable placement
d. Improved suitability of the mainstream estate to support children and young people with SEND, with adaptations to improve inclusivity and accessibility of the physical environment

We also welcome innovative uses of high needs capital to drive inclusion, for example, investment in assistive technology for use in mainstream settings.

Please outline your strategy for how this funding will meet the outcomes above, with reference to the core minimum requirements and other workstreams in this reform plan where appropriate. We would like to see detail around your plans to increase capacity for inclusion bases (formerly known as SEN units, resourced provision and pupil support units – SU/RP/PSUs), such as schools, colleges or early years providers identified, engagement with relevant settings and trusts, and target cohort of needs.

If your plans include increases to places in special schools or specialist post-16 institutions, please include a clear rationale, showing the need that is being met, and why it cannot be met through other types of provision, such as inclusion bases.

If you are receiving additional capital funding to replace one or more planned special or AP free schools, please set out how this funding will meet need in your area, and plans for engaging relevant trusts in your sufficiency planning.

Our SEND Sufficiency Strategy (2026–2032), sets out a structured, evidence-led approach to ensuring sufficient, high-quality provision across the 0–25 age range. This strategy responds directly to rising demand for Education, Health and Care Plans (EHCPs), system pressures on placements, and reducing the reliance on independent and out-of-borough provision. Capital investment will enable expansion of capacity while embedding inclusion as the foundation of local delivery.

(a), inclusion is central to our sufficiency model. The High Needs Capital Programme will deliver approximately 590 additional places, with a significant proportion (240 places) developed as Specialist Bases within mainstream schools. These bases will primarily support pupils with in the four areas of need, aligned with identified gaps in local provision. The Resource Pathways project, already piloted is designed to create sustainable, local mainstream pathways for pupils who might otherwise require specialist placements. Engagement with schools, trusts, and early years providers has been integral to identifying host settings and ensuring readiness to deliver inclusive provision.

(b), ensuring every child who requires an inclusion base can access one, we are scaling this model across early years, primary, secondary and post 16 phases. Expansion plans include both new Specialist Bases and the growth of existing provision, supported through refurbishment and repurposing of current estate. This allows for us to balance our four special schools and create a sponsorship model across all age cohorts, the four areas of need and within local communities.

(c), reducing travel distances is a key driver of our planning. Current reliance on out of borough placements has increased transport costs and impacted family experience. By distributing new provision strategically across the borough, including special school expansions from primary into secondary will enable more children to access suitable education closer to home. Transport and placement data are informing site selection of new provision to address geographic inequities. This place-based planning approach ensures equitable access across localities, supports sufficiency within reasonable travel distances for families, and enables children and young people to be educated within their local communities.

(d), improving the suitability of the mainstream estate, will be delivered through targeted capital works. Investment will focus on adapting existing buildings to support a broader range of needs, including sensory-friendly environments, accessible facilities, and flexible learning spaces. Works will include acoustic adaptations, breakout spaces, hygiene facilities, and accessibility improvements to enable mainstream settings to meet a wider range of needs. In addition, we will support innovative approaches such as the integration of assistive technology within mainstream classrooms to enhance access and independence for pupils with SEND.

While inclusion remains the priority, our strategy recognises that some children require specialist provision. The delivery of 150 secondary age SEMH places to create all through provision, and 200 additional post-16 places reflect clearly evidenced demand of reducing reliance on places outside of Hounslow that cannot be fully met through inclusion bases. These cohorts include pupils with complex SEMH needs and young people requiring highly specialised post-16 pathways. This includes learners with high levels of need who require therapeutic environments, smaller class sizes, and specialist staffing that cannot be consistently delivered within mainstream inclusion bases. Without this capacity, pressures on placements and high-cost independent provision would continue to escalate.

