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 leaders.

Name of Local Authority: Wokingham Borough Council

Name of Integrated Care Board: Thames Valley ICB

Local SEND Reform Plan SRO: Jamie Conran, Acting Service Director of SEND & Inclusion

Executive Summary

A brief summary of your local system ‘change story’ – your local context, where you are now, where you want to get to in the next 3 years, how you know you are succeeding and how you will know you have achieved your vision for the next 3 years. Please include a brief qualitative summary. This summary should also include your assessment of current and forecast performance against the headline metrics.

Please structure your ‘change story’ using the following aims:

- *Build a 0-25 system where children and young people receive support to achieve and thrive through (a) more inclusive settings and (b) stronger local partnerships*
- *Improve capacity and capability of the mainstream and specialist workforce to identify and meet need*
- *Improve confidence of children, families, and stakeholders in reform and readiness of the system*
- *Stabilise finances and improve value for money*

Wokingham’s SEND reform plan is driven by a shared ambition to build a more joined-up 0–25 system in which children and young people with SEND achieve, thrive and feel they belong in their local communities. While the local area benefits from committed partners, engaged education settings and established sufficiency planning, current performance is inconsistent and does not yet deliver equitable early support across the system. Access to support varies and workforce capacity is under sustained pressure. Demand for statutory support continues to rise, alongside increasing reliance on specialist and out-of-area provision, creating ongoing pressures on financial sustainability.

Without reform, these trends are forecast to continue, with increasing numbers of children requiring specialist placements, longer waiting times for support, and widening variation in experience and outcomes. The current system remains too reactive, with late escalation to statutory processes and insufficient confidence in mainstream provision to meet need at the earliest point.

Our change story focuses on a shift from a fragmented and reactive model to a more coherent, preventative system in which support is delivered earlier, closer to home and through more consistent, inclusive mainstream practice, underpinned by stronger partnership accountability.

Currently, just over half of children and young people with SEND are educated in mainstream provision, and a clear majority report that they feel they belong. Over the next three years, we will increase mainstream inclusion and significantly strengthen belonging. This will be supported by embedding a Universal Offer, improving early identification and embedding a more consistent graduated response across all settings.

Workforce capacity and capability are critical constraints. While there is strong expertise within the system, it is not consistently deployed and is not yet sufficient to meet demand. To address this, the local authority will lead the Experts at Hand model, jointly commissioned with the Integrated Care Board, to provide structured, multi-agency support to education settings. This will be complemented by a SEND Centre of Excellence, supporting workforce development, professional supervision and peer learning. Together, these approaches will improve the quality of support in mainstream settings and reduce unnecessary escalation.

Confidence among children, families and stakeholders remains variable. Through strengthened co-production, clearer pathways and improved transparency, we will increase confidence, measured through surveys and qualitative feedback, to ensure that families experience earlier, more consistent support across education, health and care.

Financial pressures remain significant, driven by rising demand, increasing complexity of need and reliance on high-cost placements. The plan will rebalance investment towards early intervention and local provision, increase utilisation of commissioned places towards 90%, and reduce reliance on out-of-area provision.

Preparation for adulthood will be further developed with a strengthened focus on improving attainment, increasing progression into education, employment and training, and supporting independence and participation in community life.

Progress will be overseen through a partnership performance framework, aligning quantitative data and lived experience. Providing transparent reporting, support timely intervention where performance does not improve, and ensure a clear line of sight from strategy to delivery, with strengthened governance and shared accountability across the partnership.

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

Our vision is to deliver one coherent, inclusive local SEND system across education, health and care, where children and young people receive the right support at the right time, close to home, and feel they belong, and can achieve positive outcomes. Underpinned by joint commissioning, shared accountability and a single outcomes framework, ensuring progress is transparently tracked, delivered across the partnership and publicly reported annually across the partnership.

Over the next three years, we will deliver this through four measurable system goals, aligned to our partnership performance framework:

1. **Improve outcomes and preparation for adulthood**
   Improved attendance, attainment and progression, including measurable improvements in KS2 and KS4 outcomes and increased participation in education, employment and training.
2. **Strengthen inclusion, belonging and early support**
   More children and young people with SEND will be educated in mainstream, local settings, supported by a consistently delivered Ordinarily Available Provision. We will increase reported belonging (from 72% to 95%) and improve early identification and response, including first-time EHCP agreement rates (from 57% to 80%).
3. **Increase confidence in the system for families and practitioners**
   Improved parent/carer confidence (from 84% to 95%) and overall satisfaction, alongside strengthening co-production, workforce confidence and consistent decision-making.
4. **Deliver a financially sustainable system with strong local provision**
   Reduced reliance on high-cost placements, increase use of local provision, improve utilisation of commissioned places, and deliver better value for money while meeting need earlier.

5. **Workforce Development**

   A confident, skilled and resilient workforce enabled by a SEND Centre of Excellence.

Section 2 – Strategy

2. **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
Building blocks *Core Minimum Requirement – CMR2*	*The local SEND reform plan has been developed through a fully co-produced, partnership-led approach, bringing together education, health, social care, the Parent Carer Forum and wider stakeholders to collectively shape both the vision and delivery model. Through structured workshops, shared maturity assessment and ongoing engagement, partners have taken a transparent, evidence-led view of the system's strengths and challenges, creating a shared understanding of the need for change. This process has strengthened relationships, built trust and clarified collective responsibility, moving the system towards a more aligned and co-owned approach to delivery. As a result, the plan reflects not a single organisational perspective, but a genuinely shared commitment to reform, with partners engaged in design, accountable for delivery and united around a common ambition to improve outcomes and experiences for children, young people and families.*	*Wokingham's strategy is to move from a system characterised by variability, fragmentation and reactive escalation to one that is needs-led, inclusive and delivered through a coherent 0–25 partnership model.* *This transformation will be delivered through four connected building blocks, underpinned by a fully implemented Experts at Hand model, strong sufficiency planning and system enablers including workforce, capital, commissioning and data.*
Strengthening inclusion across education settings		
Core Minimum Requirement – CMR20, CMR21, CMR22. CMR23, CMR24, CMR25	***Where are we now*** *Wokingham is beginning to strengthen inclusion through the coproduction of a high quality Ordinarily Available Provision (OAP) guidance document, early locality working and targeted investment in inclusion, including internal alternative provision and early intervention programmes. However, the system does not yet have a clearly defined, consistently applied Universal Offer that reaches across education, care and health, and expectations of inclusive practice vary across settings.* *Inclusion is currently measured through a range of indicators, including:* • *SEN Support and EHCP rates (variation across schools)* • *Attendance, exclusions, suspensions and part-time timetables for children and young people with SEND* • *Use of Alternative Provision, including Tier 2 and Tier 3 placements* • *Emerging understanding of EBSA and disengagement* • *Qualitative feedback from families and schools* *Wokingham has established a range of inclusion-focused mechanisms that are supporting earlier intervention and strengthening mainstream capacity, particularly through its Partnership Inclusion for Neurodiversity in Schools (PINS) approach. PINS provides a structured, school-led model that brings together education, health and wider partners to collaborate on meeting the needs of neurodivergent children at*	***Where will we be*** *In three years, Wokingham will operate a fully defined, co-produced Universal Offer that clearly sets out what all settings are expected to deliver, underpinned by a robust Experts at Hand (E@H) model that acts as the primary mechanism for strengthening and standardising inclusive practice across the system. The Universal Offer will provide a consistent baseline entitlement across all settings, forming the foundation for equitable access to additional support.* *The Universal Offer will:* • *Define consistent expectations for inclusive practice at SEN Support level across education, health and care* • *Be quality-assured through peer review, self-audit and locality-based accountability* • *Be directly linked to outcomes, ensuring early intervention reduces escalation* *Experts at Hand will:* • *Provide planned, equitable access to multi-agency expertise (EP, SaLT, OT and wider partners)* • *Support education settings to make confident, evidence-informed decisions without escalation to EHCP* • *Strengthen workforce capability through modelling, coaching and supervision* • *Ensure consistency in how needs are identified, assessed and supported across all settings* *Inclusion will be measured through a single, shared dataset, including:*

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	the earliest opportunity. It promotes shared understanding, practical problem-solving and consistent approaches to inclusion within and across schools. Alongside this, locality-based Multi-Agency Inclusion Clusters (MAIC) support joint decision-making and coordinated responses to emerging need. Together, these approaches are recognised strengths within the system, helping to build staff confidence, improve consistency of practice and reduce unnecessary escalation. Feedback from partners indicates that PINS in particular is contributing to stronger inclusive practice and more effective early support, although implementation and impact are not yet consistent across all localities and require further embedding to maximise system-wide benefit. *Whilst there are pockets of excellent practice and a committed workforce (as noted by Ofsted), these measures highlight significant variation in practice and outcomes, indicating inconsistent early identification and limited capacity within some mainstream settings to meet need.* *While an Experts at Hand model is in development, it is not yet fully operational and does not currently provide a system-wide mechanism to standardise inclusive practice or support decision-making at SEN Support level. Workforce confidence and capability remain variable, and there is not yet a consistent approach to quality assurance, such as peer review or OAP-aligned audits.* *Extensive partnership engagement has taken place across the local authority, ICB, education providers and Parent Carer Forum, and there is a strong emerging consensus on the direction of travel; however, formal partnership sign-off and ratification of the shared Universal Offer and inclusion expectations is the next phase and not yet complete.*	• *Reduction in variation in SEN Support and EHCP rates across education settings* • *Improved attendance and reduced exclusions, suspensions and part-time timetables* • *Increased use and success of Tier 2 (AP) intervention, with clear reintegration outcomes* • *Reduction in reliance on specialist and external placements* • *Improved confidence from education settings, families and young people* *Together, the Universal Offer and E@H model will create a system where:* • *There is a clear thread in terms of practice and experiences for children and young people, from early years through to post-16 provision, with high aspirations embedded and a commitment to developing independent young adults* • *Inclusive practice is consistent and clearly understood across all settings* • *The majority of needs are met earlier and locally within mainstream provision* • *Escalation to statutory support is proportionate and based on child need and complexity* • *The system demonstrates a clear shift from variation and escalation → consistency, early intervention and inclusion as the norm*

Strengthening inclusion across education settings – Success Measures

Measure Type	Partnership Measure	Metric	Year 1 (where are we now)	Year 3 (where will we be)	Assumptions/Notes
Earlier Inclusive Practice	No of settings adopting OAP		n/a	100%	Introducing Peer Review which will be used as a metric to monitor OAP adoption
System Performance	Access to OAP training	Number of settings accessing OAP Training	n/a	90%	Not currently recorded, will be recorded going forward
System Performance	Audits of provision/QA	No. meeting or exceeding Audit Quality against agreed standard	n/a	90%	Introducing Peer Review which will be used as a metric to monitor quality of provision/OAP Adoption
Lived Experience	Training/School Feedback	Positive Training Feedback	n/a	90%	SEND Centre of Excellence co-design will monitor
Lived Experience	Parent staff confidence	Do you feel your child's education setting is inclusive	84%	95%	Send Voices Survey 2025 for the Year 1 (where are we now). Included any Yes response
Belonging	Belonging	Children with SEND feel welcomed at their education setting	72%	95%	Send Voices Survey 2025 for the Year 1 (where are we now). % feeling welcomed
Earlier Inclusive Practice	QA of EHCNA	% of EHCNA requests approved at first submission.	57%	80%	2025 Calendar for Year 1. Less EHCNA requests coming through, however of those that do come through, increase in first time acceptance rate due to better quality submission (evidence of graduated response)
Lived Experience	Parent feedback	Overall Rating for SEND in Wokingham	2.69	4.00	Send Voices Survey 2025 for the Year 1 (where are we now). Overall Rating out of 5
Inclusive Practice	No.inclusion/specialist bases	Number of Inclusion bases operational	85	320	No. spaces live June 26
Inclusive Practice	No.pupils accessing inclusion/specialist bases	No.pupils accessing inclusion/specialist bases	68	298	No. spaces utilised June 26
Inclusive Practice	% children not in WBC provision	% of children accessing non Wokingham Maintained Settings	32.00%	20.00%	June 2026 % of children with EHCP that are not in a Wokingham maintained setting
Proxy Outcome	Placement Stability		tbc	tbc	Data quality cleanse underway.
Outcome	Attendance	% attendance of children with EHCP and SEN Support	90%	tbc	% attendance with EHCP and SEN Support. . Target to be agreed through WBEP.
Inclusive Practice	% Children Mainstream	% Children attending Mainstream Provision	58%	68%	Jan 2026. Includes all mainstream educated with EHCP (inc inclusion & resource bases and General FE P16)
Inclusive Practice	Settings accessing EAH		n/a	100%	Reporting will be developed to monitor
Earlier Inclusive Practice	EHCP Requests	No. of EHCP requests	414	380	Calendar year 2025
Inclusive Practice	Part-time timetables	No. children on Part-time Timetables with EHCP & SEN Support	208	187	Number of children on a PTT as at April 26 for children with EHCP & SEN Support
Outcome	Overall School Absence	% absence for children with SEND	9.70%	tbc	Autumn 25-26 (Sept-Dec25) school absence for children with SEND. Target to be agreed through WBEP.
Outcome	Exclusions	% exclusions for children with SEN or EHCP	0.20%	0.00%	% of exclusions for academic year 24/25 for children with sen or ehcp
Outcome	Suspensions	% Suspensions for children with SEN or EHCP	21.90%	10.00%	% of suspension for academic year 24/25 for children with sen or ehcp
Lived Experience	Staff Confidence		tbc	tbc	SEND Centre of Excellence co-design will determine measure
Lived Experience	Parent Confidence	How well CYPs needs are being met by Education/Health/Social Care	26%	75%	SEND Voices 2025 survey. Q15. those met quite well/very well across all 3 services
Outcomes	% of YP with EHCP aged 16-25 in Education, employment or training		73%	tbc	As at February 2026. Target will be agreed through the Partnership
	% learners who successfully sustain their placement for at least two terms				Data available, metric under development
	% of YP progressing to a higher level course, supported internship				Data available, metric under development
Outcomes	SATS for Children with EHCP (KS2 RWM)		7%	tbc	2025 SATS for children with EHCP (KS2 RWM). National 9%. Target to be agreed through WBEP.
Outcomes	SATS for Children with SEN Support (KS2 RWM)		36%	tbc	2025 SATS for children with SEN Support (KS2 RWM). National 28%. Target to be agreed through WBEP.
Outcomes	Attainment 8 score for YP with EHCP		14.7	tbc	2025 Attainment 8 with EHCP (DfE Stats Publication) National 14.8. Target to be agreed through WBEP.
Outcomes	Attainment 8 score for YP with SEN Support		41.2	tbc	2025 Attainment 8 with SEN Support (DfE Stats Publication) National 33.7. Target to be agreed through WBEP.

Universal Offer *Core Minimum Requirement – CMR1, CMR20, CMR21, CMR22, CMR23, CMR24, CMR25, CMR26, CMR27, CMR34*	***Where we are now*** *The Wokingham local area partnership has a strong commitment to inclusive practice and early intervention, with key strengths already in place across education, early years and wider services. There is a well-established culture of collaboration, and partners share a clear ambition to ensure that children and young people are supported earlier and within their local mainstream settings wherever possible.* *What is working well* • *A co-produced education-led Ordinarily Available Provision (OAP) providing a strong foundation for inclusive classroom practice* • *Strong relationships with education settings and an existing culture of collaboration through clusters and partnerships* • *A commitment to co-production with children, young people and families, including the Parent Carer Forum* • *Early examples of multi-agency working, particularly in early years and targeted services* • *A shared strategic direction through the SEND & Inclusion Strategy and Families First programme* *What needs to change* *Despite these strengths, there is variation in how well the universal offer is understood and consistently applied across settings, leading to:* • *Inconsistent identification and support at SEN Support level, including significant variation between education settings* • *Over-reliance on statutory processes where needs could be met earlier within universal or targeted provision* • *Variable confidence among education settings and families regarding what should be provided without an EHCP* • *A lack of a fully integrated multi-agency universal offer, particularly across health and social care* • *Limited system-wide peer review, quality assurance and continuous improvement mechanisms* *There are also challenges in partnership maturity, particularly in relation to:* • *Joint accountability and transparency* • *Consistent commissioning arrangements across partners*	***Where will we be*** *In three years' time, Wokingham will have a fully embedded, consistently applied Universal Offer that acts as the foundation of an inclusive, partnership-led SEND system, aligned to the national vision set out in the Schools White Paper and SEND reforms.* *The Universal Offer will ensure that high-quality inclusive practice is delivered in every setting, every day. Education settings will have absolute clarity about what is expected as standard and will have a clear understanding of their own strengths and areas for development, using this insight to drive continuous improvement.* *Needs will be identified early and met at the right level without the need for diagnosis or statutory assessment in the majority of cases, supported by a strong "universal first" approach and timely, proportionate access to additional support, including Experts at Hand.* *There will be a shared and consistently understood definition of Ordinarily Available Provision (OAP) across education, health and care, enabling families, practitioners and system leaders to have confidence in what support should be in place as a minimum expectation. This transparency will strengthen trust, improve communication and ensure greater consistency of experience for children and young people across the local area.* *The system will be underpinned by a mature improvement infrastructure. Expertise will be actively developed and shared across settings and localities, including through peer learning, coaching and locality-based networks. A fully embedded audit, action planning and peer review cycle will operate across all education settings, creating a disciplined and evidence-based approach to quality assurance. Variation in practice and outcomes will be systematically identified and addressed, with data, audit findings and lived experience shaping both operational delivery and strategic decision-making.* *By the end of Year 3:* *At least 90% of settings will meet the agreed OAP standard, as evidenced through a consistent audit framework* *All settings will participate in a termly OAP-aligned audit and peer review cycle, with outcomes reported and scrutinised at cluster and partnership level* *Inclusion strategies in every setting will be live, embedded and demonstrably aligned to OAP expectations* *Mainstream settings will consistently meet the most commonly occurring and growing needs (SLCN, Autism, SEMH) through the use of evidence based approaches e.g. ELSEC, NEN, Therapeutic Thinking*

	• *Confidence in the delivery and impact of existing health provision* *The core enablers required for a fully inclusive system are partially developed but not yet fully embedded:* • *Data, baselines and insight:* *Multiple data sources exist (e.g. school census, attendance, exclusions), but these are not yet fully integrated into a shared, accessible performance framework, and baselines are not consistently understood across partners* • *Workforce and development:* *There is strong professional commitment, but workforce capability and confidence in universal SEND practice is variable, and not yet consistently supported through a structured system offer* • *Co-production and lived experience:* *Engagement is strong, but not yet systematically embedded in continuous improvement cycles* • *Sufficiency and resources:* *Pressures in the system, particularly around high needs demand and specialist provision, are driving the need to strengthen universal capacity as the primary response*	*The Experts at Hand model will be fully operational at scale, with clear and consistent thresholds for engagement* *As a result, the Universal Offer will function as the primary mechanism for meeting need early and reducing avoidable escalation.* *We will see a sustained reduction in variation between education settings, improved attendance and reduced exclusions for children and young people with SEND, in particular the SEMH cohort, and increased retention within mainstream provision. Reliance on statutory processes will reduce as more needs are effectively met at SEN Support.* *Families, children and young people will report greater confidence in the system, reflecting improved experiences of early support, clearer communication and more consistent provision. Across the partnership, there will be collective ownership and accountability for SEND outcomes, supported by integrated data, strong governance and a shared commitment to continuous improvement.* *Overall, Wokingham will have a more inclusive, responsive and financially sustainable SEND system—one that delivers better outcomes through high-quality universal provision, strengthened workforce capability and a strong culture of partnership working.*
Early Years	***Where we are now*** *The government has committed to improving children's early development measures by children achieving Good Levels of Development (GLD at the end of Early Years Foundation Stage (EYFS):* • *GLD outcomes in Wokingham are strong overall. Wokingham outcomes exceed national averages across all Early Learning Goals and for specific pupil groups (EAL, SEND and FSM).* • *However, variation in outcomes remains; our disadvantaged gap (between those eligible and not eligible for FSM) is 23.9 percentage points. It has grown by 0.7 % since 2024. Over 3 years, Wokingham has consistently had a larger disadvantaged gap than the national average.* • *Government set targets for 80% of Wokingham children and 59% of children eligible for FSM to reach GLD in Summer 2028.* • *There are inconsistencies between practice in our private voluntary and independent (PVI) sector settings FS1 (nursery) and school-based settings at FS2 (reception) and expectations.* • *WBC's Early Years Team already offer PVI providers inclusion audits and support to raise standards*	***Where will we be*** ***Inclusion embedded as a Golden Thread across EYFS as follows:*** • *We will have an agreed core curriculum offer across Wokingham that identifies a small number of shared experiences, stories, rhymes, vocabulary and approaches that support children's communication, language, literacy and sense of belonging, particularly as they transition between settings and into Reception.* *Developing an agreed core EYFS curriculum offer across Wokingham Early Years provision and creating a bank of shared resources* • *Embedding a consistent offer in relation to targeted and universal support for home learning environments (HLE)* • *Implementing Wokingham Early Impact Partnership (WEIP) - system-led improvement model - scaled to universal offer from Autumn 2026* • *Use GLD outcomes to plan support across targeted settings and cohorts of children. Link with Family Hubs to ensure the offer to parents aligns with the patterns of need identified, EYs support panel and 2.5 year development checks.* • *Use of data as a starting point to explore barriers faced by Wokingham children and Early Years settings*