Overall, this capital programme represents a balanced and sustainable system response: expanding inclusive mainstream provision, strengthening specialist capacity where necessary, reducing system pressures, and improving outcomes for children and young people with SEND

9. **System partner and stakeholder engagement, and co-production.**

Please outline how the local area partnership plans to engage system partners and stakeholders to develop and implement the plan – include planned engagement with schools and early years settings, alternative providers, FE and post-16 providers (including those your young people attend that are not within your local area), Parents and Carers and children and young people with SEND, with reference to the core minimum requirements. Consider changing roles and responsibilities in the context of the Schools White Paper and how you work collaboratively to manage the transition. Please indicate where additional support is required to engage partners or

stakeholders - senior officials at the Department for Education will be available to contribute to summer term events with education

Hounslow's SEND Reform Programme is founded on a partnership approach that strengthens inclusion, early intervention and collective accountability across education, health and care. The Local Partnership Maturity Assessment identified strong foundations for collaboration whilst highlighting the need for greater visibility of decision-making, wider stakeholder engagement and clearer opportunities for partners, children, young people and families to influence change.

To address this, Hounslow will implement a comprehensive engagement and co-production programme involving schools, MATs, early years providers, alternative provision, FE and post-16 providers, health partners, social care, the voluntary and community sector, the Parent Carer Forum (PCF), and children and young people with SEND. Engagement will take place through SEND Summits, the Hounslow Education Board, SENDCO networks, MAT forums, locality groups, Best Start in Life governance arrangements, Family Hub networks, post-16 forums and dedicated reform workshops.

As the education landscape continues to evolve, Hounslow will work closely with schools and MATs to strengthen shared ownership of inclusion, workforce development and local provision planning. Alternative Provision, FE and post-16 providers, including those attended by Hounslow learners outside the borough, will be engaged through transition planning groups, annual provider engagement events and preparation for adulthood workstreams to ensure reforms reflect the full 0–25 pathway.

Co-production will be central to delivery. A formal Co-production Framework will set out how children, young people and families participate in decision-making, how feedback influences delivery and how impact will be evaluated. The Parent Carer Forum will continue to be represented within governance structures and workstreams, while wider parent engagement will be supported through Family Hubs, SENDIASS, surveys, focus groups and community events. Children and young people's voices will be captured separately through direct participation activities, youth ambassador programmes and engagement led by the Wellbeing and Learner Voice Officer.

Progress will be monitored through the Partnership Maturity Matrix, annual confidence surveys, participation measures, governance feedback and partnership dashboards. A jointly developed Universal Offer Agreement, aligned to National Inclusion Standards and signed by education, health, local authority and parent representatives, will provide a shared framework for accountability and continuous improvement.

Hounslow would welcome support from senior Department for Education officials through participation in summer term leadership events, SEND Summits and partnership workshops with schools, MATs and system leaders. This will support stakeholder engagement, strengthen understanding of national reform expectations and reinforce collective ownership of the reform programme across the local area.

1. **Risks and Mitigations Risks**

   What are the key risks that could affect the successful implementation of your Local SEND Reform Plan, and what mitigation strategies are in place to manage these risks? Please include a maximum of 5 risks with impact and likelihood RAG for each risk. See Annex C for suggested risk matrix.

Risk	Impact	Likelihood	RAG	Mitigation	Residual RAG
Financial Sustainability and Reform Delivery – Insufficient funding and financial pressures limit the pace and scale of SEND reform implementation and delivery.	Critical	Possible		Robust programme and financial governance arrangements monitor expenditure, delivery milestones and outcomes. Resources are prioritised against agreed reform objectives, with plans adjusted in response to emerging national policy and funding changes. Regular monitoring through SEND Reform and High Needs governance ensures early identification and management of financial risks.	
Mainstream Inclusion and Demand Management – Mainstream provision is unable to meet increasing levels of need,	Critical	Possible		A system-wide inclusion strategy is strengthening the capacity of mainstream settings to meet need earlier and more effectively. Regular monitoring of demand, inclusion outcomes and sufficiency	

leading to continued growth in EHCP requests, specialist placements and out-of-borough provision.				enables timely intervention where pressures emerge, reducing escalation to statutory assessment and specialist provision wherever appropriate.	
System Partner Engagement and Capacity – Schools, trusts, early years providers, post-16 settings and health partners do not consistently engage with or have sufficient capacity to implement reforms.	Critical	Possible		Strong partnership governance, regular engagement forums and shared accountability arrangements ensure that all partners contribute to reform delivery. Senior representation from education, health and care organisations provides oversight of implementation, while established relationships support continued collaboration despite organisational changes within partner agencies.	
Workforce Capacity and Specialist Expertise – Insufficient specialist workforce capacity and recruitment challenges affect the delivery of reform priorities and support for children and young people.	Critical	Possible		Joint workforce planning across education, health and care supports coordinated recruitment and retention activity. Ongoing workforce development, clinical supervision arrangements and opportunities for professional growth help maintain specialist expertise and reduce the impact of vacancies on service delivery	
Health and ICB Partnership Capacity Restructure of personnel in the ICB and across London has posed challenges for partnership working. NWC ICB cover 13 Local Authorities. The nationally mandated headcount reductions in WNL ICB results in lack of engagement from health services in the development and implementation of the local SEND Reform Plan	Moderate	Possible		Strengthening communications between ICB colleagues and LA, Schools and Settings ICB Membership on Education Board - DCO Confirmed named senior leads for NCL & NWL from WNL ICB shared with all local authorities Colleagues from across WNL ICB involved in local meetings, workshops and reviewing documents High level structure and governance information shared for all local plans to include Continue to utilise strong working relationships with health providers alongside ICB	
Governance, Performance and Stakeholder Confidence – Weak oversight, poor quality data or insufficient co-production prevent effective monitoring of progress and reduce confidence in the reform programme.	Moderate	Possible		Established governance structures provide regular scrutiny of performance, risks and outcomes. A comprehensive reporting framework enables evidence-based decision-making, while ongoing engagement with children, young people and families ensures feedback informs delivery and maintains transparency and confidence in the reform programme.	

10. Dependencies

Please detail the key areas of the local area partnership's proposed SEND future state and roadmap that may be impacted by wider reforms nationally and locally and outline how you will manage these. We expect these will include but not be limited to:

- NHS reforms
- Local Government Re-organisation
- Reforms to Children's Social Care
- Best Start in Life, including Family Hubs
- Best Start in Life Strategy
- Curriculum and Assessment Review

Hounslow's SEND future state and implementation roadmap will operate within a rapidly evolving national policy environment. The partnership recognises that reforms across education, health and social care may influence governance arrangements, funding models, workforce capacity, inclusion expectations and statutory accountability. The roadmap has therefore been designed to remain flexible and responsive, enabling delivery to align with emerging policy while maintaining a focus on improved outcomes for children and young people with SEND.

The recently announced Education for All Bill is expected to introduce significant reforms aimed at improving educational standards and strengthening support for children and young people with SEND. Early indications suggest a stronger focus on inclusive practice, earlier intervention, improved access to support within local communities and greater accountability for mainstream settings. Hounslow's future state aligns closely with these principles through its pathway-based model, strengthened graduated response, enhanced inclusion framework and development of employability and skills pathways.

The ongoing Curriculum and Assessment Review is also a key dependency. Proposed changes to curriculum content, assessment arrangements and accountability measures may influence how schools meet the needs of learners with SEND and support inclusive practice. Hounslow will monitor developments closely and ensure that local inclusion approaches, workforce development and support pathways remain aligned with any national changes arising from the review.

NHS reform, including delivery of the NHS 10-Year Health Plan, is closely aligned with SEND reform through its focus on prevention, early intervention and community-based support. Rising demand, workforce pressures and lengthy waits for therapies, mental health support and neurodevelopmental services reinforce the need for integrated approaches. The development of neighbourhood teams and Family Hubs provides opportunities to strengthen multidisciplinary working, improve early identification of need and deliver coordinated support closer to home. Delivery will be supported through joint governance arrangements, workforce planning, data sharing and clear referral pathways to ensure services remain responsive and effective.

Children's Social Care reform and the wider Children's Wellbeing agenda are expected to influence safeguarding, attendance, inclusion, family help and early intervention arrangements. Hounslow will align SEND transformation activity with wider children's services reforms, strengthening integration across education, health, social care and family support services to support earlier identification and coordinated intervention.