	• *Transition networks established between PVI and schools* • *WBC have piloted 'test, learn, & grow' cluster model with a small group of schools/settings with larger than average gaps in attainment – branded as Wokingham Early Impact Partnership (WEIP) - focused on understanding barriers, raising outcomes and reducing inequalities informed by data and first-hand experience of Early Years practitioners. This has been effective and will be rolled out as the main delivery model for system development and transformation.* • *Publication of the area's Early Years Ordinarily Available Provision document continues to provide the foundations for a programme of training, development and support for local settings BUT this document is being updated in light of the new Ofsted early years framework.* • *The Early Years Advisory Team provide Inclusion Audits, accompanied by a programme of training, guidance and support for inclusion in mainstream settings.* • *At the targeted & specialist level WBC has a strong Early Years SENCO and Portage Service that provides a bedrock of experience and expertise providing advice and support to settings and families around the needs of individual pre-school children and their families.*	• *Strengthening the FS1 - FS2 continuum (key phase) sharing best practice across settings and embedding practitioner knowledge and consistency.* • *Joint CPD and professional dialogue offer aligned with Wokingham priorities* • *Ambitious integrated Early Years workforce development plan, ensuring an enhanced understanding of child development, strengthening use of continuous provisions and effective use of high-quality interactions* • *Assessment support sessions for EYFSP (Early Years Foundation Stage Profile) targeted at nursery and reception class practitioners* • *Sustain improvement in GLD outcomes to 80% by 2028 and narrow the FSM gap* ***Targeted Support:*** • *An expanded Early Years Support panel to include consistent S&LT / OT / Health Visitor input.* • *Advice and consultation support to EYrs settings that refer into the EY Support panel.* • *Feedback loops established ensuring that needs presented at EYs Support Panel shape development of appropriate training modules, & group consultation.* • *Increased focus on disadvantaged and vulnerable groups, ensuring vulnerable children access high-quality provision, belong and thrive*
Access to specialist support and local placements		
Core Minimum Requirement – CMR7	***Where are we now*** *Wokingham has a range of specialist support, outreach services and provision across early years, schools and post-16, alongside a clear ambition to develop a more inclusive, locally sufficient system. There are established elements of support, including outreach, alternative provision and specialist placements, and emerging system designs such as Experts at Hand, locality working and strengthened transition pathways. However, these operate within a system that is not yet fully joined up, consistent or sufficiently preventative.* *Access to specialist support is currently characterised by:* • ***Fragmented pathways and variability in access**, with support often dependent on individual setting confidence or capacity rather than a consistent system offer*	***Where will we be*** *In three years, Wokingham will operate a fully integrated, graduated system of access to specialist support and local provision, where children and young people receive the right help at the right time, as close to home as possible, and escalation to statutory or specialist provision is proportionate and based on complexity of need.* *This future system will be characterised by:* • *A **clearly defined and consistently applied graduated pathway**, linking the Universal Offer, Experts at Hand, early intervention and specialist provision, with transparent and equitable access for all settings* • *A **fully embedded Experts at Hand offer**, jointly commissioned with health, providing planned, multi-agency support to early years, schools and post-16 providers, enabling earlier identification and response to need without reliance on EHCP pathways*

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	• ***Over-reliance on statutory processes and EHCPs*** *to access specialist input, rather than earlier, planned intervention*
	• ***Inconsistent outreach and support models****, with limited alignment across education, health and care services*
	• ***Insufficient Tier 2 early intervention capacity****, leading to escalation into specialist placements or alternative provision*
	• ***Gaps in sufficiency****, particularly in local mainstream capacity and specialist provision aligned to need*
	• ***Variable workforce capability and availability****, impacting the system's ability to deliver early and consistent support*
	• *Weak integration across phases, including* ***early years and post-16****, resulting in less effective transitions and continuity of support*
	While there is strong commitment to improvement, the system does not yet operate as a coherent, graduated model with clear access routes, equitable provision and consistent outcomes, and demand continues to be driven by late intervention and escalation.
	
	Note – current Educational Psychologist is 8.4FTE
		• *A* ***strengthened early intervention and outreach model****, including:*
		  ○ *increased Tier 2 provision*
		  ○ *consistent outreach support across settings*
		  ○ *improved integration between education, health and care*
		• *A* ***rebalanced Alternative Provision system****, with:*
		  ○ *expanded targeted intervention to prevent escalation*
		  ○ *clear reintegration pathways*
		  ○ *reduced reliance on high-cost, long-term placements*
		• *A* ***progressive, needs-led sufficiency model****, delivering:*
		  ○ *increased local capacity in mainstream and specialist provision*
		  ○ *reduced reliance on out-of-area and independent placements*
		  ○ *improved access to provision closer to home*
		• *A* ***joined-up 0–25 approach****, ensuring:*
		  ○ *strong early years identification and intervention*
		  ○ *seamless transitions between phases*
		  ○ *strengthened post-16 pathways into education, employment and independence*
		• *A* ***sustainable and skilled workforce****, supported by the SEND Centre of Excellence and Experts at Hand, with increased confidence and capability to meet a broad range of needs across mainstream settings*
		• *A* ***data-informed system****, where:*
		  ○ *access, demand and outcomes are consistently monitored*
		  ○ *variation is actively addressed*
		  ○ *commissioning and delivery decisions are driven by evidence*
		Together, this will create a system where:
		• *specialist support is planned, proactive and integrated, rather than reactive*
		• *provision is equitable and locally accessible*
		• *mainstream settings are confident and supported to meet need earlier*
		• *the system demonstrates a clear shift from fragmentation and escalation → coherence, early intervention and local inclusion*
		In summary access to support will be equitable and transparent across the system, with locality-based delivery, cluster allocation and clearly defined access routes ensuring that support is determined by need rather than setting capacity, parental advocacy or variation in practice.

Financial Year	FTE 25-26	FTE 26-27	FTE 27-28	FTE 28-29
Other Experts at Hand Spend	0.00	5.08	12.40	12.40
Speech and Language Therapists (SaLTs) and support w orkers	0.00	0.50	3.75	4.00
Occupational Therapists (OTs) and support w orkers	0.00	0.50	3.75	4.00
Educational Psychologists (EPs) and support w orkers	13.69	19.14	22.68	24.18
Total num ber	**13.69**	**25.22**	**42.58**	**44.58**

Access to specialist support and local placements – Success Measures

Core Minimum Requirement – CMR8

Measure Type	Partnership Measure	Metric	Year 1 (where are we now)	Year 3 (where will we be)	Assumptions/Notes
Lived Experience	Parent feedback	Overall Rating for SEND in Wokingham	2.69	4.00	Send Voices Survey 2025 for the Year 1 (where are we now). Overall Rating out of 5
Inclusive Practice	No.inclusion/specialist bases	Number of Inclusion bases operational	85	320	No. spaces live June 26
Inclusive Practice	No.pupils accessing inclusion/specialist bases	No.pupils accessing inclusion/specialist bases	68	298	No. spaces utilised June 26
System Performance	WBC Utilisation of Specialist Spaces	% of commissioned places filled by WBC children	68%	90%	
Inclusive Practice	% children not in WBC provision	% of children accessing non Wokingham Maintained Settings	32.00%	20.00%	June 2026 % of children with EHCP that are not in a Wokingham maintained setting
Proxy Outcome	Placement Stability		tbc	tbc	Data quality cleanse underway.
System Performance	Audits of provision	% settings with signed SLA/Contract in place	80% SLA in place	100%	Each setting will have a contract/SLA which details a set of KPIs. Some will be setting specific and some will be collected across all settings to give a borough wide data set/heat map for the borough on impact against key KPIs
System Performance	Audits of provision	% settings meeting >80% of agreed KPIs	N/A	85%	100% of providers submit quality-assured annual reports, with ≥80% demonstrating evidenced positive impact (Green), and 100% of identified improvements delivered within agreed timescales and informing commissioning decisions.
Outcome	Attendance	% attendance of children with EHCP and SEN Support	90%	tbc	% attendance with EHCP and SEN Support. . Target to be agreed through WBEP.
Inclusive Practice	% Children Mainstream	% Children attending Mainstream Provision	58%	68%	Jan 2026. Includes all mainstream educated with EHCP (inc inclusion & resource bases and General FE P16)
System Performance	No. of MAIC sessions/CYP discussions	No of MAIC sessions/ year	21	tbc	Current 25/26. Format of MAIC will change as per Experts at Hand plan. Co-design will determine future target.
Inclusive Practice	No. of MAIC sessions/CYP discussions	Number of Settings Attending	76%	100%	Current 25/26. Format of MAIC will change as per Experts at Hand plan
Inclusive Practice	Settings accessing EAH		n/a	100%	Reporting will be developed to monitor
Earlier Inclusive Practice	EHCP Requests	No. of EHCP requests	414	380	Calendar year 2025
Inclusive Practice	Part-time timetables	No. children on Part-time Timetables with EHCP & SEN Support	208	187	Number of children on a PTT as at April 26 for children with EHCP & SEN Support
Outcome	Overall School Absence	% absence for children with SEND	9.70%	tbc	Autumn 25-26 (Sept-Dec25) school absence for children with SEND. Target to be agreed through WBEP.
Outcome	Exclusions	% exclusions for children with SEN or EHCP	0.20%	0.00%	% of exclusions for academic year 24/25 for children with sen or ehcp
Outcome	Suspensions	% Suspensions for children with SEN or EHCP	21.90%	10.00%	% of suspension for academic year 24/25 for children with sen or ehcp
Lived Experience	Staff Confidence		tbc	tbc	SEND Centre of Excellence co-design will determine measure
Lived Experience	Parent Confidence	How well CYPs needs are being met by Education/Health/Social Care	26%	75%	SEND Voices 2025 survey. Q15. those met quite well/very well across all 3 services

Outreach *Core Minimum Requirement – CMR6, CMR7, CMR22*	***Where are we now*** *The outreach service has developed into a partnership-based model, bringing services together to respond cohesively to the needs of education settings and pupils, through evidence-based support and consistent messaging across services. We have three distinct outreach services catering to speech and language, SEND and inclusion, and SEMH, alongside an overarching administrative function. This central administration team plays a key role in managing an average of 163 referrals per term, triaging requests to ensure the right support is provided at the right time, and coordinating a shared training calendar across all services. Approximately one third of referrals across all services relate to pupils with an EHCP, highlighting the continued demand for targeted, specialist input to support the needs of those without an EHCP. Across all services, support is primarily focused on building staff capability to meet the needs of individual pupils, alongside a programme of termly training that can be accessed individually or commissioned as bespoke whole-school delivery.* *Impact evidence shows:* *- The speech and language service stated that 93.9% of participants reported increased confidence following training, and 100% strongly agreed that targeted support for individual pupils was both useful and impactful. The service is further enhancing its offer through the development of a dual-placement model to provide more intensive support while maintaining pupils' connection to their mainstream setting, alongside closer multi-agency working through clinical input from CYPIT. This dual-placement model has seen significant impact for the pupil both academically and socially.* *- The SEMH outreach service is demonstrating positive outcomes through strong parent and pupil feedback, successful reintegration of pupils supported through EBSA outreach, and increased demand for observations following the removal of cost barriers—indicating that support is being accessed earlier.* *- Within the SEND and inclusion service, high levels of need are evident, with 92% of Autumn term referrals focused on individualised support for pupils with an EHCP; the most common areas of need are regulation and engagement at Primary level, and regulation alongside curriculum access at Secondary.* *Overall, the outreach model is enabling earlier, more targeted intervention and building sustainable capacity within education settings to support a wide range of needs.*	***Where will we be*** *In three years' time, Wokingham will have enhanced existing outreach with a new integrated, multidisciplinary component, creating a coherent, accessible and preventative system that strengthens the Universal Offer and supports inclusion across all mainstream settings.* *Access to support will be equitable, consistent and transparent across the system. Locality-based delivery, cluster allocation and clearly defined access pathways will ensure that children and young people receive support based on identified need—rather than variation in setting capacity or confidence—reducing inequities in access and outcomes.* *The outreach offer will be strengthened by a jointly aligned model delivered in partnership with Addington, Chiltern Way and Oak Tree, making best use of specialist setting expertise already within the local system. This will not replace commissioned specialist pathways; instead, it will operate as a universal-enhancing service across targeted, targeted-plus and lower-level specialist thresholds, enabling earlier intervention and reducing escalation.* *Through this enhanced model, all education settings will have access to a coherent offer that:* • *Provides timely access to specialist advice through a single front door, including an established advice line* • *Offers consultation to support inclusive practice at individual, group and cohort level* • *Delivers ongoing workforce development, coaching and CPD* • *Supports identification of patterns of need and appropriate responses* • *Provides clear, practical, classroom-based strategies and guidance* *Specialist clinical-educational expertise will be embedded within the system, bridging therapy and education to:* • *Translate therapeutic advice into practical teaching strategies* • *Support adaptations to environments, curriculum and provision* • *Provide clear, actionable next steps that directly impact classroom practice* • *Enable early understanding and response to emerging and complex needs* *A well-established advice line and consultation function will act as an early help mechanism within SEND, enabling settings to seek timely guidance, discuss concerns early and reduce reliance on formal referrals to higher-threshold services.* *The model will build workforce confidence and capability across mainstream settings through sustained professional learning, coaching and collaboration. It will also support cohorts of children and young*

		people with emerging needs and contribute to the successful development of Inclusion Bases, aligned to specialist expertise. *As a result, the system will:* • *Provide earlier support at the point of need* • *Embed specialist knowledge into everyday practice* • *Reduce escalation into higher-cost provision where appropriate* • *Improve consistency of inclusive practice across all settings* *Overall, Wokingham will have a strengthened, partnership-led outreach system that brings expertise closer to mainstream provision, enhances the Universal Offer, and delivers improved outcomes for children and young people with SEND through earlier intervention, stronger inclusion and a more sustainable system.*
Experts at Hand *Core Minimum Requirement – CMR1, CMR2, CMR3, CMR7, CMR10*	***Where are we now*** *Wokingham's self-assessment is that core elements of an Experts at Hand model are already in place, but these are not yet fully aligned into a coherent, jointly commissioned and place-based offer. Our maturity assessment identifies the partnership as emerging overall, and our current operating position reflects this: we sit between a more centralised LA-led model and a more devolved locality-based approach. We are clear that Experts at Hand is intended to sit between universal provision and statutory SEND processes, strengthening earlier help and inclusion rather than replacing EHCP pathways. We have a number of established strengths that provide a strong foundation for further development. These include pa clear and shared ambition to use Experts at Hand to strengthen the Universal Offer / ordinarily available provision, rather than create a separate referral gateway and developing cluster/locality model, shaped around children and young people's journeys across phases and aligned to Family Hubs established learning from PINS / mini-MAIC approaches, with a strong emphasis on planned, regular multi-agency inclusion activity rather than case-holding* • *existing LA-led services, including Educational Psychology, specialist teaching and outreach, Area SENCO capacity and wider inclusion functions, which can be brought together as part of an integrated Experts at Hand offer* *We are clear about the current system challenges that need to be addressed as part of this transition. These include:* • *variable system maturity, requiring a model that builds confidence, capability, consistency and oversight before any significant devolution of resource or risk* • *inconsistent trust and visibility across parts of the system, alongside a need to strengthen place-based accountability*	***Where will we be*** *Over the next three years, we will establish a fully defined, jointly commissioned Experts at Hand offer that is clearly understood, equitably accessed and consistently used by education settings and partners. The Experts at Hand model will be jointly commissioned by the Local Authority and ICB through a formal partnership agreement (Section 75 / MOU), with delivery provided through a mixed model of directly employed LA practitioners, commissioned health services and aligned partner provision. Performance will be managed through the SEND Area Improvement Board via agreed KPIs covering access, timeliness, reach and impact, with operational oversight through locality cluster governance. By the end of this period, Experts at Hand will be recognised as a core component of Wokingham's inclusive SEND system, providing a clear, mainstream-facing route to specialist expertise.* ***1. A clearly defined part of the Wokingham SEND system*** *We will position Experts at Hand as our mainstream-facing, multi-agency specialist support offer, sitting between the Universal Offer and statutory processes. Through this, we will:* • *strengthen ordinarily available provision and inclusive practice across early years, schools and post-16 settings* • *enable earlier access to specialist advice, modelling and structured problem-solving* • *reduce avoidable escalation into EHCPs, specialist placements, independent provision and high-cost packages* • *build confidence and capability within settings to respond to the most prevalent and increasing areas of need, particularly ASD, SLCN and SEMH* *This will include the introduction of an Advanced Speech and Language Therapy (SALT) Practitioner to strengthen support for children and young people with communication and interaction needs. This role will provide:* • *specialist advice and consultation to mainstream settings*

	• *limitations in data, particularly at Wokingham level, impacting our ability to understand delivery, access, impact and added value* • *a recognised risk that education settings may initially interpret Experts at Hand as providing additional individual therapy, rather than the intended systemic, cohort-led, school-facing model* • *the importance of ensuring continuity and relationship-building, with education settings experiencing consistent, named professionals linked to localities, rather than fragmented or episodic support* *Overall, the Partnership position is that Wokingham is not starting from a blank page. Our current assessment is that we have a clear direction of travel, strong local foundations, and emerging agreement on key principles, but that our delivery infrastructure is not yet sufficiently mature to evidence full implementation.. We will therefore position Year 1 as a structured mobilisation, co-design, commissioning and test-and-learn phase, rather than a fully realised borough-wide end state. This aligns with our Programme Initiation Document and options appraisal, which set out a WBC-led, jointly governed and co-commissioned model with the ICB, delivered through a managed transition and phased implementation period.*	• *targeted support for complex needs* • *earlier identification of communication needs through enhanced SALT capacity* • *workforce development and training* *Alongside SALT, the Experts at Hand workforce will draw on:* • *Educational Psychologists* • *Occupational Therapists* • *Specialist teachers and practitioners* *supported by assistant and trainee roles to extend reach and sustainability.* *We will be explicit that Experts at Hand complements and enhances statutory and commissioned specialist services. It will not replace them, delay access to them, or introduce any form of gatekeeping. Maintaining this clarity is critical to system confidence and will be embedded as a core commissioning and delivery principle.* ***2. A locally designed model, jointly commissioned with the ICB*** *By Year 3, we will operate a local authority-led, jointly governed and formally co-commissioned model with the ICB, delivered through a clear local provider arrangement.* *This will include:* • *Wokingham Borough Council as lead commissioner* • *the ICB as formal co-commissioner* • *defined joint governance arrangements, including decision-making, reporting, quality assurance and escalation routes* • *a named Senior Responsible Owner (SRO) with accountability for delivery and outcomes* *We will have in place a robust commissioning mechanism (contract / SLA) that clearly sets out:* • *workforce requirements and capacity* • *delivery expectations and standards* • *access, triage and response arrangements* • *data, reporting and transparency requirements* • *agreed performance measures* • *quality assurance and clinical governance expectations* • *explicit requirements around additionality and non-duplication* *This provides a clear, accountable and transparent foundation for delivery, aligned to national expectations.* ***3. A model organised around localities and the child's journey*** *We will implement a co-designed locality and cluster-based delivery model that:* • *connects secondary schools, primaries, early years pathways and, where appropriate, Family Hub footprints* • *provides settings with access to consistent, named professionals* • *supports shared ownership of the child and young person's journey across phases*

		• *enables structured, termly multi-agency problem-solving at cohort and thematic level, not solely individual cases*
		Access and delivery model
		Settings access EAH through a defined pathway of request or locality discussion, followed by triage, allocation to appropriate professionals, delivery (consultation, modelling or intervention), and structured follow-up. Support will be accessed through a clear, graduated and transparent pathway, including:
		• *locality-based discussions to identify need and prioritise support*
		• *defined routes for requesting advice, consultation and targeted intervention*
		• *structured cycles of engagement (consultation, modelling, follow-up)*
		Support will be:
		• *time-limited and focused on building capacity within settings*
		• *delivered through a combination of:*
		  ○ *consultation and advice*
		  ○ *modelling and coaching*
		  ○ *group and cohort-based interventions*
		  ○ *workforce development*
		This model ensures that support is:
		• *planned and coordinated at system level*
		• *consistently available across settings*
		• *focused on sustainable improvement, not short-term case holding*
		Equitable access
		Access will be explicitly designed and monitored to ensure that:
		• *support is not disproportionately accessed by the most proactive education settings*
		• *all early years settings, schools and FE providers (including out-of-area settings attended by Wokingham young people) can access the offer*
		• *localities are supported to identify and address variation in access and need*
		4. A stronger offer because it adds system capacity
		By Year 3, we will clearly evidence the added value of Experts at Hand. This will include:
		• *a shift from reactive, individual pathways to planned, school-facing and systemic support*
		• *strengthened place-based visibility, accountability and coordination*
		• *a single, coherent route into advice, consultation and problem-solving*
		• *improved integration across education, health, outreach and family support*
		We will demonstrate strong and explicit interfaces with:

		• *the Universal Offer* • *attendance and exclusion reduction strategies* • *Alternative Provision and reintegration pathways* • *sufficiency and place planning* • *EHCP quality and timeliness* • *early years and post-16 pathways* *EAH will act as the operational bridge between universal provision, targeted support and specialist services.* ***5. A sustainable SEND Centre of Excellence and workforce pipeline*** *By Year 3, our SEND Centre of Excellence will be fully established as a core enabler of delivery and sustainability. We will:* • *embed assistant and trainee roles as a key delivery model* • *implement robust supervision, support and safe practice arrangements* • *create clear progression pathways into qualified specialist roles* • *align workforce development across partners, including opportunities across Berkshire West where appropriate* • *provide structured training in inclusive practice, coaching, modelling and implementation support* • *ensure a direct link between workforce development and long-term sufficiency planning* *This will ensure the Experts at Hand model is sustainable, scalable and able to grow with demand.* ***6. Measured through a clear baseline and trajectory*** *We will establish a clear baseline from the outset and track progress over time.* *Our baseline and ongoing measures will include:* ***Access and delivery*** • *engagement and coverage across schools and settings* • *distribution of support across localities and phases* • *response times from identification of need to delivery of support* • *volume and type of activity (consultation, modelling, group work, training and follow-up)* ***Workforce and capacity*** • *workforce capacity across therapists, EPs, specialist teachers and assistants* • *utilisation of advanced practitioner roles* ***Impact on practice and confidence*** • *school confidence in meeting needs earlier* • *workforce capability and consistency of inclusive practice* ***Experience and equity*** • *family and CYP confidence in accessing support* • *evidence of equitable access across settings and cohorts*

		System impact • *patterns in SEN Support, EHCP requests and escalation* • *attendance, suspensions, exclusions, EBSA indicators and part-time timetables* • *AP usage, reintegration rates and specialist placement trends* • *evidence of reduced duplication and clearer pathways* *This will ensure that the impact of Experts at Hand is visible, measurable and directly linked to system outcomes.* *Note - EAH funding will not be used to deliver provision specified within EHCPs or replace provision that settings are expected to deliver, and will be used solely to increase system capacity and access to specialist expertise*

SCHOOL PLANNING MEETING (SPM) MODEL

A Collaborative Framework for Planning, Support and Continuous Improvement

INTRODUCTION

The School Planning Meeting (SPM) Model provides a structured approach for collaboration between schools within a geographical cluster. The model brings together educational and health professionals to support schools through planning, consultation, specialist input, and shared learning opportunities.