The Government's Best Start in Life agenda, alongside the continued development of Family Hubs and changes to early years funding and provision, is another important dependency. Hounslow will align SEND delivery with its Best Start in Life strategy, including reviewing sufficiency across mainstream and specialist early years provision and strengthening inclusive practice and early intervention.

National SEND reforms, including the emerging National Inclusion Standards, will continue to shape expectations for mainstream inclusion, specialist pathways and universal provision. Hounslow will regularly review its co-produced Universal Inclusion Offer to ensure local practice remains aligned with national policy while reflecting local need.

Local Government Reorganisation is not expected to have a material impact on delivery of Hounslow's SEND Reform Plan. As a London Borough, Hounslow is not currently affected by proposed reorganisation arrangements and therefore existing governance, partnership structures and delivery mechanisms will remain in place throughout implementation.

Overall, strong partnership governance, robust programme management, shared performance frameworks and meaningful co-production will ensure the roadmap remains deliverable, responsive and focused on sustainable improvements in outcomes for children and young people with SEND.

Section 3 – Monitoring and Evaluation

2. **How will the local area partnership know delivery is on track?**

Please set out how you will monitor and track progress referencing:

- ***Monitoring tools and processes*** - the specific tools, systems, and data you will use to track delivery milestones and measure the impact on outcomes.

> *Some Local Area Partnerships hold data in a central SEND operational dashboard. This is used by teams on a weekly basis to identify trends in demand or inform conversations with local school or setting leaders.*
>
> *In some Local Area Partnerships, a view of the Key Performance Indicators (KPIs) is reviewed monthly by a SEND Board to take decisions on prioritisation, resourcing and delivery of services informed by regular data.*

Please set out how you will use data to track demand (e.g., EHCP applications for assessment), Service delivery (e.g., Speech and Language Specialists deployment; places created), Service quality (e.g., parental satisfaction) and outputs (e.g., pupil attendance; pupil exclusions)

- ***Feedback and adaptation mechanisms*** - what feedback loops and stakeholder input you will use to review progress and adjust your approach.

Monitoring, Evaluation and Continuous Improvement

Delivery of the SEND Reform Plan will be monitored through a combination of real-time operational data, performance reporting, quality assurance activity, financial monitoring and strategic partnership oversight. Monitoring will focus on both delivery of programme milestones and the extent to which reform activity improves inclusion, service quality, system sustainability and outcomes for children and young people with SEND.

A central SEND and Inclusion Dashboard will integrate data across education, health and care services. The dashboard will be refreshed regularly and used by partners to monitor performance, identify emerging risks, respond to system pressures and inform decision-making.

Performance monitoring will focus on four key domains:

1. Demand and System Pressures

- Requests for EHC Needs Assessments (EHCNAs)
- EHCP applications and timeliness
- Waiting times across assessment and specialist pathways
- Referrals to therapy and neurodevelopmental services
- Tribunal rates and mediation outcomes
- Sufficiency across mainstream and specialist provision

2. Service Delivery and Reform Implementation

- Delivery against reform milestones and priorities
- Workforce capacity, recruitment and retention
- Caseloads and deployment of specialist practitioners
- Number of SEND places created
- Uptake of inclusion support and outreach services
- Progress against the seven pillars of reform

3. Quality, Inclusion and Experience

- Parent, carer and learner feedback
- School and practitioner feedback
- EHCP quality assurance
- Inclusion Audit findings
- Universal Offer implementation
- Peer review and inspection outcomes

4. Outcomes and Impact

- Attendance, suspensions and exclusions
- Educational attainment and progress
- Participation in education, employment and training
- Preparation for adulthood outcomes
- Reduction in escalation to specialist provision where needs can be met through inclusive mainstream support
-

Monitoring will be complemented by a structured feedback and improvement process. Quantitative data will be considered alongside qualitative intelligence gathered through Inclusion Audits, Parent Carer Forum engagement, learner participation, school feedback and partnership forums. Where performance data or stakeholder feedback identifies emerging issues, focused reviews will be undertaken to understand root causes and agree corrective action.

Progress, learning and impact will be reviewed quarterly through established governance arrangements, including operational delivery groups, the Inclusion Board, Hounslow Borough Education Board and senior Local Authority and Integrated Care Board forums. Joint Senior Responsible Owners will maintain oversight of delivery, risks, benefits and outcomes.

A live risk register, benefits realisation framework and financial monitoring reports will support assurance and accountability. Progress against the SEND Partnership Maturity Matrix will be reviewed through stakeholder forums, partnership summits and co-production activity. This continuous cycle of monitoring, feedback, review, adaptation and evaluation will ensure the reform programme remains responsive, evidence-led and focused on improving outcomes for children and young people with SEND.

11. Reporting to DfE

Using the attached data template, the local area partnership is required to provide quarterly data returns to DfE against selected key metrics. DfE will, in turn, provide quarterly data reports with visualised analysis and benchmarking that will support your local delivery, monitoring and evaluation. This will include data the department holds on **Attendance**, **Exclusions**, and **Unauthorised absence**.

Please use the attached data template to upload your initial data return to DfE.

Section 4 – Governance

3. **How will the local area partnership ensure delivery of plans remain on track?**

Please outline the governance structures in place to oversee delivery. Clearly set out who is responsible for overseeing reform delivery, what each governance group or individual is accountable for, and how these arrangements ensure progress is monitored and decisions are made transparently. Please identify where the named SRO for the Local SEND Reform Plan sits within the governance structure and ensure your response incorporates the core minimum requirements.

Delivery of Hounslow's SEND Reform Plan will be overseen through a robust partnership governance framework that provides clear accountability, strong joint ownership across education, health and care, and effective mechanisms for monitoring progress, managing risks and making strategic decisions.
The governance model has been designed to align operational delivery, performance monitoring and strategic oversight, with clear escalation routes from frontline services to senior leadership across the Local Authority and Integrated Care Board (ICB). This ensures that risks, barriers and emerging issues can be identified early and addressed promptly.
The Director of Learning, Lifelong Skills and Employment and the Designated Clinical Officer (DCO) will act as the joint Senior Responsible Owners (SROs) for the Local SEND Reform Plan. This dual-SRO model reflects the shared accountability required to deliver sustainable, system-wide reform across education, health and care. The Local Authority SRO will provide strategic leadership for inclusion, education and SEND transformation, while the Health SRO will lead on NHS and ICB responsibilities, including commissioning, therapy services and neurodevelopmental pathways. Together, they will be accountable for delivery of programme outcomes, management of risks and dependencies, oversight of financial resources, and reporting progress to the Department for Education and wider system partners.
Progress will be monitored through milestone tracking, performance dashboards, financial monitoring, risk management processes and regular review against the SEND Partnership Maturity Matrix. Governance arrangements will include oversight through the Inclusion Board, Hounslow Borough Education Board and senior leadership forums across both the Local Authority and ICB. Joint Senior Responsible Owners (SROs) will oversee delivery against agreed outcomes, milestones and risks, supported by regular programme reporting and benefits realisation monitoring. Progress will also be reported through quarterly monitoring arrangements with the Department for Education, providing external assurance, challenge and support to ensure delivery remains on track and aligned with the objectives of the SEND Reform Programme.
Children, young people and families will remain central to implementation through the Parent Carer Forum, co-production groups, youth council, stakeholder forums and partnership summits, ensuring that reform remains transparent, responsive and focused on improving outcomes and experiences for children and young people with SEND.