The aim is to ensure that schools receive coordinated support at individual, group, and systemic levels while building sustainable capacity across the wider educational community.

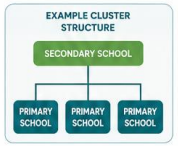
1. CLUSTER STRUCTURE

Schools are organised into geographical clusters, typically consisting of:

- One Secondary School
- Multiple Primary Schools

This geographical model encourages:

- Shared understanding of local needs
- Improved transition between phases
- Efficient use of specialist resources
- Collaborative problem-solving
- Consistent approaches across schools



2. CORE PROFESSIONAL TEAM

School Planning Meetings are supported by a multidisciplinary team of professionals.

EDUCATIONAL PSYCHOLOGIST (EP)

The Educational Psychologist contributes through:

- Consultation and problem-solving
- Assessment and formulation
- Strategic planning
- Modelling effective practice
- Capacity building within schools

SPEECH & LANGUAGE THERAPIST (SALT)

The Speech & Language Therapist contributes through:

- Support for speech, language and communication needs
- Advice on communication-friendly practice
- Assessment and intervention planning
- Staff training and professional development
- Support for inclusive learning environments

OCCUPATIONAL THERAPIST (OT)

The Occupational Therapist contributes through:

- Advice regarding participation and engagement
- Support for sensory processing needs
- Environmental adaptations
- Functional skill development
- Recommendations to improve access to learning

Together, these professionals provide integrated support to schools and contribute to both individual and systemic improvement.

3. MEETING FREQUENCY

ONCE PER TERM

Termly meetings provide opportunities to:

- Review progress
- Identify priorities
- Allocate resources
- Coordinate support
- Plan next steps

4. THREE LEVELS OF PLANNING

INDIVIDUAL LEVEL

Focuses on the needs of a specific school.

Key Features

- Allocated time from EP, SALT and OT
- School-specific consultation
- Tailored planning and support
- Focus on identified priorities

Purpose

To address unique school needs and support implementation of targeted actions.

GROUP LEVEL

Provides targeted support to small groups of students, professionals, or parents and may be facilitated by an EP, SALT or OT.

Key Features

- Delivered to small groups within a school
- Facilitated by an EP, SALT or OT
- Focused on skill development and capacity building
- Responsive to identified school needs

Examples

- Student intervention groups
- Staff training and coaching sessions
- Parent workshops and support groups
- Modelling effective strategies and practice

SYSTEMIC LEVEL

Focuses on wider improvement across the geographical cluster.

Key Features

- Access to specialist expertise
- Intensive professional interaction
- Strategic development across schools
- Capacity building at scale

Examples

- Modelling effective practice
- Joint professional learning
- Cluster-wide initiatives, e.g., PINS
- Development of consistent approaches

5. SPECIALIST SUPPORT & MODELLING

A central feature of the School Planning Meeting Model is the availability of specialist expertise.

Professionals are available to:

- Model effective approaches
- Demonstrate interventions and strategies
- Support implementation
- Provide consultation and coaching
- Build staff confidence and capability



Example: Supporting schools with implementing intensive interaction intervention through modelling.

6. MONITORING & REVIEW

Between planning meetings, schools continue to implement agreed actions.

Specialists may:

- Monitor progress
- Review implementation
- Provide follow-up consultation
- Support problem-solving
- Adjust plans where necessary



7. CONTINUOUS IMPROVEMENT CYCLE

1. **PLANNING MEETING** — Schools and professionals identify priorities and agree actions.
2. **INDIVIDUAL SUPPORT** — EP, SALT and OT time is allocated according to need.
3. **GROUP & SYSTEMIC DEVELOPMENT** — Schools engage in collaborative learning, modelling and shared development activities.
4. **MONITORING & REVIEW** — Progress is monitored and implementation is supported through access to assistant EPs, assistant SALTs and assistant OTs.
5. **REFLECTION & EVALUATION** — Evidence and learning are gathered to inform future planning.
6. **NEXT PLANNING MEETING** — Findings and progress feed directly into the next termly planning cycle.

8. KEY PRINCIPLES FOR SUCCESS

CONSISTENCY

- Regular meetings
- Agreed processes
- Follow-through on actions

RELATIONSHIPS

- Strong partnerships between professionals and schools
- Open communication
- Collaborative working

TRUST

- Safe professional dialogue
- Shared ownership of challenges
- Honest reflection and discussion

9. EXPECTED OUTCOMES

FOR SCHOOLS

- Improved planning and decision-making
- Better access to specialist expertise
- Greater consistency of practice

FOR STAFF

- Increased knowledge and confidence
- Enhanced professional learning
- Stronger collaborative networks

FOR THE SYSTEM

- Improved alignment across schools
- More efficient use of resources
- Shared approaches to challenges

FOR CHILDREN & YOUNG PEOPLE

- Better access to support
- More inclusive educational experiences
- Improved engagement and participation

CONCLUSION

The School Planning Meeting Model provides a structured and collaborative framework that brings together schools, Educational Psychologists, Speech and Language Therapists, and Occupational Therapists within geographical clusters. Through termly planning meetings, individual consultation, group collaboration, systemic development, specialist modelling, and ongoing monitoring, the model supports continuous improvement across schools. Success is built on consistency, strong professional relationships, and trust, ensuring that expertise is translated into meaningful outcomes for schools, staff, and learners.



Inclusive Provision/Alternative Provision
Core Minimum Requirement – CMR4, CMR5, CMR6
	Where are we now
	Wokingham has a clearly defined ambition to move from a predominantly reactive system to a proactive, graduated Alternative Provision (AP) model, built around a three-tier continuum of support.
	This model establishes:
	• *Tier 1: Universal and adapted mainstream provision*
	• *Tier 2: Targeted, short-term intervention delivered in or alongside mainstream*
	• *Tier 3: Specialist statutory provision, including PRU and Section 19 placements*
	There is already a programme of development underway to strengthen this model:
	• *Investment through the Alternative Provision Development Fund (APDF) is enabling secondary schools to develop in-house AP provision*
	• *The Inclusion Innovation Fund (IIF) is supporting the development of early intervention capacity in primary schools*
	• *The Foundry College model is being developed as a key "bridge provision", enhancing outreach, in-reach and short-term intervention to support pupils at Tier 2 and prevent escalation*
	This represents a strong foundation and a clear directional shift; however, the system currently faces key challenges:
	• *High reliance on Tier 3 provision, including PRU and statutory placements*
	• *Variable availability and consistency of Tier 2 early intervention provision across education settings*
	• *Limited system-wide coherence in how AP is accessed, delivered and evaluated*
	• *Inconsistent reintegration pathways, with insufficient clarity on step-up and step-down processes*
	• *Continued use of external or off-site provision, including unregistered provision in some cases*
	• *Need for stronger alignment between AP, the Universal Offer, Experts at Hand and locality delivery model*
	At present, while individual elements of AP are developing, the system does not yet operate as a fully integrated, graduated AP pathway, with consistent expectations, capacity and outcomes across all settings.
		Where will we be
		In three years, Wokingham will have a fully integrated, locality-based Alternative Provision system (using school and Pru not externally contracted provision), where early intervention, targeted support and specialist provision operate as a coherent continuum, significantly reducing escalation and improving outcomes.
		1. A fully embedded three-tier AP model
		The AP system will operate consistently across all settings as a graduated continuum of provision:
		• *Tier 1 (mainstream and adapted provision) will meet a broader range of needs, supported by the Universal Offer and inclusive practice*
		• *Tier 2 (targeted AP) will be significantly expanded, providing flexible, time-limited intervention for pupils at risk of exclusion or disengagement*
		• *Tier 3 (specialist provision) will be used only where needs cannot be met through earlier intervention*
		Movement between tiers will be:
		• *Structured and transparent, with clear referral and decision-making processes*
		• *Supported by step-up and step-down pathways, ensuring pupils receive the right level of support at the right time*
		2. Expansion of Tier 2 early intervention capacity
		A key shift in the system will be the significant expansion of Tier 2 provision, including:
		• *In-school alternative provision developed through APDF and IIF funding across both primary and secondary phases*
		• *The full implementation of the Foundry College early intervention model, delivering:*
		  ○ *in-reach support within education settings*
		  ○ *outreach support across settings*
		  ○ *time-limited, outcome-focused interventions*
		Tier 2 provision will:
		• *Be consistently available across all localities*
		• *Focus on prevention, engagement and reintegration*
		• *Operate as the primary mechanism for reducing escalation into Tier 3*
		3. Reduced demand for Tier 3 statutory provision
		As a result of strengthened early intervention:
		• *There will be a sustained reduction in reliance on PRU places, PEX and Section 19 provision*
		• *Tier 3 provision will be:*
		  ○ *reserved for the most complex cases*
		  ○ *more targeted and time-limited where appropriate*

		The system will demonstrate: • *Improved reintegration rates from Tier 2* • *Reduced numbers of pupils requiring long-term specialist placements* • *Clear evidence of earlier intervention preventing escalation* *4. Consistent reintegration and pathways* *Reintegration will become a standard expectation across the system, supported by:* • *Clear entry and exit criteria across all tiers* • *Structured reintegration pathways back into mainstream education* • *Stronger partnership working between education settings, AP providers and services* *All AP placements will:* • *Be outcome-focused* • *Include clear plans for reintegration or progression* • *Be regularly reviewed through locality and partnership governance* *5. Integration with the wider SEND system* *Alternative Provision will be fully aligned with:* • *The Universal Offer, ensuring early needs are met before escalation* • *Experts at Hand, providing specialist support to education settings and strengthening decision-making* • *The locality delivery model, enabling coordinated planning and shared accountability* *This integration will ensure:* • *AP is not a standalone service, but part of a whole-system response to need* • *Education settings are supported to retain pupils wherever possible* • *Decision-making is consistent and equitable across the system* *6. A more coherent and sustainable AP market* *The system will move towards a locally sufficient and high-quality AP offer, including:* • *Reduced reliance on external and unregistered provision* • *Development of a local AP market, including in-school provision and outreach models* • *Clear commissioning frameworks aligned to system priorities and outcomes* *In the future state:* • *Children will increasingly access provision within the borough* • *AP capacity will be aligned to identified need and demand* • *Commissioning decisions will be driven by data and outcomes* *7. Stronger data, evaluation and system oversight*

The AP system will be underpinned by:

- *A shared dataset tracking:*
  - *demand across tiers*
  - *pupil journeys*
  - *reintegration outcomes*
  - *exclusion patterns*
- *Routine monitoring and evaluation of:*
  - *in-house AP provision*
  - *Tier 2 interventions*
  - *Tier 3 placements*

This will enable:

- *Early identification of system pressure points*
- *Continuous refinement of provision*
- *Clear evidence of impact over time*

8. Improved outcomes for children and young people
By Year 3, the AP strategy will deliver:

- *Reduced exclusions and preventable PEX*
- *Increased attendance and engagement for pupils at risk of EBSA or suspension / exclusion*
- *Improved reintegration into mainstream education*
- *Stronger sense of belonging and inclusion for children and young people*

Area	Year 1	Year 2	Year 3
Tier 2 (targeted AP)	Expand internal AP and implement Foundry model (in-reach and outreach)	Scale provision across all localities	Fully embedded, consistently available across all settings
Outreach model	Establish outreach delivery model, including specialist and AP-led outreach into mainstream settings	Increase outreach capacity and coverage across clusters	Outreach fully embedded as core system function supporting inclusion
Commissioning	Confirm commissioning approach for AP and outreach, including use of local providers and specialist settings	Refine commissioning based on demand and impact	Fully integrated commissioning model aligned to sufficiency and outcomes

Early Years *Core Minimum Requirement – CMR1, CMR25, CMR26, CMR27, CMR34*	***Where are we now*** • *Wokingham Borough School Places Strategy 2024/25 - 2029/30 set out local priorities for Early Years & Childcare sufficiency; whilst the area is in strong position regarding sufficiency there was a recognition of the need to focus on the provision and uptake of free entitlement places and the provision and accessibility of services for vulnerable learners (children entitled to free 2-year-old provision and children with SEND)* • *The area's SEND sufficiency Strategy identified the growing demand for specialist places on the early years and identified the need for growth in this area – capital resources were allocated to address this demand and development are underway to meet this demand.* • *At universal level and whole-setting level there is an increased focus on inclusion particularly driven by the new Ofsted early years framework. This has fostered a focus on the development of consistency across the local early years sector.* •	***Where will we be*** • *New premises for local specialist early years provision commissioned from Dingley's Promise due to open later in 2026 with further 16 place expansion planned in 2027 addressing gaps in local SEND offer.* • *By late 2026 recruitment of Wokingham's Best Start Inclusion Practitioners aligned with local Best Start Family Hubs, building on the strength of the local Portage Service, will increase access to advice, guidance and support to families with concerns about SEND and may help to increase uptake of the 2 year free entitlement* • *Increased insight work in Winter 2026 / Spring 2027 will improve understanding barriers to the uptake of the free entitlement to 2-year-old places by some families. This will facilitate measures to increase uptake if that is appropriate.* • *Improved data sharing from Health partners through an expanded Early Years Support panel will increase systemic insight into local needs and improve early identification of needs to help commission swifter support and intervention where this is required.*

Post-16
Core Minimum Requirement – CMR34
	Where are we now
	Effectiveness of current pathways to adulthood
	Current pathways are partially effective but inconsistent across cohorts:
	Strengths
	• *Strong delivery for:*
	  ○ *Young people accessing mainstream FE*
	  ○ *Those requiring highly specialist placements*
	• *Development of the Post-16 SEND Hub, providing:*
	  ○ *Preparation for Adulthood curriculum*
	  ○ *Therapeutic, flexible learning approaches*
	  ○ *Vocational and real-world opportunities*
	  ○ *Stronger links with employers*
	• *Increasing participation in GFE provision (rising from 12.1% in 2024 to 16.6% in 2025, above statistical neighbours and national averages)*
	• *Strengthened post-16 panel and multi-agency planning, including social care involvement*
	Challenges
	• *A significant gap for the"middle cohort" (EBSA, SEMH, anxiety)*
	• *Limited provision for:*
	  ○ *Young people on SEN Support (no EHCP)*
		Where will we be
		What a strong post-16 system will look like
		• *A coherent, well-understood post-16 SEND system, with:*
		  ○ *Clearly defined local pathways*
		  ○ *Consistent application across services*
		• *A graduated pathway model, including:*
		  ○ *Re-engagement and confidence-building pathways*
		  ○ *Hub-based specialist provision*
		  ○ *Mainstream FE routes*
		  ○ *Supported internships and employment pathways*
		• *A network of local Hub provision, reducing reliance on out-of-area placements*
		• *Consistent and early transition planning from Year 9 onwards*
		• *Stronger integration with:*
		  ○ *Adult social care*
		  ○ *Health services*
		
		Outcomes for young people
		• *Reduction in:*
		  ○ *NEET levels*
		  ○ *Disengagement and drop-out*
		• *Increased:*
		  ○ *Sustained participation*

	- Home educated young people - Those with low attendance or disengagement risk - Lack of re-engagement pathways for: - Confidence building - Skills development - Return to education or employment - Fragmented mentoring and tutoring, not consistently linked to progression routes - Provision remains inconsistent and often reactive rather than planned ***Clarity and consistency of pathways into and out of provision*** - There are emerging routes across: - Mainstream FE - Specialist provision - Post-16 SEND Hub - Supported internships and personalised pathways However: - No consistent, system-wide pathway framework exists - Pathways are: - Not consistently understood by families, education settings or professionals - Lacking clarity around eligibility, referral routes and expected outcomes Key issues: - Transitions often occur too late, leading to reactive planning - Lack of clear graduated pathway starting at Year 9 - Limited transition support into FE, increasing risk of: - Drop out - Lost learning year - Inconsistent approaches across caseworkers and services ***Working with providers (including cross-border)*** ***Strengths*** - Strong partnership working with: - Activate Learning and FE providers - Multi-agency partners including social care - Growing collaboration through the Pan-Berkshire SEND Employment Partnership, enabling: - Shared employer engagement - Expansion of supported internships - Stronger regional employment pathways	- Progression into education, training and employment - Improved: - Independence - Confidence - Readiness for adulthood - More young people accessing: - Appropriate local provision where it meets need

	• *Increasing collaboration with employers and community partners via the Hub model*
	Challenges
	• *Continued reliance on out-of-borough provision, particularly FE*
	• *Cross-border pathways:*
	  ○ *Not consistently coordinated*
	  ○ *Require clearer processes and expectations*
	• *Risk of variation in delivery and standards across providers and locations*
	Limited capacity of local provision given rising cohort demand	

Sufficiency and Place Planning
Core Minimum Requirement – CMR12, CMR13, CMR14, CMR15, CMR16, CMR17, CMR18, CMR19
	Where are we now
	Wokingham has a clearly articulated sufficiency strategy, underpinned by a detailed SEND Sufficiency Statement (2025) which identifies demand trends, particularly growth driven by ASD and SEMH need, and sets out a planned expansion of provision across early years, mainstream, special and post-16 phases.
	There is a strong pipeline of capital investment, including:
	• *Expansion of inclusive mainstream provision through primary and secondary inclusion bases*
	• *Development of new early years specialist provision*
	• *Planned special school expansion and new free schools for complex need*
	• *Creation of Post-16 SEND hubs*
	Together, this programme is projected to deliver significant additional capacity across the system.
	This provides a solid starting point, but the system currently experiences:
	• *Mismatch between demand and accessible local capacity, particularly for:*
	  ○ *ASD and SEMH cohorts*
	  ○ *post-16 "middle cohort" learners*
	• *Continued reliance on independent and non-maintained special schools (INMSS) for a proportion of children and young people*
	• *Travel distances outside the borough, particularly for specialist and FE provision*
	• *Variability in mainstream readiness, limiting the system's ability to absorb need earlier*
	While inclusion bases exist and further expansion is planned, capacity is not yet sufficient to consistently meet need locally across all phases and cohorts, particularly for children on the edge of specialist thresholds.
	There is also currently:
	• *A cohort of children educated outside formal settings (EHE and EOTAS), reflecting gaps in provision and inclusion pathways*
		Where will we be
		In three years' time, Wokingham will operate a fully coherent, needs-led local sufficiency system, where physical capacity, workforce capability and pathways align to meet the majority of need locally, earlier and within inclusive provision. Increased local provision and outreach are expected to improve belonging by reducing disruption, distance from home, and placement instability. The system will demonstrate a data-driven match between need and provision:
		• *Forecast demand (by need type, phase and locality) will directly inform:*
		  ○ *inclusion base locations*
		  ○ *specialist provision capacity*
		  ○ *post-16 pathways*
		• *A shared sufficiency model will be owned across the partnership and routinely refreshed*
		• *Capacity planning will explicitly distinguish:*
		  ○ *existing provision*
		  ○ *in-flight capital projects*
		  ○ *new investment driven by reform*
		
		2. Expansion of inclusive mainstream capacity (inclusion bases)
		Mainstream provision will form the core of the sufficiency model, with:
		• *A network of primary and secondary inclusion bases across all planning areas*
		• *Inclusion bases covering a broader range of need profiles (ASD, SEMH, SLCN and complex combinations)*
		• *Increased ability of mainstream education settings to:*
		  ○ *retain children locally*
		  ○ *flex provision without escalation*
		• *A clear expectation that mainstream is the default for the majority of need, supported by Experts at Hand*
		This will be underpinned by continued collaboration with MATs and education settings on estate planning, ensuring:
		• *the right provision is in the right place*
		• *future development reflects demographic need and school system design*

	• *Limited systematic planning of re-integration pathways for these cohorts*
	• *Early examples of mainstream adaptations funding, but not yet scaled to meet system-wide accessibility needs*
	Collaboration with education settings and partners is strong and improving, with clear engagement across MATs and settings. However, estate planning and capital deployment are not yet fully integrated into a single, system-wide sufficiency model, particularly in relation to:
	• *alignment of inclusion base locations and need*
	• *coordinated planning across localities*
	• *distinction between existing and new capital investment*
	
	As noted within the Sufficiency section of the LSRP, the Council has committed to >£13.2 million of additional funding for its SEND Sufficiency capital programme, over and above the grants confirmed to 2027. The confirmed grants have been fully allocated within our programme.
	