Governance Mechanism *This may be a governance group, or an individual (e.g. SRO).*	**Purpose/ Responsibilities** *What is the function of this governance mechanism? What are they accountable for overseeing? What information is reported to this governance mechanism?*	**Membership** *Who does this governance mechanism comprise of? [should include health and PCF representation] What stakeholders are represented at this governance mechanism? Please indicate who chairs this.* *(Include n/a if an individual).*	**Cadence** *How regularly does this governance mechanism meet?*	**Decision Rights** *What decisions can this governance mechanism make?*	**Escalation Route** *Where can this governance mechanism escalate issues or decision to?*
Inclusion Board (formerly - SEND Operational Board)	At an operational level, delivery will be coordinated through the Inclusion Board, formerly the SEND Operational Board. This group will be responsible for overseeing implementation of the reform programme, monitoring performance against key milestones, reviewing programme risks and ensuring delivery remains on track. The Board will receive a comprehensive performance dashboard incorporating SEND, inclusion, finance and workforce indicators, alongside qualitative intelligence from schools, services, children, young people and families. The Inclusion Board will be jointly chaired by the Head of Service for Access, Inclusion and Participation and the DCO/SRO, ensuring shared accountability between education and health partners.	HoS for Access, Inclusion & Participation (co-chair) DCO **(Nominated SRO**) (co-chair) Service Manager for AP Service Manager for SEND Parent Carer Forum (PCF) Health partners, including: CAMHS Alternative Provision settings Representatives from Early Years, Schools, Post-16 Family Hubs Representative SENDIASS Commissioning Finance	½ termly	Review and Evaluate success criteria and milestones – KPI's and Inclusion Dashboard reports Outcomes and trends for SEND Pupils SP&P – report progress on Inclusion clusters to here. Qualitive data from setting audits.	The Hounslow Borough Education Board

The Hounslow Borough Education Board	Strategic oversight will be provided through the Hounslow Borough Education Board, which serves as the primary partnership forum for joint accountability across education, health and children's services. The Board will receive regular reports from the Inclusion Board, scrutinise progress against agreed outcomes, review system-wide risks and hold partners collectively accountable for delivery. The Board will also oversee progress against the Local SEND Reform Plan, monitor financial sustainability and ensure alignment with wider education, health and children's services transformation programmes. Through its strategic role, the Board will be responsible for approving significant changes to programme direction, resolving cross-system barriers and ensuring resources are aligned to agreed priorities.	Director for LLSE (**Nomintaed LA SRO) Co-Chair** Maintained Schools (secondary and Primary Reps.) MATs (Primary and Secondary reps) Faith Schools Representative Independent Schools Representative Public Health LA Service Leads EYFS (School and PVI reps.) HEP (Hounslow Education Partnership) Chief Of Nursing **(Nominated SRO) Co-Chair** CSC Representative.	Termly – Full Board ½ Termly – Working Groups (thematic)	Inclusion Board (above) will submit monitoring reports to this board for review. Report to the DfE on progress against Plan Reports to CLT (internal leadership) on progress and financial spend / budget.	Corporate Leadership Team / Board Where risks, performance concerns or resource pressures cannot be resolved through partnership governance arrangements, matters will be escalated to the Local Authority Corporate Leadership Team and senior ICB leadership through established governance routes. This ensures that strategic decisions, financial implications and organisational risks receive timely consideration and that accountability for SEND improvement remains visible at the highest level of both organisations.

If you have a diagram to show the relationship between these governance mechanisms, please upload this here. (Appendix 8)

Section 5 – Central Government Support

12. How can we help you?

Please outline any practical support you need from central government to implement your plan effectively.

This may include:

- Access to specialist expertise or advisory support
- Help with workforce development or recruitment challenges
- Tools or templates to support data collection, reporting, or evaluation
- Facilitation of peer learning or regional collaboration
- Support with system-level coordination across education, health, and care
- Guidance on navigating regulatory or policy barriers

Hounslow is committed to delivering the ambitions set out within its Local SEND Reform Plan and has established strong partnership arrangements across education, health and care to support implementation. To maximise the impact of local reform activity and support sustainable system change, we would welcome targeted support from central government in the following areas.

National Guidance and Reform Clarity

As the SEND reform landscape continues to evolve, timely and consistent national guidance will be critical to supporting effective local implementation. In particular, further clarity regarding the Education for All Bill, National Inclusion Standards, future expectations for mainstream inclusion, and the relationship between local reform plans and wider SEND policy developments would support local areas in aligning delivery, planning provision and making informed investment decisions.