	The Council's SEND Sufficiency Strategy is premised on ensuring that the specialist system that is delivered by 2029 is one that has sufficient local school places across the board. In Wokingham, we have taken a needs-led approach (i.e. structuring the capital strategy in accordance with the place needs that have been identified by the 'Gap Analysis' within the SEND Sufficiency Statement). Given that we have been involved with the Safety Valve programme, we believe this to be the only responsible approach to ensuring that a sustainable SEND system is achieved, both from the perspective of families and the Council itself.
		• *Continue work to identify suitable sites and jointly plan the development of inclusion bases (WEPB)*
		• *Continue to develop provision created by falling rolls as they progress through secondary*
		
		3. Specialist provision for the most complex need
		Special school capacity will be sufficient, purposeful and clearly defined, with:
		• *Local specialist places meeting the needs of children requiring sustained high levels of support*
		• *New special school provision focused on cohorts whose needs cannot be met in mainstream or inclusion bases*
		• *A clear distinction between:*
		  ○ *inclusion base cohorts*
		  ○ *special school cohorts*
		  ○ *highly specialist / low-incidence cohorts*
		
		4. Reduced reliance on INMSS
		The system will demonstrate a sustained reduction in INMSS placements, with:
		• *The majority of new demand met within:*
		  ○ *mainstream provision*
		  ○ *inclusion bases*
		  ○ *local specialist provision*
		• *INMSS used only for the most complex and rare needs where:*
		  ○ *provision cannot reasonably be delivered locally*
		• *A clear strategic narrative evidencing:*
		  ○ *why those placements remain necessary*
		  ○ *how local capacity has reduced dependence over time*
		
		5. EHE and EOTAS – reduction and reintegration
		The system will actively reduce reliance on EHE and EOTAS as default responses to unmet need, through:
		• *Improved early intervention and inclusive practice*
		• *Development of flexible, local pathways that support re-engagement*
		• *Expansion of provision (including hubs and alternative pathways) for:*
		  ○ *EBSA*
		  ○ *SEMH*
		  ○ *disengaged learners*
		In the future state:
		• *EHE and EOTAS will be exceptional routes, not systemic responses*
		• *There will be clear pathways back into suitable education or training, supported by:*

		○ *Experts at Hand* ○ *post-16 hub provision* • *The system will hold explicit expectations about future cohort size reduction, supported by monitored trajectories* *6. Post-16 sufficiency and pathways to adulthood* *A coherent post-16 system will be in place, including:* • *Local SEND hubs providing:* ○ *preparation for adulthood pathways* ○ *re-engagement provision* ○ *supported transition routes* • *Reduced reliance on out-of-area FE placements* • *Stronger cross-border collaboration where provision is accessed externally* *7. Capital investment and mainstream accessibility* *Capital funding will be used strategically to:* • *Deliver inclusion base expansion and specialist provision growth* • *Improve the accessibility of mainstream school estates, including:* ○ *sensory adaptations* ○ *flexible learning environments* ○ *assistive technology* • *Extend the mainstream adaptations fund, scaling improvements across more settings* *All investment will:* • *Be explicitly linked to need and outcomes* • *Demonstrate how it reduces future system pressure* • *Distinguish clearly between existing and new capital allocations* *8. Travel and locality-based planning* *A systematic travel impact approach will be embedded:* • *Provision will be planned to minimise travel distances and reliance on transport* • *Mapping of current travel patterns will inform placement decisions and future development* • *Local provision will ensure children and young people can:* ○ *access education close to home* ○ *maintain community connections* • *Travel impact will be systematically assessed as part of the local area's sufficiency strategy, building on the established mapping of current travel patterns. Baseline data on travel distance, journey times, and reliance on out-of-borough placements will be used to evaluate the impact of investment decisions on improving local access to provision. The local area will monitor changes in these indicators over time,*

		including reductions in average travel distance and out-of-area placements, with progress reported through partnership governance to ensure that sufficiency and capital investment deliver measurable improvements in accessibility and inclusion.
		9. System success measures (physical capacity)
		The future state will be evidenced through:
		• *Increased proportion of children educated within borough and local provision*
		• *Sustained reduction in:*
		  ○ *INMSS placements*
		  ○ *long-distance travel*
		  ○ *EOTAS and EHE cohorts*
		• *Growth in:*
		  ○ *inclusion base occupancy and utilisation*
		  ○ *mainstream capacity to meet need*
		• *Stable or reducing demand for specialist placements aligned to complexity*

System leadership, local partnership collaboration and co-production		
	Where are we now *Wokingham has established key components of a partnership system, including governance boards, engagement with the Parent Carer Forum, SENDIASS provision, and emerging locality and data arrangements. However, these elements are not yet operating as a cohesive system. Partnership governance is developing but lacks clear collective accountability, consistent representation and strong escalation routes. Data is fragmented and not yet used consistently to drive decision-making or reduce variation. Co-production is in place through forums and engagement activity, but is not systematically influencing service design, with weak feedback loops and limited "you said, we did" evidence. The voice of children and young people is not yet consistently or separately captured. SENDIASS is delivering core functions but is not yet fully embedded within system learning and mediation pathways. Overall, the system reflects an early stage of maturity, with variable practice, limited integration between functions, and insufficient alignment between governance, delivery, data and lived experience.*	***Where will we be*** *In three years, Wokingham will operate a fully integrated, mature partnership system characterised by shared ownership, transparency and accountability across education, health and care. Governance will provide clear line of sight from strategy to locality delivery, with defined roles, escalation routes and collective responsibility for outcomes. A single, shared data framework will underpin all decision-making, combining performance data with lived experience to proactively identify need, reduce variation and inform commissioning. Co-production will be embedded as a core system principle, with structured engagement, strong feedback loops and routine evidence of how input from families and children and young people directly shapes services. SENDIASS will be fully integrated into the system as a trusted, independent voice, with strengthened mediation and early resolution pathways improving confidence and reducing escalation. The voice of children and young people will be systematically captured and influence decision-making alongside parent and carer voice. Together, these elements will create a coherent, responsive and self-improving system that delivers better outcomes, increased trust and sustainable improvement.*

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System leadership, local partnership collaboration and co-production – Success Measures - *Core Minimum Requirement – CMR9*

Measure Type	Partnership Measure	Metric	Year 1 (where are we now)	Year 3 (where will we be)	Assumptions/Notes
System Performance	Audits of provision/QA	No. meeting or exceeding Audit Quality against agreed standard	n/a	90%	Introducing Peer Review which will be used as a metric to monitor quality of provision/OAP Adoption
Lived Experience	Training/School Feedback	Positive Training Feedback	n/a	90%	SEND Centre of Excellence co-design will monitor
Lived Experience	Parent feedback	Overall Rating for SEND in Wokingham	2.69	4.00	Send Voices Survey 2025 for the Year 1 (where are we now). Overall Rating out of 5
System Performance	You said we did	Number of you said/we did actions recorded/published	tbc	tbc	Metric to be co-produced with Partnership
System Performance	WBC Utilisation of Specialist Spaces	% of commissioned places filled by WBC children	68%	90%	
Inclusive Practice	% children not in WBC provision	% of children accessing non Wokingham Maintained Settings	32.00%	20.00%	June 2026 % of children with EHCP that are not in a Wokingham maintained setting
Proxy Outcome	Placement Stability		tbc	tbc	Data quality cleanse underway.
System Performance	Audits of provision	% settings with signed SLA/Contract in place	80% SLA in place	100%	Each setting will have a contract/SLA which details a set of KPIs. Some will be setting specific and some will be collected across all settings to give a borough wide data set/heat map for the borough on impact against key KPIs
System Performance	Audits of provision	% settings meeting >80% of agreed KPIs	N/A	85%	100% of providers submit quality-assured annual reports, with ≥80% demonstrating evidenced positive impact (Green), and 100% of identified improvements delivered within agreed timescales and informing commissioning decisions.
Outcome	Attendance	% attendance of children with EHCP and SEN Support	90%	tbc	% attendance with EHCP and SEN Support. . Target to be agreed through WBEP.
Inclusive Practice	% Children Mainstream	% Children attending Mainstream Provision	58%	68%	Jan 2026. Includes all mainstream educated with EHCP (inc inclusion & resource bases and General FE P16)
Outcome	Travel Time	Assumption using HTST EHCP	12.06	<10	This is a measure of the average journey time for EHCP children in receipt of HTST assistance. It assumes an average journey time of 2-minutes-per-mile. At present, the average one-way journey length is 6.03 miles, with a target to reduce this below 5 miles within 3 years.
System Performance	Costs	Average costs provision	£23,775	£23,965	
System Performance	No. of MAIC sessions/CYP discussions	No of MAIC sessions/ year	21	tbc	Current 25/26. Format of MAIC will change as per Experts at Hand plan. Co-design will determine future target.
Inclusive Practice	No. of MAIC sessions/CYP discussions	Number of Settings Attending	76%	100%	Current 25/26. Format of MAIC will change as per Experts at Hand plan
Inclusive Practice	Coaching/peer support for setting staff		tbc	tbc	Introducing Peer Review which will be used as a metric to monitor coaching/peer support
Lived Experience	Staff feedback		tbc	tbc	SEND Centre of Excellence co-design will determine measure
System Performance	Quality assurance		tbc	tbc	SEND Centre of Excellence co-design will determine measure
Lived Experience	Session/training evaluations		tbc	tbc	SEND Centre of Excellence co-design will determine measure
Earlier Inclusive Practice	EHCP Requests	No. of EHCP requests	414	380	Calendar year 2025
Inclusive Practice	Part-time timetables	No. children on Part-time Timetables with EHCP & SEN Support	208	187	Number of children on a PTT as at April 26 for children with EHCP & SEN Support
Outcome	Overall School Absence	% absence for children with SEND	9.70%	tbc	Autumn 25-26 (Sept-Dec25) school absence for children with SEND. Target to be agreed through WBEP.
Outcome	Exclusions	% exclusions for children with SEN or EHCP	0.20%	0.00%	% of exclusions for academic year 24/25 for children with sen or ehcp
Outcome	Suspensions	% Suspensions for children with SEN or EHCP	21.90%	10.00%	% of suspension for academic year 24/25 for children with sen or ehcp
Lived Experience	Staff Confidence		tbc	tbc	SEND Centre of Excellence co-design will determine measure
Lived Experience	Parent Confidence	How well CYPs needs are being met by Education/Health/Social Care	26%	75%	SEND Voices 2025 survey. Q15. those met quite well/very well across all 3 services

Partnership Governance
Core Minimum Requirement – CMR9, CMR31
	Where are we now
	Wokingham already has strong foundations for partnership working, with a clearly established SEND Reform Programme providing overall strategic oversight across education, health and care. Governance is supported by existing boards, programme structures and established relationships with key partners, including education settings, early years providers, health services and the Parent Carer Forum.
	There is a strong commitment to co-production and partnership engagement, with emerging structures such as:
	• *Termly SEND Update Sessions with families and regular engagement with the Parent Carer Forum*
	• *Growing involvement of children and young people through participation mechanisms, including SAY YES and other engagement activity*
	• *Increased collaboration with education settings and partners through the development of the Universal Offer and Experts at Hand*
	A locality-based delivery model is being developed, bringing together education settings and services into cluster arrangements aligned to Family Hub geographies. This is beginning to support:
	• *Joint problem-solving across education, health and care*
	• *Shared responsibility for inclusion and transitions*
	• *Greater alignment between universal provision, targeted support and specialist services*
	There is also early work underway to strengthen:
	• *Shared data and insight, including development of a baseline dataset and dashboard*
	• *Performance monitoring, including variation across education settings and localities*
	• *Links between delivery (e.g. Universal Offer, AP, Experts at Hand) and governance oversight*
	However, governance arrangements are not yet fully mature or consistently embedded across the system. Current challenges include:
	• *Variability in the depth and consistency of partner representation across governance structures*
	• *Lack of a fully integrated, end-to-end governance model linking strategy, delivery and impact*
	• *Developing clarity around roles, decision-making authority and accountability across partners*
	• *Limited formalisation of locality-level accountability and reporting into system governance*
	• *Co-production and participation not yet consistently embedded as core drivers of decision-making*
		Where will we be
		All key elements of the SEND Local Reform Plan, including the Universal Offer and Experts at Hand, will be formally ratified through agreed governance arrangements with representation and sign-off from the local authority, ICB, education partners and the Parent Carer Forum.
		
		The impact of the recently recruited SEND Independent Chair will further strengthen and accelerate the journey toward a fully integrated, multi-agency governance system, where all partners share ownership of SEND outcomes, and decision-making is transparent, data-driven and co-produced. Governance will be characterised by formal, named representation across early years, schools and multi-academy trusts, and further education, ensuring the full 0–25 system is reflected in leadership, decision-making and accountability.
		1. A single, coherent partnership governance framework
		The system will operate under a clearly defined end-to-end governance structure, which:
		• *Aligns all partners to the SEND Local Reform Plan as the single delivery framework*
		• *Clearly defines:*
		  ○ *roles and responsibilities*
		  ○ *decision-making authority*
		  ○ *escalation routes*
		• *Provides formal representation from:*
		  ○ *early years providers*
		  ○ *schools and multi-academy trusts*
		  ○ *further education providers (including those attended out of borough)*
		  ○ *health (ICB and provider partners), social care and Parent Carer Forum*
		• *Provides a consistent line of sight from:*
		  ○ *strategic leadership → programme delivery → locality implementation → outcomes*
		All governance arrangements will be:
		• *Explicitly documented*
		• *Routinely reviewed*
		• *Understood and owned across the partnership*
		These arrangements will be formally linked to Schools Forum, ensuring alignment between SEND reform priorities, resource allocation and mainstream inclusion expectations across all settings.
		2. Shared accountability across all partners
		Governance will move from collaboration to true collective accountability, where:
		• *Education, health and care partners are jointly responsible for outcomes*
		• *Early years providers, schools, MATs and FE settings are formally represented and play an active role in system leadership*

	• *Data, lived experience and performance insight not yet fully integrated into a single governance narrative*
	As a result, while partnership commitment is strong, the system does not yet operate with fully collective ownership, consistent accountability or mature system leadership across all partners.
		• *The ICB and health partners are fully embedded in:*
		  ○ *planning*
		  ○ *commissioning*
		  ○ *delivery*
		There will be a clear expectation that:
		• *No single agency "owns" SEND outcomes*
		• *Responsibility is shared at:*
		  ○ *system level*
		  ○ *locality level*
		  ○ *service level*
		Formal links to Schools Forum will ensure that funding decisions, school engagement and system priorities are aligned, enabling coherent implementation of inclusive practice across all settings.
		3. Localities as the core governance and delivery unit
		The locality model will be fully embedded as the key interface between strategy and delivery.
		Localities will:
		• *Operate as multi-agency governance forums, with representation from:*
		  ○ *clusters of education settings (including MAT representation)*
		  ○ *early years providers*
		  ○ *health and care partners*
		• *Be led by clearly identified senior leaders (including secondary anchor schools and partner representatives)*
		• *Hold responsibility for:*
		  ○ *inclusion outcomes*
		  ○ *transitions*
		  ○ *variation across settings*
		They will:
		• *Use agreed performance metrics (e.g. SEN Support variation, attendance, exclusions)*
		• *Routinely report into partnership governance structures*
		• *Escalate risks and issues for system-level action*
		This will ensure governance is:
		• *Distributed but connected*
		• *Rooted in local delivery*
		• *Able to respond quickly to emerging need*
		4. Data-driven governance and system insight
		Governance will be underpinned by a single, shared data and insight framework, bringing together:
		• *Quantitative performance data (e.g. EHCP demand, exclusions, attendance)*
		• *Locality-level variation analysis*
		• *Lived experience from families and children and young people*

		• *Belonging will be a core partnership outcome, with quarterly reporting through the SEND Partnership Board. Data will be triangulated across CYP voice, attendance, exclusions, and placement data, with targeted improvement actions agreed at locality and cluster level.*
		This will enable:
		• *Routine performance review across all levels of governance*
		• *Early identification of:*
		  ○ *system pressure points*
		  ○ *variation between settings*
		  ○ *gaps in provision*
		• *Evidence-based decision-making for:*
		  ○ *commissioning*
		  ○ *resource allocation*
		  ○ *service design*
		Data and insight will be:
		• *Embedded into all governance discussions*
		• *Used to challenge and support partners*
		• *Clearly linked to delivery milestones and system outcomes*
		5. Co-production embedded as a governance principle
		Co-production will be fully embedded as a core feature of governance, not a separate activity.
		In the future state:
		• *Parent Carer Forum and CYP voice will be:*
		  ○ *formally represented within governance structures*
		  ○ *actively influencing decision-making*
		• *"You said, we did" reporting will be:*
		  ○ *routine*
		  ○ *visible*
		  ○ *linked to system change*
		• *Participation mechanisms will:*
		  ○ *capture both parent and CYP voice separately*
		  ○ *ensure feedback informs design, delivery and evaluation*
		Governance will demonstrate:
		• *Transparency*
		• *Responsiveness*
		• *Clear evidence of how feedback is acted upon*
		6. Clear escalation and dispute resolution processes
		The governance system will include:
		• *Clearly defined escalation routes from:*
		  ○ *locality → programme → strategic boards*
		• *Consistent and transparent dispute resolution processes, ensuring:*
		  ○ *issues are addressed early*
		  ○ *partners are held to account*

		○ *families experience fewer unresolved concerns* *This will strengthen:* • *Trust across the system* • *Timeliness of decision-making* • *Confidence in system leadership* *7. Stronger commissioning and strategic alignment* *Governance will support a more integrated commissioning model, where:* • *Decisions are jointly owned across partners* • *Commissioning is aligned to:* ○ *sufficiency planning* ○ *workforce development* ○ *system demand* • *Resources are deployed based on:* ○ *need* ○ *evidence* ○ *impact* *Formal alignment with Schools Forum will ensure that funding decisions across the system reinforce inclusive practice, support early intervention and provide transparency in the deployment of resources.* *8. A mature, self-improving system* *By Year 3, the partnership will operate as a mature system, characterised by:* • *Strong, visible system leadership across all partners, with full representation from early years, schools, MATs and FE* • *High levels of trust and collaboration* • *Consistent practice and reduced variation* • *Governance that is:* ○ *proactive rather than reactive* ○ *focused on outcomes rather than process* *The system will be able to:* • *Sustain improvement over time* • *Respond flexibly to changing demand* • *Continuously refine delivery based on data and lived experience*
Inclusion Academy/Centre of Excellence *Core Minimum Requirement – CMR1*	***Where are we now*** *Wokingham has strong individual components within its SEND system but does not yet operate as a fully coherent, aligned and systematically organised model. There is a wide range of expertise, outreach provision, training activity, and workforce development across education, health and local authority services. However, these components are currently experienced as separate and disconnected, rather than part of a single, structured system. As described in partnership discussions, the system can feel more like a series of "archipelagos" than a*	***Where will we be*** *In three years' time, Wokingham will have established a fully operational SEND Centre of Excellence as the foundation of the local SEND system. This will act as the single organising entity that brings together workforce development, training, quality assurance, system learning and practice leadership across the partnership.* *The Centre of Excellence will function as a one-stop shop and central repository, providing professionals with access to structured training, development pathways, resources and best practice guidance. It will include a dedicated platform and resource library, alongside a*

	unified model, with different entry points, offers and pathways that are not always well aligned or easy to navigate. *There are existing assets, including outreach offers, SENCO resources, workforce development activity and internal expertise, alongside emerging links to external partners and health provision. However, these are "dotted" across the system and not yet brought together into a coherent framework. As a result, workforce development is inconsistent, training is not always structured or sustained, and there is limited visibility of the quality and impact of different offers. Current activity focuses on volume and reach, but there is insufficient measurement of outcomes and impact, limiting the system's ability to understand whether provision is improving inclusion.* *In addition, there is currently no single, identifiable mechanism that:* • *provides a shared identity for SEND practice across the local area;* • *brings together training, development and best practice in one place;* • *ensures consistent expectations, language and approaches across partners;* • *supports a coherent workforce pipeline and progression model;* • *or provides robust quality assurance and insight into impact.* *Without this infrastructure, practice varies, duplication exists, and the system remains dependent on individual service offers rather than a collective, partnership-led model. As set out in discussions, the key issue is not the absence of components, but the absence of a single entity that organises, coordinates and strengthens them into a coherent system.*	*programme of ongoing, multidisciplinary learning opportunities such as training sessions, conferences and communities of practice.* *The workforce model will be systematic and structured, moving away from isolated training events to a clearly defined development pathway. This will include:* • *a shared partnership induction for all professionals entering the system;* • *tiered development aligned to universal, targeted and specialist practice;* • *locally developed progression routes, including "grow your own" pathways;* • *and consistent supervision and leadership of practice development.* *The Centre of Excellence will also act as a core quality assurance and system insight function. It will capture and analyse participation, engagement and outcomes, enabling the partnership to understand:* • *who is engaging with support and development;* • *where practice is improving;* • *where variation persists;* • *and whether system change is being realised.* *This will create the "mirror" described in partnership discussions, allowing the system to see patterns, challenge variation and drive continuous improvement.* *By Year 3, the system will have moved from fragmented components to a coherent ecosystem where:* • *workforce capability is systematically developed and sustained;* • *professionals across all sectors share a common understanding of inclusive practice;* • *training, supervision and practice development are routine and embedded;* • *and the system operates with a clear identity and shared approach to SEND.* *The Centre of Excellence will therefore underpin the entire reform programme, ensuring that workforce capability, practice consistency and system improvement are delivered coherently and sustainably.*
Shared Data and Maturity *Core Minimum Requirement – CMR33*	***Where we are now*** *Wokingham is at an early stage in developing a shared, system-wide approach to data, insight and maturity, with significant work required to move towards a fully integrated and effective model.* *At present, data across education, health and care is:* • *Fragmented, with limited integration between partner systems* • *Often used for statutory reporting rather than proactive system management* • *Not yet consistently shared or understood across the partnership*	***Where will we be*** *In three years, Wokingham will operate a fully integrated, mature data and insight system, which underpins all aspects of the SEND system and enables proactive, evidence-informed decision-making across the partnership.* *1. A single, shared and consistently applied dataset* *The partnership will establish a single, agreed data framework, co-owned across education, health and care, which:* • *To support effective locality and cluster-based working, all partners will contribute to a shared data approach. Education settings, early years settings and partners will routinely share*

	While there are examples of emerging practice, these are not yet embedded at system level. Current activity includes:
	• *Initial identification of core data measures, such as attendance, exclusions and SEN Support variation*
	• *Early work to establish a baseline understanding of variation across settings*
	• *Development of initial dashboards and data tools, which are still in the early stages of implementation*
	However, this work remains inconsistent and is not yet fully aligned across partners.
	The SEND and AP Change Programme maturity assessment indicates that the system is at an early level of maturity, characterised by:
	• *Limited shared ownership of data across education, health and care*
	• *Lack of a single, agreed dataset and definition of metrics*
	• *Inconsistent use of data in decision-making and governance*
	• *Limited capacity for analysis, forecasting and predictive insight*
	• *Variability in data literacy and confidence across the workforce*
	Importantly, the system does not yet operate with a clear line of sight between data, delivery and outcomes. Data is not routinely used to:
	• *identify and address variation*
	• *inform commissioning and investment decisions*
	• *track the impact of key reforms such as the Universal Offer, Alternative Provision or Experts at Hand*
	In addition, while there is a strong commitment to capturing lived experience, this is not yet:
	• *systematically collected*
	• *integrated with quantitative data*
	• *embedded within governance and performance discussions*
	Overall, Wokingham does not yet have a strong or mature data infrastructure, and the current position reflects a system moving from fragmented and descriptive data use towards a more coordinated and insight-led approach.
		agreed data sets to inform locality-level dashboards and enable identification of variation, emerging need and targeted support. Data will be used at cluster level to support joint problem-solving, early intervention and accountability for outcomes. All data sharing will be underpinned by clear information governance arrangements, including data sharing agreements and GDPR compliance, ensuring data is used appropriately, securely and transparently across the partnership.
		• *Defines a clear set of core measures and shared definitions*
		• *Aligns all partners to a consistent understanding of need, demand and outcomes*
		• *Provides a transparent view of performance at:*
		  ○ *system level*
		  ○ *locality level*
		  ○ *setting level*
		This will ensure all partners are working from the same evidence base, removing variation in interpretation and enabling collective accountability.
		2. From fragmented data to integrated system insight
		Data systems will move from being fragmented and disconnected to fully aligned and integrated across partners, enabling:
		• *Routine sharing of data between education, health and care*
		• *Reduced duplication and improved data quality*
		• *A coherent system-wide understanding of:*
		  ○ *demand trends*
		  ○ *cohort needs*
		  ○ *service utilisation*
		This integration will enable the system to move beyond individual service perspectives to a whole-system understanding of SEND need and provision.
		3. From retrospective reporting to predictive and proactive use of data
		The system will shift from:
		• *retrospective reporting → to real-time and predictive insight*
		Data will be used to:
		• *Identify emerging demand and risks earlier*
		• *Predict pressure points (e.g. escalation, exclusions, placement breakdown)*
		• *Inform early intervention and preventative action*
		This will ensure that:
		• *decisions are made proactively rather than reactively*
		• *resources are deployed in response to need before escalation occurs*
		4. Data embedded at the heart of governance
		All governance structures will operate as data-informed decision-making forums, where:
		• *Performance dashboards are routinely reviewed*

		• *Variation between settings and localities is actively challenged*
		• *Data is used to:*
		  ○ *hold partners to account*
		  ○ *target support and intervention*
		  ○ *track delivery against reform priorities*
		Localities will play a critical role, using:
		• *agreed performance metrics*
		• *locality-level dashboards*
		to drive improvement and escalate issues where necessary.
		5. Integration of lived experience with performance data
		The system will bring together quantitative data and lived experience into a single, coherent insight model.
		This will ensure:
		• *Parent and carer voice, and the voice of children and young people, is:*
		  ○ *systematically captured*
		  ○ *analysed alongside performance data*
		  ○ *used to inform decisions*
		• *"You said, we did" reporting becomes:*
		  ○ *routine*
		  ○ *evidence-based*
		  ○ *directly linked to system improvement*
		This integration will strengthen:
		• *transparency*
		• *trust*
		• *responsiveness*
		6. A data-enabled locality model
		Localities will become data-driven delivery units, where:
		• *Variation between settings is clearly visible*
		• *Data is used to support:*
		  ○ *peer challenge*
		  ○ *shared accountability*
		  ○ *targeted improvement*
		Locality-level insight will:
		• *drive early intervention*
		• *inform deployment of Experts at Hand*
		• *support reduction in escalation and variation*
		7. Increased data capability across the workforce
		Workforce capability will be strengthened so that:
		• *Leaders and practitioners can confidently:*
		  ○ *interpret data*
		  ○ *use insight to inform decision-making*
		  ○ *apply evidence to practice*
		• *Data is used consistently across:*
		  ○ *education settings*

		○ *services* ○ *localities* ○ *governance* *This will embed a culture of evidence-informed practice across the system.* *8. Clear progression in system maturity* *Using the maturity matrix, Wokingham will move from:* • *emerging / developing maturity → to established / advanced maturity* *This will be characterised by:* • *Fully integrated, multi-agency data systems* • *Strong alignment between data, governance and delivery* • *Routine use of insight to drive improvement and commissioning* *9. Clear demonstration of impact and system improvement* *By Year 3, the system will be able to demonstrate:* • *Reduced variation across settings and localities* • *Increased early intervention (e.g. SEN Support)* • *Stabilisation of EHCP demand* • *Reduced reliance on specialist and out-of-area provision* • *Improved outcomes for children and young people* *Data will provide:* • *A clear, evidence-based narrative of improvement* • *Assurance to partners and national stakeholders* • *A foundation for continuous system learning and development*
SENDIASS *Core Minimum Requirement – CMR31, CMR39*	***Where we are now*** *Wokingham's SENDIASS is a well-established, high-performing statutory service providing impartial information, advice and support to children, young people and families aged 0–25. It operates in full alignment with the national SENDIASS Minimum Standards, with compliance underpinned through its formally commissioned Service Level Agreement (SLA), which sets out expectations for impartiality, accessibility, quality and impact. The service is widely trusted and perceived as genuinely independent by families, operating effectively at arm's length from SEND decision-making processes. This independence is structurally embedded, with clear separation from statutory functions, and is overseen through an independent multi-agency steering group, underpinning the confidence families place in the service. Within mediation and dispute resolution processes, the local area actively safeguards this independence through clear separation from statutory functions and mediation providers, transparent communication to families, and guaranteed access to SENDIASS support before, during and after mediation. SENDIASS therefore plays a critical role in ensuring families are informed, confident and able to engage meaningfully in dispute resolution*	

	The service delivers comprehensive, end-to-end support across the SEND pathway, from early concerns through SEN Support, EHCP processes and into mediation and tribunal. SENDIASS is trusted to provide impartial advice, including during disputes and tribunals, ensuring families feel informed, empowered and supported throughout. A structured triage model ensures proportionate and timely support, while a dedicated youth offer enables children and young people to access independent advice directly. *SENDIASS demonstrates strong accessibility and reach through a wide range of delivery channels, including face-to-face support, advice lines, digital access and community-based outreach. It is well promoted across education, health and care partners, enabling early engagement and supporting families to navigate systems more confidently.* *The service plays a critical role in system improvement. Through regular monitoring, thematic reporting and close working with commissioning and SEND teams, SENDIASS provides valuable insight into family experience, identifies emerging pressures and informs service development.* *The Local Area will sustain this strong model, enhancing accessibility through alignment with Family Hubs while maintaining independence, neutrality and confidentiality.*	
Voice of Children and Young People *Core Minimum Requirement – CMR31, CMR37*	***Where we are now*** *How are we currently capturing the voice of children and young people directly?* • *Children and young people's views are gathered as part of the EHCP annual review process. There is separate paperwork designed specifically for them, which is different from the parent or carer forms.* • *This paperwork is being redesigned following feedback from the Young Experts. The new version will be co-produced with young people.* • *The SEND Youth Forum (SAY YES) and Mental Health Champions provides a structured and ongoing mechanism for children and young people with SEND to share lived experience, discuss issues, and shape priorities.* • *The Participation Team delivers school-based workshops, enabling direct engagement with a broader and more diverse group of young people. These sessions gather views on services, education experiences and system improvements. 62 children in 5 schools (2 specialist and 3 mainstream) were involved in giving their voice in the spring term.* • *Young Experts contribute their views through structured involvement in reviewing SEND plans, policies, and service*	***Where we will be*** ***Strong, consistent and inclusive practice in Wokingham will mean that:*** • *Children and young people's voices are routinely captured through existing touchpoints (e.g. annual reviews, targeted engagement activity, commissioning workstreams and youth voice forums) and are consistently recorded and used to inform decisions.* • *Participation is delivered through a coordinated, partnership approach, with clear expectations for all services rather than reliance on individual teams or one-off activity.* • *A range of accessible and inclusive methods are in place to hear from children and young people with different needs, including those with complex communication needs, ensuring equitable opportunities to contribute.* • *The voices of children and young people are clearly distinguished from, and given equal weight to, those of parents, carers and professionals within decision-making processes.* • *Feedback loops are embedded across the system, with consistent "You said, we did" reporting at service, programme and strategic level, demonstrating how input has influenced change.*

	developments. Our 4 young experts are care leavers working as part of the participation team.
	• *Our Wokingham Youth Council is a universal forum but is attended by several members with additional needs. They are consulted by the local authority and partners from health on topics relevant to children and young people with additional needs.*
	• *A co-produced Preparing for Adulthood video, created with young people, reflects authentic lived experience and priorities for transition.*
	• *SENDIASS offer confidential support and advice to children and young people up to age 25.*
	• *Children and young people with SEND take part in one off pieces of engagement and co-production work. For example, designing the new post-16 hub and co-hosting the SENCO area conference.*
	• *The Advocacy Service supports children and young people with SEND to express their views through:*
	• *Issue-based advocacy (support to raise specific concerns)*
	• *Non-instructed advocacy (ensuring the voices of those who cannot easily communicate are still represented)*
	How do we ensure this is distinct from parent/carer voice?
	• *Dedicated forums and engagement routes (e.g. SAY YES) specifically for children and young people.*
	• *Direct engagement through education settings and workshops, rather than relying on parental mediation.*
	• *Advocacy ensures the child's voice is independently represented, particularly where views may differ from parents or carers.*
	• *Participation activities are designed with age-appropriate methods to capture authentic child and youth perspectives.*
	Where can we evidence that their views are influencing decisions, design or commissioning?
	• *Young Experts reviewing SEND policies and plans and feeding directly into improvements.*
	• *Youth-led interviews of senior leaders, including the SEND Improvement Board Chair and Head of Education & Belonging, demonstrating influence at a governance level.*
	• *Outputs such as the Preparing for Adulthood video informing practice and professional understanding.*
	• *Feedback from SAY YES and school workshops informing service-level changes and highlighting priority issues. Their voice is included at every SEND assurance board meeting and forms part of this SEND reform plan. (though this is not yet consistently evidenced across all decision-making).*
	What needs to change
	• *Strong foundations through SAY YES, advocacy, and participation team activity.*
	• *Existing examples of co-production and youth influence at senior levels.*
	• *Skilled workforce in facilitating inclusive engagement.*
		Meaningful influence and participation in Wokingham will mean that:
		• *Children and young people are enabled to contribute to governance through defined routes (for example, representation at SEND partnership boards via youth voice groups, themed engagement linked to board priorities, and regular reporting into governance structures).*
		• *Co-production is the expected approach across service design, commissioning and evaluation, with children and young people engaged at key decision points rather than retrospectively.*
		• *Children and young people's views directly inform:*
		  ○ *Strategic priorities within the SEND Local Plan*
		  ○ *Commissioning decisions (including shaping the design of services such as Experts at Hand and preparation for adulthood pathways)*
		  ○ *Policy and practice development across education, health and care*
		• *The impact of participation is systematically captured, monitored and reported as part of the SEND Partnership performance framework.*
		• *Engagement approaches actively target and include a diverse and representative group of children and young people, including those who are seldom heard.*
		• *Participation leads to tangible and visible change, with children and young people able to recognise how their contributions have influenced services, support and outcomes.*

	• *Established culture of valuing lived experience, with growing opportunities for young people to contribute.* • *Positive engagement methods that are accessible, creative and youth-friendly.* ***Summary*** *We have a strong starting point, with established participation structures such as SAY YES, advocacy services, school engagement and youth-led influence in governance. However, activity is not yet consistent, systematically captured, or fully embedded across decision-making.* *Over the next three years, the focus will be on scaling, structuring and evidencing participation, ensuring that children and young people with SEND are not only heard, but demonstrably shape the system that supports them.* ***Plan Input*** *In Wokingham, children and young people's views have begun to inform the SEND Local Plan through a targeted programme of engagement activity led by the Participation Team, working in partnership with SEND services. This has included the development and delivery of school-based workshops across both mainstream and specialist settings to capture lived experience and identify key themes, with early sessions (e.g. at Initial workshop at St Crispin's School) highlighting young people's views on reasonable adjustments, inclusion and their day-to-day educational experience. Alongside this, a structured survey has been developed and shared with young people, including through the Youth Council, to gather wider feedback on SEND reforms, with initial responses collated and analysed. A coordinated approach to engagement was agreed across the partnership, including workshops, youth forum engagement, and more in-depth conversations with young experts to explore individual experiences in greater detail. This work has been delivered at pace and has begun to generate qualitative insights and emerging themes to inform the plan; however, activity has largely been time-limited and focused on supporting plan development, with ongoing co-production and systematic feedback mechanisms still being established.*	
Co-Production *Core Minimum Requirement – CMR31, CMR37, CMR38, CMR40*	***Where we are now*** *Wokingham recognises the importance of co-production and has established some mechanisms for engaging with families, children and young people. However, co-production is not yet embedded, systematic or consistently influencing decision-making across the system.* *The partnership has also developed a Co-Production Charter, co-created with system partners and representatives, which sets out the shared expectations for working with families, children and young people. However, this has not yet been fully embedded within delivery planning, governance or day-to-day*	***Where we will be*** *Starting with a co-produced Partnership minimum coproduction standard agreement (Q2/Q3 of Year 1), in three years, Wokingham will have a fully embedded, systematic and influential co-production model, where families, children and young people actively shape decision-making at all levels of the SEND system.* *1. Co-production embedded at the heart of the system* *Co-production will move from an activity to a core principle underpinning all workstreams, ensuring that:* • *All major service design, commissioning and delivery decisions are co-produced from the outset* • *Families and CYP are involved:*

	practice, and is therefore not consistently influencing outcomes across the system. *There are existing forums, including termly "Zoom updates with families", which provide opportunities for engagement and feedback.* *There is also:* • *Input from the Parent Carer Forum (PCF) into governance structures* • *Feedback gathered through sessions, surveys and discussions* • *Examples of targeted engagement activity (e.g. transport, short breaks, EOTAS)* *However, the current approach has significant limitations:* *1. Co-production is not yet embedded in decision-making* • *Engagement activity is not consistently linked to shaping services or influencing outcomes* • *Families report a lack of clear evidence that their feedback is being acted upon* • *There is not yet a consistent"you said, we did" narrative across the system* *2. Feedback loops are weak and not closed* • *Feedback collected through meetings and sessions is not always:* ○ *tracked* ○ *responded to* ○ *fed back to families* • *This creates a perception that feedback "goes into a black hole" without meaningful response or action* *3. Lack of structure, planning and ownership* • *Engagement activity is not always planned or scheduled in advance* • *Roles and responsibilities for co-production are unclear* • *There is no consistent approach to:* ○ *who attends sessions* ○ *what is presented* ○ *how sessions link to decision-making* • *There is currently no consistently applied framework setting out when the system is using co-production, co-design, engagement or consultation, resulting in variability in practice and lack of clarity for partners and families.* *4. Quality and accessibility of communication* • *Communication is often perceived as:* ○ *overly corporate and technical* ○ *not focused on what matters most to families*	○ *early* ○ *continuously* ○ *meaningfully* *Co-production will be clearly recognised as a non-negotiable part of how the system operates, not an optional or additional activity.* *2. A structured and planned engagement model* *The system will implement a clearly defined co-production framework, including:* • *A planned annual programme of engagement, including:* ○ *scheduled "SEND Updates for Families" sessions* ○ *clearly defined agendas linked to reform priorities* • *Formal pre- and post-meet processes, ensuring:* ○ *families shape agendas in advance* ○ *outputs are reviewed and actions agreed afterwards* • *Defined expectations for partner attendance and contribution* *This will ensure co-production is:* • *predictable* • *structured* • *aligned to delivery* *3. A clear and consistently applied co-production framework* *In Year 1, the partnership will implement the Co-Production Charter as the core operating model for participation, ensuring that it moves from a statement of intent to a fully embedded delivery framework.* *This will include the introduction of a shared participation framework, aligned with regional (SESLIP) work, clearly distinguishing between co-production, co-design, engagement and consultation. This framework will be:* • *Agreed with the Parent Carer Forum (PCF), children and young people and system partners* • *Applied consistently across all workstreams and programmes* • *Used to explicitly map how and when families and CYP are involved in decision-making* *All delivery activity will clearly identify the level of participation being used, ensuring:* • *transparency for partners and families* • *consistency in approach* • *clarity over influence and decision-making* *4. Strong "You said, we did" accountability* *A consistent feedback and accountability model will be embedded, where:* • *All engagement activity results in:* ○ *clear actions* ○ *named ownership* ○ *defined timescales* • *Progress is routinely reported through:* ○ *"You said, we did" updates* ○ *governance and public reporting*