Workforce Development and Recruitment

National support to address workforce challenges across education, health and care would significantly strengthen local delivery. This includes support to increase the supply and retention of key specialist professionals, including Educational Psychologists, Speech and Language Therapists, Occupational Therapists and specialist SEND practitioners. Opportunities for nationally coordinated workforce development programmes, leadership development and shared training resources would support greater consistency and sustainability across the system.

Inclusion, Sufficiency and Financial Sustainability

As national SEND reforms continue to evolve, support to develop sustainable inclusion models across mainstream education would be welcomed. This includes greater clarity regarding future funding arrangements, implementation of National Inclusion Standards, and approaches to balancing investment in early intervention, inclusive practice and specialist provision. Support to develop evidence-based approaches to sufficiency planning, demand management and financial sustainability would assist local areas in delivering reform while maintaining long-term system resilience.

Data, Performance and Digital Integration

We would welcome access to nationally developed tools, benchmarking datasets and reporting frameworks that support consistent measurement of SEND reform outcomes. Common indicators and evaluation methodologies would enable local areas to compare performance, identify effective practice and demonstrate the impact of reform activity more effectively. National support to improve data interoperability across education, health and care systems would further strengthen integrated working and improve the ability to track outcomes for children and young people.

System Leadership and Cross-Government Coordination

Given the interconnected nature of SEND reform, continued support to strengthen collaboration across education, health and care systems would be welcomed. This includes support to align SEND reforms with NHS transformation, Children's Social Care Reform, Family Hubs, Best Start in Life initiatives and wider inclusion agendas. Continued alignment between SEND reform, post-16 education, skills, employment and preparation for adulthood policy will be particularly important in supporting local areas to develop coherent pathways that improve participation, independence and employment outcomes for young people with SEND.

Evidence, Innovation and Peer Learning

Access to emerging national evidence, research findings and examples of effective practice would support local decision-making and continuous improvement. Opportunities to participate in national pilots, test innovative approaches and contribute to the development of future policy would further strengthen local implementation. Hounslow would particularly welcome opportunities to collaborate with national partners and other local areas in developing effective approaches to inclusive education, preparation for adulthood and employability pathways. This would support the development of our Skills and Employability Hub model and strengthen long-term outcomes for children and young people with SEND.

Overall, Hounslow would welcome a collaborative approach between central government and local partnerships that combines clear national direction with flexibility for local innovation, enabling sustainable, inclusive and outcome-focused reform that improves outcomes for children and young people with SEND.

Appendices - Supporting Documents

Document	Link
ICB Slides	WNL ICB SEND Reform Plan 2026 260608 V5.pptx
Executive Summary Infographic	Appendix 2
Vision and Goals Infographic	Appendix 3
Locality Model for Hounslow	Appendix 4
Inclusion Audit	Appendix 5
Experts at Hand Model infographic	Appendix 6
Alternative Provision 3-Tier Model infographic	Appendix 7
Post-16 SEND Model infographic	Appendix 8
Local Partnership Maturity Matrix	The Local Partnership Maturity Assessment Tool - March 2026 (002)
Data & Finance Spreadsheet	FINAL Hounslow - The Local SEND Reform Plan Data Template 160626.xlsx
Finance Charts and Forecasts	Appendix 11
London Borough of Hounslow HN Provision	Appendix SEND Reform plan Average cost calculations.xlsx

Experts at Hand Expenditure	Appendix 13
Governance Model	Appendix 14
Hounslow Road Map	Appendix 15

Annex C – Risk Matrix

IMPACT DESCRIPTION	IMPACT LEVEL	PROBABILITY/LIKELIHOOD				
		< 10%	>10% - <30%	>30% - <60%	>60% - <90%	>90%
		Very Unlikely	Unlikely	Possible	Likely	Very Likely
Cannot deliver Reform Plan; Failure of mission critical activity.	**Crisis**					
Significant impact to objectives; Significant and sustained disruption to activity.	**Critical**					
Delivery targets are compromised; Project delay / budget overrun.	**Moderate**					
Limited impact on delivery targets; Deviations from project resource, timescale or targets.	**Marginal**					
Minimal impact on delivery targets; Minimal impacts to project / programme efficiency.	**Negligible**					