	• *Families want:*
	  ○ *clear, practical information*
	  ○ *tangible changes (e.g. provision, response times), rather than high-level strategy*
	5. Trust and culture challenges
	• *Families report a lack of confidence that the system:*
	  ○ *listens*
	  ○ *responds*
	  ○ *takes ownership of issues*
	• *There is a perception that:*
	  ○ *the system does not always acknowledge where improvement is needed*
	  ○ *accountability is not consistently demonstrated*
	6. Children and young people's voice
	• *While recognised as important, CYP voice is not yet:*
	  ○ *systematically captured*
	  ○ *clearly distinguished from parent voice*
	  ○ *embedded within decision-making*
	7. Capacity and sustainability constraints
	• *The PCF operates with limited and uncertain funding, affecting its capacity to:*
	  ○ *lead engagement activity*
	  ○ *sustain involvement over time*
	• *Delivery of co-production activity is constrained by available resource and financial sustainability*
	To strengthen co-production and ensure that the Parent Carer Forum (PCF) is sustainably resourced to fulfil its strategic role within the SEND system, additional funding has been committed from the Council's General Fund. This investment will enhance the capacity of the PCF to engage meaningfully with a broader and more diverse range of families, support participation in strategic governance, and contribute to the co-design, delivery and assurance of the SEND Reform Plan.
	In addition, two new roles have been established to further strengthen parent carer engagement and system leadership. These posts will be funded through the Experts at Hand (E@H) programme and will work as part of the wider integrated delivery function. The roles will focus on amplifying the voice of parent carers, supporting co-production activity across all four building blocks, and ensuring that lived experience directly informs service design, commissioning decisions and continuous improvement.
	Together, this additional investment and dedicated capacity will ensure that co-production is embedded at every level of the system, in line with core minimum requirements, and that the PCF is appropriately resourced to act as a key strategic partner over the three-year reform period.
		This will ensure that:
		• *feedback is visibly acted upon*
		• *trust is rebuilt through transparency and responsiveness*
		5. A wider and more inclusive engagement model
		Co-production will be broadened to include a range of engagement methods, ensuring representation and accessibility:
		• *Regular Zoom sessions (accessible for working families)*
		• *Targeted focus groups linked to specific reforms (e.g. Universal Offer, Experts at Hand)*
		• *Use of:*
		  ○ *surveys*
		  ○ *quick polls*
		  ○ *in-person sessions*
		This will ensure:
		• *diverse participation*
		• *inclusion of different groups*
		• *flexibility in how families engage*
		6. Co-production embedded in system design and delivery
		Co-production will be directly linked to reform delivery, with:
		• *Each workstream will include a clearly defined co-production plan, setting out the participation level at each stage (co-production, co-design, engagement or consultation), the intended influence on decision-making, and how feedback will be captured and reported.*
		This will ensure co-production:
		• *shapes design*
		• *informs delivery*
		• *influences evaluation*
		7. Clear governance, leadership and ownership
		Co-production will be underpinned by:
		• *Clearly defined roles and responsibilities*
		• *Named leadership for co-production across the system*
		• *Stronger integration with governance structures*
		Regular operational meetings (e.g. monthly PCF and LA meetings) will:
		• *support ongoing dialogue*
		• *ensure alignment with delivery*
		• *provide a mechanism for addressing emerging issues*
		The Co-Production Charter and participation framework will be embedded within governance arrangements, with routine reporting to partnership boards on participation activity, impact and influence on key decisions.
		8. Integration of lived experience into system insight
		The system will ensure that:
		• *Feedback from families and CYP is:*
		  ○ *systematically captured*
		  ○ *analysed*

	Overall, co-production is currently inconsistent, under-structured and not yet a core driver of system design or delivery, despite strong commitment from partners.	○ *integrated into performance and data systems* • *Lived experience becomes a core component of system insight, alongside quantitative data* *This will enable:* • *better understanding of impact* • *more responsive decision-making* *Lived experience data will be systematically triangulated with performance and outcomes data, ensuring that co-production directly informs system understanding and improvement.* *9. Culture shift: transparency, empathy and ownership* *The system will demonstrate a clear cultural shift towards:* • *openness and honesty about challenges* • *empathy in communication and engagement* • *shared ownership of issues across partners* *Communication will:* • *move away from corporate language* • *focus on what matters to families* • *clearly articulate tangible improvements* *10. Sustainable and sufficiently resourced co-production* *A sustainable funding model will be established to:* • *ensure the PCF is adequately resourced* • *support delivery of:* ○ *engagement activity* ○ *focus groups* ○ *participation work* *This will ensure co-production is:* • *credible* • *deliverable* • *sustainable over time*

Level	What it means in Wokingham	When used	Examples in practice
Co-production	Shared decision-making with equal influence over priorities, design and outcomes	System design, commissioning and governance	Ordinarily Available Provision, SEND pathway redesign, governance through PCF
Co-design	Joint development of services and solutions	Service development and implementation	Experts at Hand model, access routes, Local Offer improvements
Engagement	Structured dialogue to inform and refine delivery	Implementation and continuous improvement	Termly sessions, roadshows, focus groups
Consultation	Formal process to gather views on defined proposals	Policy or service change	Commissioning changes, formal proposals

Mediation *Core Minimum Requirement – CMR35, CMR41, CMR42*	***Where we are now*** *The local area has established clear and effective mediation and dispute resolution arrangements which prioritise early resolution, reduce escalation, and ensure that the voices of children, young people and their families are central to decision-making.* *A key strength in the current system is the proactive role of Complex Case Practitioners, who work collaboratively with families, education settings and professionals to resolve disagreements at the earliest possible stage. Through "way forward" meetings and direct engagement, concerns are addressed before they escalate to formal mediation or tribunal, providing families with timely opportunities to share their views, understand decisions taken by the Local Authority, and explore next steps.* *Where formal mediation or dispute resolution is required, practitioners attend and represent the Local Authority with delegated authority to support timely and informed decision-making. They ensure that the rationale for decisions is transparent and clearly communicated, whilst also facilitating multi-agency input where further evidence is required, including escalation to decision-making panels where appropriate.* *The system actively promotes the involvement of children and young people in dispute resolution processes. Practitioners encourage participation wherever possible and arrange advocacy support where needed, ensuring that the views, wishes and feelings of children and young people are heard and meaningfully influence outcomes.*	***Where we will be*** *To deliver our three-year vision, we need to move from a model where effective mediation practice exists in parts of the system, to one where it is consistently delivered, clearly understood and fully embedded as a driver of system improvement.* *We will strengthen early resolution by ensuring that all practitioners across education, health and care are confident in addressing concerns before escalation. This will include clearer expectations, shared practice standards, and strengthened training and support so that early, informal resolution becomes the norm across the system.* *We will embed a consistent and auditable approach to participation, ensuring that the voices of children, young people and families are systematically captured, evidenced and used to shape outcomes. This will include strengthening the use of advocacy, standardising how views are recorded, and ensuring feedback from families influences both individual decisions and wider service design.* *We will develop a more robust learning and feedback loop, ensuring that insights from mediation and dispute resolution are routinely analysed and inform service improvement. This will include stronger links into governance, quality assurance and data processes, so that themes from disputes directly influence workforce development, commissioning and system design. Data collection will focus on impact, with KPIs linked to reduced appeals to the SEND Tribunal, as a result of more effective and embedded disagreement resolution and mediation practice. Granular reporting on specific types of disagreement will enable a more focussed approach to working with families and partners for common areas of disagreement.*

	There are also strong links between mediation activity and wider system learning. Practitioners work closely with tribunal services to ensure robust preparation and clarity of position, whilst capturing learning from disputes and mediations to inform continuous service improvement, reduce recurrence of issues, and strengthen practice across the SEND system. *Collectively, these arrangements demonstrate a mature and embedded approach to dispute resolution, characterised by early intervention, transparent decision-making, and a consistent focus on co-production with families and young people.* ***What needs to change*** *While mediation and dispute resolution arrangements are well established and proactive, there are areas where consistency, transparency and system-wide impact need to be strengthened.* *A key concern is that early resolution, although embedded through the work of Complex Case Practitioners, is not yet consistently experienced across all parts of the system. There remains variation in how effectively concerns are addressed at the earliest stage, which can lead to unnecessary escalation to formal mediation or tribunal. This suggests that practice is not yet uniformly confident or supported across all teams and partners.* *We are also concerned that the voice of children and young people, while actively encouraged within mediation processes, is not yet systematically embedded or evidenced across all cases. Although formal advocacy is arranged where needed, participation can still depend on individual practitioner practice rather than a consistently applied approach.* *In addition, while learning from disputes and mediation is captured and shared, this is not yet fully embedded as a system-wide continuous improvement loop. There is a risk that insights from mediation are not consistently translated into changes in frontline practice, policy development or commissioning decisions.* *Finally, there is a need to strengthen the transparency and accessibility of mediation and dispute resolution processes for families. Feedback suggests that while support is in place, families can still experience the system as complex to navigate, with unclear expectations about routes, roles and decision-making processes.* *Data collection occurs, however needs to be sharpened with a focus on outcomes as a result of disagreement resolution, mediations and the subsequent impact on appeals to the SEND Tribunal.*	*We will also improve the clarity and accessibility of mediation and dispute resolution arrangements for families, ensuring that pathways are transparent, communication is consistent, and families understand what to expect at each stage. This will reduce anxiety, build trust and support earlier, more constructive engagement.* *Finally, we will strengthen multi-agency ownership of dispute resolution, ensuring that partners across education, health and care share accountability for resolving disagreements and improving the system, rather than this being perceived primarily as a Local Authority process.*

Encouraging inclusive culture and behaviours		
	Where are we now *Wokingham has a clear and shared ambition to develop a more inclusive culture across education, health and care, and there are emerging strengths to build on. Engagement with education settings, families and partners has supported honest conversations about inclusive practice, early identification and the need to shift towards earlier help and shared responsibility.* *There are established mechanisms for engagement and participation, including governance structures, SENCo networks, headteacher forums, the Parent Carer Forum and wider partnership discussions. SENDIASS is in place and provides independent advice and support to families. Children and young people's voice is captured through surveys and engagement activity, and co-production has been used to inform aspects of the developing plan.* *However, these elements are not yet operating as a cohesive system and are not consistently driving a shared culture or behaviours across all partners. The current system is characterised by:* ***1. Inconsistent inclusive culture across settings*** • *Inclusive practice is not yet consistently embedded across all schools and settings* • *Expectations of the graduated response and inclusive provision vary* • *There remains a tendency towards **escalation rather than early intervention**, particularly where confidence or capacity is lower* • *Workforce confidence in meeting a wide range of need within mainstream settings is variable* ***2. Limited shared ownership and accountability*** • *Responsibility for SEND outcomes is not yet fully shared across all partners* • *There is still evidence of **system fragmentation**, with education, health and care not consistently operating as a single system* • *Decision-making and behaviours are not always aligned to a clear principle of **collective responsibility and inclusion-first practice*** ***3. Co-production not fully embedded*** • *Engagement activity exists but is not consistently:*	***Where will we be*** *In three years, Wokingham will have a mature, confident and consistently inclusive system culture, underpinned by a co-produced Education Belonging Strategy which aligns practice, experience and outcomes across the partnership.* ***1. Inclusion as the default culture across the system*** *Inclusive practice will be fully embedded across all education settings and partner services, with:* • *A shared understanding that **mainstream inclusion and early support is the default expectation*** • *Consistent application of the graduated approach and Universal Offer* • *A confident workforce able to meet a broad range of needs without unnecessary escalation* • *A shared, co-produced definition of belonging, with a consistent focus on children and young people's lived experience of inclusion across all settings* • *A co-produced Education Belonging Strategy that aligns existing inclusion frameworks and practice into a single, coherent "belonging thread" across education, SEND and children's services* • *Belonging will be measured through a multi-dimensional belonging index and dashboard at borough, locality and school level, using proxy indicators and lived experience measures to track children and young people's connection, experience and outcomes over time.* *The system will demonstrate a clear shift from:* • *escalation and fragmentation → **early help, consistency and inclusion as the norm*** ***2. Shared ownership and collective responsibility*** *All partners will operate with a clear and consistent commitment to **collective accountability for SEND outcomes**, where:* • *Education, health and care act as a **single system*** • *Schools, trusts, early years providers and post-16 settings are active partners in system leadership* • *Responsibility for outcomes sits across:* ○ *system level* ○ *locality level* ○ *individual settings* *This will be reinforced through:*

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	planned *structured* *linked to decision-making* *Feedback loops are not consistently closed, limiting confidence that input leads to change* *Co-production is not yet a **core system driver**, and varies in quality and impact* ***4. SENDIASS and advocacy not fully integrated*** *SENDIASS provides essential independent advice and support, but is not yet fully embedded within:* *system learning* *early resolution* *continuous improvement processes* *Opportunities to use SENDIASS insight to strengthen system responsiveness are not fully realised* ***5. Voice of children and young people not systematically embedded*** *CYP voice is captured through engagement activity, but:* *is not consistently gathered across all services* *is not always clearly separated from parent voice* *does not consistently influence decision-making* ***6. Variable approaches to mediation and dispute resolution*** *Processes for mediation and resolving disagreements are in place but are not yet:* *consistently applied* *focused on early resolution* *This contributes to escalation, reduced trust and less positive experiences for families* ***7. Fragmented alignment between culture, data and performance*** *Cultural expectations (e.g. inclusion, early intervention, shared responsibility) are not yet:* *consistently reinforced through governance* *aligned to performance measures or accountability frameworks* *Data and lived experience are not fully integrated to drive behavioural change* *Overall, the system reflects an **early stage of cultural maturity**, where commitment to inclusion and co-production is strong, but behaviours, accountability and practice are not yet consistent across the partnership. In addition, while belonging is referenced as a key ambition across the system, there is not yet a shared definition or agreed set of measures to assess children and*	*governance* *performance frameworks* *commissioning* *leadership behaviours* ***3. Co-production embedded as a core system principle*** *Co-production will be fully embedded across design, delivery and evaluation, ensuring:* *Families and young people are involved **early and meaningfully in decision-making*** *Engagement is:* *planned* *structured* *aligned to reform priorities* *“You said, we did” becomes a routine and visible feature of system leadership* *This will strengthen:* *trust* *transparency* *system responsiveness* ***4. SENDIASS as a key system enabler*** *SENDIASS will be fully integrated into the system as:* *A **trusted, independent voice** for families* *A key contributor to **early resolution and support*** *A source of **system insight and feedback**, informing improvement* *The service will:* *support families earlier in their journey* *reduce escalation through effective advice and mediation* *contribute to system learning* ***5. Voice of children and young people embedded in decision-making*** *The system will ensure that CYP voice is:* ***systematically captured across all services and pathways*** *Clearly distinguished from parent and carer voice* *Routinely fed into:* *governance* *service design* *performance and evaluation* *This will ensure that:* *services are shaped by what matters most to children and young people* *their experiences directly inform system improvement* ***6. Strong early resolution and mediation culture*** *Dispute resolution will become:* *earlier*

	young people's experience of belonging or to use this consistently to drive improvement.	• *more consistent*
		• *more transparent*
		The system will:
		• *prioritise **early problem-solving and resolution***
		• *reduce reliance on formal escalation processes*
		• *improve the experience of families through clearer communication and timely response*
		This will contribute to:
		• *improved trust*
		• *fewer disputes*
		• *better relationships between families and services*
		7. Culture, data and accountability fully aligned
		Inclusive culture and behaviours will be reinforced through:
		• *clear performance metrics*
		• *shared data and insight*
		• *governance accountability*
		The system will:
		• *routinely monitor:*
		  ○ *inclusion outcomes (attendance, exclusions, AP use)*
		  ○ *experiences of families and CYP*
		  ○ *variation across settings*
		• *use this information to:*
		  ○ *challenge*
		  ○ *support*
		  ○ *improve practice*
		*This will ensure that culture is not just stated, but **actively driven and sustained through the system**.*
		8. A confident, skilled and supported workforce
		The workforce will operate with:
		• *a **shared language and understanding of inclusion***
		• *increased confidence in:*
		  ○ *early intervention*
		  ○ *meeting diverse needs*
		• *access to ongoing development through:*
		  ○ *Experts at Hand*
		  ○ *SEND Centre of Excellence*
		  ○ *peer learning and locality collaboration*
		This will enable:
		• *more consistent and high-quality practice*
		• *reduced variability across settings*
		• *sustainable system improvement*
		Belonging
		In Wokingham, belonging means that children and young people with SEND:

		• *Feel included, valued and understood within their school, setting or community* • *Are able to attend and participate consistently* • *Experience relationships and environments that support their identity and needs* *Belonging will be measured through a combination of lived experience data (child/young person voice), participation indicators, and system-level inclusion measures.*

Encouraging inclusive culture and behaviours (inc Belonging) - Success Measures

Measure Type	Partnership Measure	Metric	Year 1 (where are we now)	Year 3 (where will we be)	Assumptions/Notes
Earlier Inclusive Practice	No of settings adopting OAP		n/a	100%	Introducing Peer Review which will be used as a metric to monitor OAP adoption
Lived Experience	Parent staff confidence	Do you feel your child's education setting is inclusive	84%	95%	Send Voices Survey 2025 for the Year 1 (where are we now). Included any Yes response
Belonging	Belonging	Children with SEND feel welcomed at their education setting	72%	95%	Send Voices Survey 2025 for the Year 1 (where are we now). % feeling welcomed
Lived Experience	Parent feedback	Overall Rating for SEND in Wokingham	2.69	4.00	Send Voices Survey 2025 for the Year 1 (where are we now). Overall Rating out of 5
Inclusive Practice	Settings accessing EAH		n/a	100%	Reporting will be developed to monitor

Enablers		
Enablers *E.g.* *Capital – investment strategy across EY, mainstream, FE* *Workforce* *Data/digital systems*	***Workforce:*** *fragile capacity and uneven confidence.* ***Data & insight:*** *fragmented, retrospective.* ***Capital:*** *strong strategy, delivery underway.* ***Commissioning:*** *strengthening but not fully aligned.* ***Governance & QA:*** *improving but inconsistent grip.* ***Culture & leadership:*** *committed but uneven.*	***Workforce:*** *stabilised, growing pipelines and supervision.* • *SEND Centre of Excellence across the Partnership embedded as the system mechanism for supervision, learning and sustainability* • *Assistant and trainee roles with clear progression into qualified specialist roles* • *Targeted development that builds mainstream confidence and capability, linked to long-term sufficiency* ***Data & insight:*** *shared, predictive and decision-driving* • *A single, shared data and insight framework underpinning all decision-making* • *Baseline datasets and dashboards tracking variation, demand and escalation* • *Performance data combined with lived experience to target support and reduce variation.* ***Capital:*** *inclusive mainstream sufficiency delivered.* • *Over £13.2m of Council borrowing, building on the existing £9.7m programme with a further £11.4m approved* • *Nine primary and six secondary inclusion bases, two new special free schools and Post-16 SEND hubs* • *Around 454 new specialist places, with an Inclusion Base in each of the seven primary planning areas* ***Commissioning:*** *aligned, test-and-learn and outcome-focused.*

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- *A local authority-led model, jointly commissioned with the ICB*
- *Robust contract and SLA setting out capacity, standards, data and quality assurance*
- *Commissioning frameworks aligned to system priorities, outcomes and value for money*

Governance & QA: *strong grip and assurance.*
Culture & leadership: *inclusive behaviours embedded system-wide.*

Developing our Success Measures
Core Minimum Requirement – CMR8

The development of our success measures has been undertaken as a structured, partnership-wide process, informed directly by DfE adviser feedback and grounded in co-production across education, health, care and parent/carer representation.
The partnership came together through a dedicated workshop refine and agree the approach to measuring success.
This session brought together system leaders, practitioners and partners to:

- *build a shared understanding of what success should look like*
- *co-produce a set of meaningful, outcome-focused measures*

The partnership adopted a structured outcomes-based accountability approach, supported by external expertise, to ensure measures are both robust and rooted in lived experience. This included working through a clear five-step method:

- *Defining what success looks and feels like for children and young people, families and settings*
- *Identifying key activities and delivery outputs across the reform programme*
- *Determining how quality will be assessed (e.g. timeliness, experience, confidence)*
- *Establishing impact measures focused on whether anyone is better off*
- *Developing a clear Data Development Agenda where measures require further refinement or new data collection*

A core part of the process involved interactive, partnership-wide workshops, where stakeholders collectively defined success from multiple perspectives. This ensured that success measures were not solely system-driven, but reflected:

- *improved experiences and outcomes for children and young people*
- *increased confidence and trust from families*
- *strengthened capability and consistency within education settings and providers*

Through this process, partners identified a broad range of possible indicators and then worked collectively to refine these into:

- *a small number of headline measures (for strategic oversight and public reporting)*

Activity/ Area	How much?	How well?	What impact?
Universal offer/ OAP	No. of settings adopting OAP. Access to OAP training.	Audits of provision/ QA Training feedback/ school feedback.	Parent/ staff confidenc QA of EHCNA requests
Strengthening partnership – engagement	Co-production/ engagement sessions	Post-event feedback	Parent feedback (being involved/ listened to) You said/ we did
Sufficiency/ place planning	No. inclusion/ specialist bases set-up No. of pupils accessing bases	Audits of provision	Attendance % children attending mainstream Travel time Costs
Experts at Hand	No. of MAIC sessions/ CYP discussions. Settings accessing EAH Coaching/ peer support for school staff Training sessions.	Staff feedback Quality assurance Session/ training evaluations.	EHCP requests Part-time timetables Attendance Exclusions/ Suspensio Staff confidence Parent confidence

****Below is a copy of our Success Measures with Metrics, current performance and targets, this is also added as a separate Excel file to aid better visibility****

• *a wider set of secondary measures (to support programme management and delivery)* • *a Data Development Agenda, recognising where further work is required to strengthen data quality, consistency and availability* *The partnership also agreed that success measures must:* • *balance quantitative data (e.g. attendance, exclusions, EHCP demand)* • *with qualitative insight (e.g. parent/carer feedback, children and young people's voice, staff confidence)* • *and demonstrate a clear line of sight from activity → quality → impact* *This co-produced approach ensures that success measures are:* • *aligned to the overall reform vision and theory of change* • *rooted in real outcomes rather than process measures* • *reflective of whole-system ownership and accountability* • *sufficiently robust to support ongoing governance, assurance and DfE monitoring* *As the programme moves into delivery, these measures will be further refined through:* • *baseline development* • *regular partnership review* • *and iterative learning through implementation* *This approach ensures that the SEND Reform Plan is not only ambitious in intent, but also clear, measurable and accountable in delivery.* *Included below is a copy of the Success Measures with Metrics/current performance and targets. Note there is an Excel version attached to the submission which enables better visibility of metrics.*	

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****Below is a copy of our Success Measures, this is also added as a separate Excel file to aid better visibility****

	Measure Type	Partnership Measure	Metric	Year 1 (where are we now)	Year 3 (where will we be)	Assumptions/Notes
Universal/OAP	Earlier Inclusive Practice	No of settings adopting OAP		n/a	100%	Introducing Peer Review which will be used as a metric to monitor OAP adoption
	System Performance	Access to OAP training	Number of settings accessing OAP Training	n/a	90%	Not currently recorded, will be recorded going forward
	System Performance	Audits of provision/QA	No. meeting or exceeding Audit Quality against agreed standard	n/a	90%	Introducing Peer Review which will be used as a metric to monitor quality of provision/OAP Adoption
	Lived Experience	Training/School Feedback	Positive Training Feedback	n/a	90%	SEND Centre of Excellence co-design will monitor
	Lived Experience	Parent staff confidence	Do you feel your child's education setting is inclusive	84%	95%	Send Voices Survey 2025 for the Year 1 (where are we now). Included any Yes response
	Belonging	Belonging	Children with SEND feel welcomed at their education setting	72%	95%	Send Voices Survey 2025 for the Year 1 (where are we now). % feeling welcomed
	Earlier Inclusive Practice	QA of EHCNA	% of EHCNA requests approved at first submission.	57%	80%	2025 Calendar for Year 1. Less EHCNA requests coming through, however of those that do come through, increase in first time acceptance rate due to better quality submission (evidence of graduated response)
Strengthening Partnership Engagement	Lived Experience	Parent feedback	Overall Rating for SEND in Wokingham	2.69	4.00	Send Voices Survey 2025 for the Year 1 (where are we now). Overall Rating out of 5
	System Performance	You said we did	Number of you said/we did actions recorded/published	tbc	tbc	Metric to be co-produced with Partnership
Sufficiency Place Planning	Inclusive Practice	No. inclusion/specialist bases	Number of Inclusion bases operational	85	320	No. spaces live June 26
	Inclusive Practice	No. pupils accessing inclusion/specialist bases	No. pupils accessing inclusion/specialist bases	68	298	No. spaces utilised June 26
	System Performance	WBC Utilisation of Specialist Spaces	% of commissioned places filled by WBC children	68%	90%	
	Inclusive Practice	% children not in WBC provision	% of children accessing non Wokingham Maintained Settings	32.00%	20.00%	June 2026 % of children with EHCP that are not in a Wokingham maintained setting
	Proxy Outcome	Placement Stability		tbc	tbc	Data quality cleanse underway.
	System Performance	Audits of provision	% settings with signed SLA/Contract in place	80% SLA in place	100%	Each setting will have a contract/SLA which details a set of KPIs. Some will be setting specific and some will be collected across all settings to give a borough wide data set/heat map for the borough on impact against key KPIs
	System Performance	Audits of provision	% settings meeting >80% of agreed KPIs	N/A	85%	100% of providers submit quality-assured annual reports, with ≥80% demonstrating evidenced positive impact (Green), and 100% of identified improvements delivered within agreed timescales and informing commissioning decisions.
	Outcome	Attendance	% attendance of children with EHCP and SEN Support	90%	tbc	% attendance with EHCP and SEN Support. . Target to be agreed through WBEP.
	Inclusive Practice	% Children Mainstream	% Children attending Mainstream Provision	58%	68%	Jan 2026. Includes all mainstream educated with EHCP (inc inclusion & resource bases and General FE P16)
	Outcome	Travel Time	Assumption using HTST EHCP	12.06	<10	This is a measure of the average journey time for EHCP children in receipt of HTST assistance. It assumes an average journey time of 2-minutes-per-mile. At present, the average one-way journey length is 6.03 miles, with a target to reduce this below 5 miles within 3 years.
	System Performance	Costs	Average costs provision	£23,775	£23,965	
Experts at Hand	System Performance	No. of MAIC sessions/CYP discussions	No of MAIC sessions/ year	21	tbc	Current 25/26. Format of MAIC will change as per Experts at Hand plan. Co-design will determine future target.
	Inclusive Practice	No. of MAIC sessions/CYP discussions	Number of Settings Attending	76%	100%	Current 25/26. Format of MAIC will change as per Experts at Hand plan
	Inclusive Practice	Settings accessing EAH		n/a	100%	Reporting will be developed to monitor
	Inclusive Practice	Coaching/peer support for setting staff		tbc	tbc	Introducing Peer Review which will be used as a metric to monitor coaching/peer support
	Lived Experience	Staff feedback		tbc	tbc	SEND Centre of Excellence co-design will determine measure
	System Performance	Quality assurance		tbc	tbc	SEND Centre of Excellence co-design will determine measure
	Lived Experience	Session/training evaluations		tbc	tbc	SEND Centre of Excellence co-design will determine measure
	Earlier Inclusive Practice	EHCP Requests	No. of EHCP requests	414	380	Calendar year 2025
	Inclusive Practice	Part-time timetables	No. children on Part-time Timetables with EHCP & SEN Support	208	187	Number of children on a PTT as at April 26 for children with EHCP & SEN Support
	Outcome	Overall School Absence	% absence for children with SEND	9.70%	tbc	Autumn 25-26 (Sept-Dec25) school absence for children with SEND. Target to be agreed through WBEP.
	Outcome	Exclusions	% exclusions for children with SEN or EHCP	0.20%	0.00%	% of exclusions for academic year 24/25 for children with sen or ehcp
	Outcome	Suspensions	% Suspensions for children with SEN or EHCP	21.90%	10.00%	% of suspension for academic year 24/25 for children with sen or ehcp
	Lived Experience	Staff Confidence		tbc	tbc	SEND Centre of Excellence co-design will determine measure
	Lived Experience	Parent Confidence	How well CYPs needs are being met by Education/Health/Social Care	25%	75%	SEND Voices 2025 survey. Q15. those met quite well/very well across all 3 services
Progress & Preparation for Adulthood	Outcomes	% of YP with EHCP aged 16-25 in Education, employment or training		73%	tbc	As at February 2026. Target will be agreed through the Partnership
		% learners who successfully sustain their placement for at least two terms				Data available, metric under development
		% of YP progressing to a higher level course, supported internship				Data available, metric under development
	Outcomes	SATS for Children with EHCP (KS2 RWM)		7%	tbc	2025 SATS for children with EHCP (KS2 RWM). National 9%. Target to be agreed through WBEP.
	Outcomes	SATS for Children with SEN Support (KS2 RWM)		36%	tbc	2025 SATS for children with SEN Support (KS2 RWM). National 28%. Target to be agreed through WBEP.
	Outcomes	Attainment 8 score for YP with EHCP		14.7	tbc	2025 Attainment 8 with EHCP (DfE Stats Publication) National 14.8. Target to be agreed through WBEP.
	Outcomes	Attainment 8 score for YP with SEN Support		41.2	tbc	2025 Attainment 8 with SEN Support (DfE Stats Publication) National 33.7. Target to be agreed through WBEP.

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.'*

Max word 250, current 250

Wokingham's reform strategy is grounded in a shared partnership change story informed by the Local Partnership Maturity Assessment. This assessment identified strong commitment and improving collaboration, alongside persistent challenges: fragmented access to support, inconsistent inclusion across settings, late escalation to statutory routes, workforce fragility and limited system-wide use of data and insight. The strategy therefore focuses on shifting the system from reactive, specialist-led intervention to earlier, local and inclusive support that is jointly owned across education, health and social care.

The partnership's theory of change is built around four connected levers. First, strengthening inclusive mainstream practice so that more needs are met confidently through clear expectations, Ordinarily Available Provision, peer learning and quality assurance. Second, redesigning access to specialist expertise through a fully-fledged Experts at Hand model, providing planned, relational, multi-agency support to early years, schools and further education providers, including those attended out of borough, enabling needs to be identified and addressed earlier without defaulting to statutory assessment. Third, shifting system leadership from local authority-led delivery to shared system stewardship, with clear decision-rights, joint accountability and embedded co-production with parent carers and children and young people. Fourth, reinforcing inclusive culture and behaviours by aligning workforce development, commissioning, funding and governance to reward early intervention, equity and value for money rather than late escalation.

These levers are enabled through aligned workforce planning, including the SEND Centre of Excellence, a shared data and insight function to support timely decision making, a mainstream-led capital sufficiency strategy, and strengthened commissioning and assurance across the partnership.

4. **Please upload a completed copy of the Local Partnership Maturity Assessment Tool.**

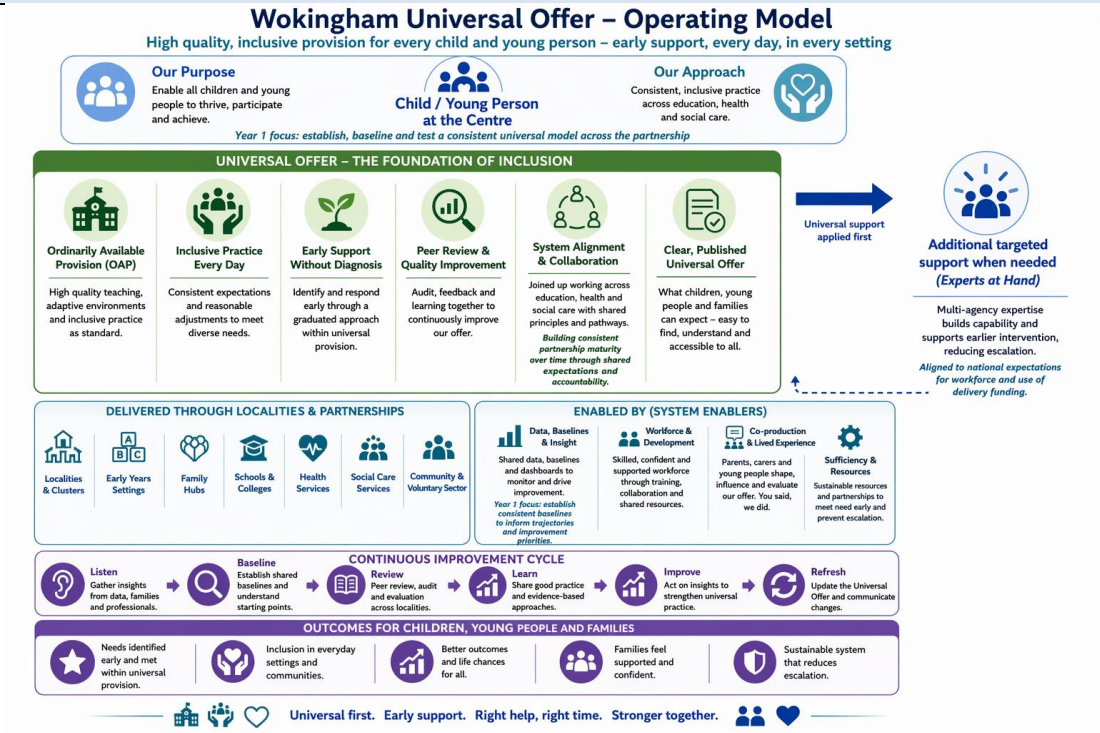
   INSERT DOCUMENT UPLOAD LINK

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.

   You can insert or upload supporting documents including graphics/visuals that illustrate your data trajectory.

Local roadmap for the next 3 years	2026/27	2027/28	2028/29
Strengthening inclusion across education settings			
			
Universal Offer *Core Minimum Requirement – CMR20* *Outcome* *By the end of 2026–27, the local area partnership will have a clearly defined, consistently applied universal SEND offer across education, health and social care. This will set out:*	***Establish, Baseline and Build Confidence*** *Year 1 focuses on establishing the Universal Offer as a credible, jointly owned foundation, with a strong emphasis on clarity, consistency and shared baselines across the partnership.* *Recognising variation in current system maturity, the partnership will take a test-and-learn approach,*	***Scale, Embed and Drive Consistency*** *Year 2 focuses on embedding the Universal Offer consistently across all settings, strengthening workforce capability and ensuring that practice is aligned across education, health and care.* *Key milestones*	***Sustain, Optimise and Deliver Impact*** *Year 3 focuses on optimising the model, aligning to national standards and demonstrating measurable impact on outcomes and system sustainability.* *Key milestones*

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• *what children, young people and families can expect without a diagnosis or EHCP* • *what schools and settings are reasonably expected to provide and access* • *how universal practice is quality-assured, supported and improved through audit, action planning and peer learning* • *How and when education settings should engage Experts at Hand* *The universal offer will act as the primary mechanism for reducing avoidable escalation, improving inclusion in mainstream, and building trust, transparency and shared accountability across the system.* *.* *Success measure* *Progress will be measured through a combination of established baseline metrics and new indicators developed through this work:* *Baseline position (Q2):* • *Variation in SEN Support rates and EHCP prevalence across education settings (school census)* • *Attendance, suspension, exclusion and part-time timetable rates for CYP with SEND* • *Parent/carer confidence baseline (existing surveys and PCF feedback)* *Process and implementation measures:* • *Audit scores highlighting strengths and development areas for individual education settings* • *Publication and adoption of a refreshed multi-agency Ordinarily Available Provision (OAP)* • *% of schools/settings engaged in self-audit and peer review activity* • *% of settings with inclusion strategies aligned to OAP expectations* *Reduction in variance between education settings in SEN Support and EHCP rates* • *Evidence via audit process of improved alignment to agreed universal expectations* *Outcome measures (trajectory emerging through Year 1):* • *Improved attendance and reduced exclusions for CYP with SEND*	*ensuring that delivery is grounded in real evidence and co-produced with partners.* *Key milestones* *By the end of 2026–27, the partnership will have:* • *Published a multi-agency Ordinarily Available Provision (OAP)* • *Agreed non-negotiable universal expectations for inclusive practice* • *Established a shared baseline dataset and performance dashboard across education, health and care* • *Built on existing evidence-based approaches currently used e.g. ELKLAN, Therapeutic Thinking and NEN* • *Agree and pilot a speech and language evidence-based approach e.g. ELSEC or NELI* • *Designed and tested an audit process for education settings to identify strengths, areas for development and improvement* • *Rolled out the audit and action planning process to at least 50% of education settings* • *Designed and launched a coaching programme to support education settings with next steps following their engagement with the audit process* • *Launched the Universal Offer and implementation guidance* • *Established locality-based delivery and communities of practice* • *Developed and communicated a shared Experts at Hand model, with joint commissioning arrangements progressing* • *All settings will publish an Inclusion Strategy aligned to the Ordinarily Available Provision (OAP) by December 2026, with implementation monitored through audit and peer review* *Trajectory and leading indicators* *Year 1 will focus on establishing baselines and early indicators, rather than fixed outcome targets.* *Indicators will include:* • *Completion of baseline measures across key metrics* • *Early reduction in variation between education settings*	• *Universal Offer adopted across all settings* • *Expertise is built in local education settings, who subsequently support other education settings through a Deputy Area SENCO model* • *Audit and action planning processes are embedded and developed across all education settings* • *Peer review system designed and introduced across all localities* • *All settings have live and aligned inclusion strategies* • *EAH model operational at scale, aligned to demand and need* • *Data and insight embedded in routine governance and decision-making* *Trajectory and leading indicators* • *Sustained improvement of universal inclusive practice and provision at SEN Support* • *Reduction in variation across education settings and clusters* • *Reduction in exclusions, suspensions and part-time timetables* • *Improved mainstream retention of CYP* • *Emerging impact on EHCP demand trajectory*	• *Full embedding of Universal Offer and audit and action planning process and evidence-based approaches* • *Established peer review model* • *Alignment of local system with national SEND standards* • *Mature integration of data, practice and lived experience insight* • *Sustained co-production with families and young people* • *Fully embedded continuous improvement cycle* *Trajectory and outcomes* *By Year 3, the partnership expects:* • *Consistently high-quality inclusive universal practice across all settings* • *Reduced reliance on statutory processes for meeting need* • *Improved outcomes for children and young people with SEND* • *Increased confidence from families and professionals* • *A more financially sustainable system, with reduced escalation*

• *Improved parent/carer and CYP confidence in early support* • *Improved scores on school audits* • *Increased confidence in setting staff* *How this connects to the wider reform programme* • *The Universal Offer provides the foundation for Experts at Hand* • *Audit, coaching, action planning, peer review and clearer OAP expectations help reduce avoidable specialist demand* • *Data and lived experience feedback keep the model responsive* • *Year 1 focuses on building and testing a credible model to support confident scaling in Years 2–*	• *Engagement with audit activity and action planning* • *Improved confidence among education settings and families* • *These interventions will be monitored through their impact on "Belonging" measures, including attendance, exclusions, and CYP-reported experience.*		

Inclusive Provision/Alternative Provision
Core Minimum Requirement – CMR4, CMR7, CMR8, CMR20
 	
The overarching aim of the three-tier Alternative Provision (AP) strategy within the SEND Reform Plan is to strengthen inclusion and improve outcomes by expanding the graduated response, specifically by developing a coherent bridge between the existing outreach offer (Tier 1) and the statutory provision (Tier 3). This enhanced Tier 2 offer will provide flexible, short-term, targeted in-reach support—delivered within mainstream settings or off-site where appropriate, but with a strong link to the child's school—to increase and sustain belonging, engagement, and inclusion. Over time, this approach is intended to reduce reliance on Tier 3 statutory provision by intervening earlier and more effectively. To achieve this, a period of "front-loaded" investment will be required to maintain and stabilise current Tier 3 capacity while simultaneously building sufficient Tier 2 provision to meet emerging need and prevent escalation. This dual-track approach will ensure that the needs of children currently in the system continue to be met, while creating additional capacity for enhanced early intervention and targeted support. The anticipated impact over a 3–5 year period is a measurable reduction in the commissioning of PRU places, particularly for pupils at risk of permanent exclusion (PEX) and those supported under Section 19, as more children are successfully supported within inclusive, mainstream-aligned pathways.
	• *Establish and launch a borough-wide 3-tier AP model, clearly defining universal, targeted and specialist support and aligning this to school delivery.*
	• *Deliver initial AP capacity building in mainstream education settings through:*
	  ○ *APDF capital funding to develop in-house alternative provision in secondary schools*
	  ○ *IIF funding to strengthen early intervention and inclusion provision in primary schools*
	• *Launch the Foundry early intervention model (tier 2 in 3 tier model) aimed at delivering better inclusivity in mainstream, providing enhanced in-reach, outreach and time-limited interventions to support pupils at Tier 2 and prevent escalation.*		

3 tiers: *1 – universal support. Mainstream or mainstream adapted provision.* *2 – targeted support.* *Short-term intervention.* *3 - specialist support.* *Transitional Placements (statutory offer section 19 and PEX).* *Develop inclusion provision/alternative provision offer within all WBC secondary schools through the alternative provision development fund (APDF) to support tier 1 and 2 of the AP model, which enables education settings to deliver AP in or alongside mainstream education.* *Develop provision within all WBC primary schools through the inclusion innovation fund (IIF) to support tier 1 and 2 of the AP model, which enables education settings to deliver AP in or alongside mainstream education.* *Development of 'bridge provision' which links the existing outreach offer and the statutory offer providing significant additional in-reach, outreach and specialist support programmes and capacity in tier 1 and 2 delivered by Foundry College and part of the E@H model to enable more support at tier 1 and 2 and prevent escalation of need to tier 3/statutory support and provision.* *Reduction of tier 3 support, due to earlier intervention and higher reintegration rates. Step up and step down with support for the education settings as well as provision for individual pupils to improve reintegration.*			

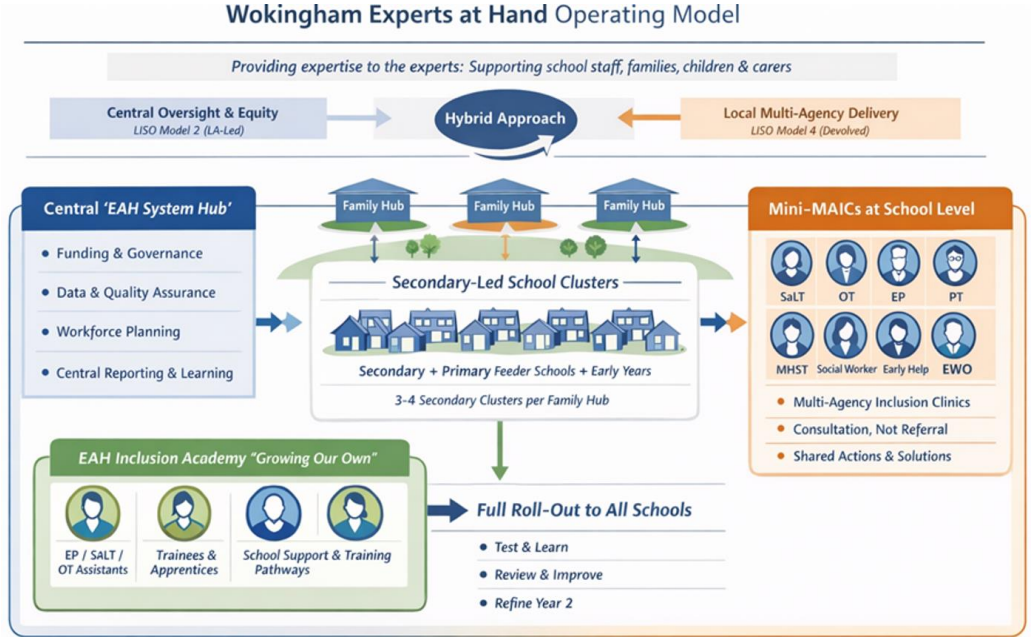
Localities
Core Minimum Requirement – CMR7, CMR8, CMR27, CMR28, CMR29,CMR30, CMR34
	Localities model
	Design and Co-Production
	● *Co-produce a Localities model with education, health, care and parent carer representatives, based on agreed principles:*
	  • *Organised around the flow of children across phases*
	  • *Secondary school–anchored clusters*
	  • *Alignment to Family Hubs*
	  • *Manageable locality size with shared accountability*
	  • *Agreed locality-level metrics*
	Initial Implementation
		Localities Model
		Embedding Locality Working
		● *Localities operate as the core delivery model for inclusion, early intervention and system support*
		● *Strengthen secondary anchor role, ensuring accountability for:*
		  • *Transition outcomes*
		  • *Inclusion across feeder primaries and early years*
		Consistency and Shared Accountability
		● *Embed expectation that all partners:*
		  • *Contribute actively to locality planning and delivery*
			Localities Model
			Mature Locality System
			● *Localities operate as a fully embedded system structure, with:*
			  • *Strong, distributed leadership*
			  • *Clear shared accountability across partners*
			● *Education settings routinely take responsibility for outcomes across the locality, not just within their own setting*
			● *Sustained Workforce and Practice*
			Development

	• *Establish locality clusters with identified leadership (secondary anchor schools and system leaders)*
	• *Define clear roles and responsibilities for:*
	  • *Education settings across all phases*
	  • *Health and care partners*
	  • *Locality leads*
	• *Begin embedding expectation that education settings take shared responsibility for transitions and outcomes beyond their own setting*
	Early Delivery and Testing
	• *Launch pilot locality working, including:*
	  • *Regular locality meetings*
	  • *Joint problem-solving on inclusion and transitions*
	  • *Alignment with Universal Offer and Experts at Hand delivery*
	• *Agree and implement an initial set of locality metrics, including:*
	  • *Inclusion consistency*
	  • *SEN Support identification*
	  • *Attendance and exclusion patterns*
		• *Take shared ownership of outcomes across the system*
		• *Use locality structure to:*
		  • *Address variation between settings*
		  • *Support education settings with greatest need*
		Integration with Core Workstreams
		• *Fully align locality working with:*
		  • *Universal Offer implementation*
		  • *Experts at Hand delivery*
		  • *Co-production and SENDIASS insight*
		• *Localities become the primary mechanism for delivering early intervention and preventing escalation*
		Embedding Locality Governance and Accountability
		• *Implement a formal Localities governance framework, ensuring clear accountability and oversight at locality level, including:*
		  • *Defined governance structure linking locality clusters to partnership boards*
		  • *Named locality leads (secondary anchors and system partners) with responsibility for coordination and delivery*
		  • *Clear escalation routes for risks and issues from locality level into partnership governance*
		• *Introduce structured locality governance cycles, including:*
		  • *Regular locality meetings with multi-agency representation*
		  • *Termly locality performance reviews, aligned to agreed metrics*
		  • *Standardised reporting of progress, risks and improvement actions*
		• *Embed shared accountability for outcomes, ensuring:*
		  • *Education settings across phases take responsibility for transition outcomes and inclusion across the locality*
			• *Localities act as communities of practice, supporting:*
			  • *Continuous workforce development*
			  • *Peer challenge and improvement*
			• *Ongoing alignment with national Inclusion Standards*
			Integrated, Data-Driven System
			• *Locality metrics are:*
			  • *Fully embedded in system performance management*
			  • *Used to drive continuous improvement and strategic decision-making*
			• *Clear line of sight from locality performance to partnership governance*
			Impact on Outcomes
			• *Locality model demonstrably contributes to:*
			  • *Sustained reduction in variation between settings*
			  • *Improved early identification and SEN Support consistency*
			  • *Reduced reliance on specialist placements over time*
			  • *Improved experience of transitions across phases*

		• *Health, care and education partners contribute to joint planning and delivery*
		• *Align locality governance with Data & Insight systems, including:*
		  • *Use of locality-level dashboards to monitor variation and performance*
		  • *Routine analysis of data to inform targeted support and intervention*
		  • *Clear line of sight between locality performance and system-level decision-making*
		• *Strengthen co-production and transparency within governance, ensuring:*
		  • *Locality-level feedback from families (including PCF/SENDIASS insight) informs decision-making*
		  • *Progress and actions are communicated openly across the partnership*
		Data and Performance
		• *Refine locality metrics and introduce regular performance review cycles, including:*
		  • *Termly data review at locality level*
		  • *Escalation of risks through partnership governance*
		• *Embed use of data to drive targeted support and improvement activity*	

Early Years *Core Minimum Requirement – CMR7, CMR8, CMR25, CMR26, CMR34*	Co-produce a partnership-wide Early Years Foundation Stage framework, demonstrating: • clear expectations for inclusive practice with a graduated approach to meet needs • explicit definition of "what good looks like" prior to escalation • contribution from MATs, early years providers, and PCF Establish a baseline Best Start dataset and variation analysis, including: • early years identification patterns • SEN support variation across settings • GLD variation across settings Continue to refine EY–Primary transition network,	EYFS Framework fully adopted and embedded across all EYFS providers Reduced variation in practice across schools and early years with enhanced transition, and consistent practice evident across PVI and school settings in the EYFS Expanded local SEND provision in early years Consistent use of evidence based interventions across the EYFS regarding Speech Language and Communication development	Full alignment to National Inclusion Standards Sustained sufficiency across early years provision Highly consistent inclusive practice across system

	featuring: • structured transition meetings • shared information frameworks with clear information sharing protocols • early involvement of EAH practitioners where appropriate Complete a full sufficiency assessment for early years provision, including: • number and distribution of universal early years places • availability and distribution of specialist SEND early years provision • identification of gaps for children with complex and emerging needs Develop and begin implementing a targeted Early Years Sufficiency Action Plan, including: • expansion of inclusion capacity within mainstream early years settings • commissioning approaches to address gaps if these are identified (including use of partners) • workforce development to support inclusion • alignment with Best Start Family Hubs and Inclusion Practitioners		

Access to specialist support and local placements			
			
Experts at Hand *Core Minimum Requirement – CMR7, CMR8*	***Mobilise, launch and begin delivery of E@H*** *In Year 1 (2026–27), alongside mobilisation and commissioning, the partnership will begin live delivery of Experts at Hand. This will include providing settings with access to consultation, modelling, group-based intervention and workforce development activity across*	***Scale, standardise and embed*** *By Year 2, delivery will move from targeted to consistent coverage across all settings, and by Year 3 EAH will operate at scale as a routine component of the SEND system.*	***Optimise, sustain and evidence impact*** *Primary purpose: move to a stable, high-confidence and sustainable operating model.* *1. Finalise the long-term jointly commissioned model.*

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	all localities, with initial delivery focused on priority cohorts and areas of need. *Establish the jointly commissioned model, agree the operating design, stand up Year 1 capacity safely, and begin delivery in a structured test-and-learn way.* *Joint commissioning and governance* 1. *Confirm WBC as lead commissioner and ICB as formal co-commissioner in the plan narrative and governance papers.* 2. *Finalise the Year 1 joint commissioning route through a formal partnership agreement (Section 75 / MOU) contract with co-commissioning schedule), ensuring:* ○ *governance cadence* ○ *escalation route* ○ *risk ownership* 3. *Produce a Year 1 service specification that explicitly defines:* ○ *scope* ○ *exclusions* ○ *additionality* ○ *relationship to universal, statutory and commissioned therapy pathways* 4. *Build clear contract reporting requirements for:* ○ *activity* ○ *timeliness* ○ *staffing* ○ *outcomes* ○ *quality / supervision* ○ *Wokingham-level reporting* 5. *Confirm legal / finance / IG routes and decision gateway by September 2026.* 6. *Put in place a separate oversight route so Experts at Hand performance can be monitored independently and not lost within wider therapy reporting.* *Service model access and delivery* 1. *Finalise the Wokingham definition of Experts at Hand as:* ○ *mainstream-facing* ○ *school-facing* ○ *cohort / theme / practice focused* ○ *not a new individual referral route* 2. *Design and publish a simple access route so education settings know:* ○ *when to use the Universal Offer*	*Primary purpose: move from mobilisation to broader implementation, deeper consistency and stronger system grip.* 1. *Extend E@H delivery across all agreed localities / clusters.* 2. *Embed termly planning cycles as business as usual.* 3. *Roll out a clear and consistent access model borough-wide.* 4. *Move from pilot KPI set to fully embedded dashboard and reporting.* 5. *Formalise the medium-term commissioning route beyond transition arrangements.* 6. *Reduce duplication between existing therapy, outreach and E@H pathways.* 7. *Strengthen early years and post-16 reach.* 8. *Embed the SEND Centre of Excellence as an active workforce pipeline.* 9. *Use Year 1 data to rebalance workforce mix and capacity.* 10. *Demonstrate early impact on:* • *school confidence* • *uptake / reach* • *quality of support* • *reduction in avoidable escalation* 11. *Deploy Advanced SALT Practitioner support across priority cohorts (e.g. communication and interaction needs), including outreach, training and case consultation for settings.*	2. *Demonstrate that E@H is a core part of the Wokingham inclusive system.* 3. *Show strong read-across to:* ○ *Universal Offer* ○ *Sufficiency* ○ *AP model* ○ *Post-16 pathways* ○ *attendance / behaviour / inclusion outcomes* 4. *Optimise workforce model and succession pipeline.* 5. *Demonstrate clear additionality and value for money.* 6. *Evidence impact through:* ○ *earlier support* ○ *reduced variation* ○ *better professional confidence* ○ *fewer avoidable escalations* ○ *stronger local mainstream inclusion*

	○ *when issues should be raised through E@H planning / cluster activity* ○ *when children need existing specialist / statutory pathways* 3. *Define core activity types:* ○ *consultation* ○ *observation and environmental review* ○ *demonstration / modelling* ○ *short group / cohort intervention blocks* ○ *training and coaching* ○ *implementation follow-up* ○ *pathway advice* 4. *Specify what education settings should experience termly / per cycle.* 5. *Finalise the relationship between:* ○ *Universal Offer* ○ *E@H* ○ *existing therapy pathways* ○ *EHCP provision* ○ *outreach* ○ *attendance / AP / inclusion pathways* 6. *Ensure the Local Offer and school-facing materials reflect this clearly.* 7. *In year 1, settings will begin to receive support through:* ○ *consultation and advice sessions* ○ *observation and environmental review* ○ *modelling of inclusive practice* ○ *short group or cohort intervention blocks* ○ *workforce training and coaching structured follow-up to embed practice* *This activity will be delivered through locality cycles, ensuring that support is planned, consistent and equitable across settings, and focused on building sustainable capacity rather than individual casework* . *Universal Offer and early intervention integration* 1. *Explicitly align E@H to the co-produced Universal Offer, so E@H is described as a mechanism for embedding and strengthening it, not replacing it.* 2. *Build E@H around the biggest areas of pressure:* ○ *Autism* ○ *SLCN*		

	○ *SEMH* 3. *Include evidence-based approaches within the offer, especially:* ○ *ELSEC / language screening / communication-friendly approaches* ○ *autism support approaches* ○ *SEMH / relational / sensory-informed strategies* 4. *Define what E@H should add at universal and targeted level for these needs.* 5. *Agree how school self-audit / peer review / OAP quality assurance will identify where E@H support is most needed.* 6. *Link E@H directly to reducing exclusions, EBSA, AP use and avoidable escalation.* *Cluster / locality design and equitable access* 1. *Co-design the cluster / locality model with education settings, early years and post-16.* 2. *Agree:* ○ *relationship to Family Hubs* ○ *role of secondary anchors* ○ *place of PVIs and early years* ○ *role of out-of-area FE / post-16* 3. *Create explicit prioritisation principles so access is not skewed to the most proactive settings:* ○ *cluster-level review of need* ○ *use of data and locality intelligence* ○ *transparent criteria* ○ *borough moderation* 4. *Define the planning cycle for each cluster / mini-MAIC.* 5. *Establish how cluster learning feeds back to borough governance and the Universal Offer.* 6. *Pilot and deliver Experts at Hand support in agreed clusters, including consultation, modelling and group-based interventions, while ensuring all localities have a defined access route and are engaged in delivery and model development.* *Workforce and SEND Centre of Excellence* 1. *Confirm Year 1 workforce model across:* ○ *EP* ○ *SaLT* ○ *OT* ○ *specialist teaching / outreach* ○ *assistant roles* ○ *trainees / apprentices*		

	○ *programme / admin / data support* 2. *Finalise supervision arrangements and safe practice model.* 3. *Define the advanced practitioner / strategic clinical leadership function within the Year 1/2 design.* 4. *Formalise the SEND Centre of Excellence programme:* ○ *governance* ○ *curriculum* ○ *delivery model* ○ *partners / HEI links* ○ *supervisor capacity* ○ *progression routes* 5. *Recruit or align assistants and trainee roles early.* 6. *Recruit and mobilise an Advanced Speech and Language Therapy (SALT) Practitioner in Partnership with neighbouring LAs (Berkshire West) and embedded in the NHS as part of the Experts at Hand model to strengthen specialist advice, early intervention and support to mainstream settings.* 7. *Create a workforce sustainability plan for Years 2–3.* *This workforce model will enable the delivery of consultation, modelling, intervention and training activity across localities in Year 1, ensuring that sufficient capacity is in place to begin supporting settings directly.* *Data, outcomes and performance* 1. *Establish the Year 1 E@H baseline and performance dashboard.* 2. *Build a distinct dataset that can demonstrate:* ○ *E@H reach and activity* ○ *difference between E@H and existing pathways* ○ *timeliness* ○ *equity of access* ○ *outcomes and professional confidence* ○ *"Belonging" measures, including attendance, exclusions, and CYP-reported experience.* 3. *Link E@H metrics to wider system indicators:* ○ *SEN Support* ○ *EHCP demand*		

	○ *attendance* ○ *exclusions / suspensions* ○ *PTTs* ○ *EBSA* ○ *AP* ○ *local placements / escalation* 4. *Define KPI ownership, reporting cadence and thresholds.* 5. *Ensure Wokingham-level reporting is mandatory.* 6. *Produce quarterly learning / assurance reports.* *Early years and Best Start* 1. *Design the early years E@H model separately but linked to the same principles.* 2. *Align with Family Hubs and Best Start in Life work.* 3. *Use early language / early identification tools and environment support.* 4. *Clarify the role of maintained nurseries, school nurseries and PVIs.* 5. *Strengthen EY → primary transition through E@H and cluster/locality design.* *Post-16 and out-of-area access* 1. *Define how E@H operates for post-16 learners, including those in out-of-area mainstream FE settings.* 2. *Clarify access, partnership and information-sharing routes.* 3. *Ensure post-16 and transition pathways are incorporated into the joint commissioning model and data set.* *Year 1 end-state* *By the end of Year 1, Wokingham should have:* • *an agreed and partially operational Year 1 jointly commissioned E@H model* • *a clear service specification and access route* • *mobilised initial workforce capacity* • *established pilot/locality delivery in agreed clusters* • *baseline data and dashboard in place* • *a live co-production and school feedback mechanism* • *clear Year 2 scale / refinement decisions* • *demonstrable delivery of consultation, modelling, group-based intervention and workforce development activity to education settings and settings across localities*		

Inclusion Provision/Alternative Provision (as detailed above continued)	*Mobilisation, Testing and Early Implementation*
	• *Establish and launch a borough-wide 3-tier AP model, clearly defining universal, targeted and specialist support and aligning this to school delivery.*
	• *Deliver initial capacity building in mainstream education settings through:*
	  ○ *APDF funding to develop in-house alternative provision in secondary schools*
	  ○ *IIF funding to strengthen early intervention and inclusion provision in primary schools*
	• *Launch the Foundry early intervention model, providing enhanced in-reach, outreach and time-limited interventions to support pupils at Tier 2 and prevent escalation.*
	• *Begin implementation of in-house AP models, with:*
	  ○ *Secondary schools opening provision for their own pupils*
	  ○ *New delivery models tested and refined in practice*
	• *Embed a step up / step down approach across tiers, with clearer pathways into support and structured reintegration into mainstream education.*
	• *Establish data sharing and monitoring systems, including:*
	  ○ *LA-wide SEND and AP data shared with education settings*
	  ○ *Baseline tracking of demand, pupil journeys and escalation into Tier 3*
	• *Develop an initial understanding of system gaps and unmet need, including:*
	  ○ *Use of unregistered provision*
	  ○ *Missed opportunities for earlier intervention*
		Delivery Focus
		• *Expand APDF provision:*
		  ○ *Round 1 education settings begin opening access to other education settings*
		  ○ *Round 2 models fully operational and embedded*
		System Integration
		• *Fully integrate AP model with:*
		  ○ *Locality delivery model*
		  ○ *Experts at Hand*
		  ○ *Inclusion strategies across education settings*
		• *Strengthen market and system approach, including:*
		  ○ *Use of inclusion hubs*
		  ○ *Reduction in reliance on external/unregistered provision*
		Performance and Commissioning
		• *Deliver formal evaluation of all in-house AP models, including:*
		  ○ *Impact on escalation*
		  ○ *Reintegration rates*
		• *Begin phase two recommissioning, informed by:*
		  ○ *Demand trends*
		  ○ *System gaps*
			Delivery Focus
			• *Establish sustainable trading model between education settings for in-house AP provision*
			• *Ensure all education settings can access local, high-quality Tier 1–2 provision*
			System Maturity
			• *AP model fully embedded as part of:*
			  ○ *Universal Offer*
			  ○ *Locality model*
			  ○ *Early intervention system*
			• *Consistent use of:*
			  ○ *Step up / step down pathways*
			  ○ *Reintegration as standard practice*
			Evaluation and Impact
			• *Deliver full borough-wide evaluation, including:*
			  ○ *Impact on demand*
			  ○ *Pupil outcomes and progression*
			• *Evaluate impact of primary provision as cohorts transition to secondary*

Early Years *Core Minimum Requirement – CMR7, CMR8*	• *Map and analyse existing specialist support across the system, including access to EP, S&LT, OT & Health Visiting across pre-school.* • *Identify gaps in provision, particularly in early years and for most common need types* • *Design and implement an Experts at Hand model aligned to Universal Offer and Best Start,*	• *EAH scaled across all settings and aligned to locality delivery.* • *Improved access to specialist support at earlier stage* • *Embedded feedback loops ensuring that needs presented at EYs Support Panel shape development of*	• *Fully embedded early intervention model* • *Clear, consistent and supportive approach to inclusion across Wokingham's early years sector* • *Reduced reliance on EHCPs and specialist placements*

	ensuring: *• timely access to specialist support without reliance on EHCP* *• equitable access across settings (not dependent on individual setting capacity)* *• integration with existing commissioned services* • *Create an expanded Early Years Support panel to include consistent S&LT / OT / Health Visitor input.* • *Advice and consultation support to EYrs settings that refer into the EY Support panel.*	*appropriate training, expert support, provision & group consultation.*	

Post-16
Core Minimum Requirement – CMR8, CMR28, CMR29, CMR30
	Pathways and provision
	• *Finalise service specification, funding model and delivery arrangements for the Hub*
	• *Launch and embed the Post-16 SEND Hub*
	• *Map:*
	  ○ *Current provision*
	  ○ *Gaps (including re-engagement and SEN Support cohorts)*
	• *Develop and publish a clear, system-wide post-16 pathway framework*
	• *Establish re-engagement pathways, including:*
	  ○ *Confidence building*
	  ○ *Skills development*
	  ○ *Routes back into education/employment*
	
	Transitions and practice
	• *Embed transition planning from Year 9 onwards*
	• *Strengthen:*
	  ○ *Annual review expectations*
	  ○ *Multi-agency transition planning (including social care and health)*
	• *Introduce consistent approaches to:*
	  ○ *Transition into FE*
	  ○ *Progression beyond FE*
	
	Information and co-production
	• *Co-produce:*
	  ○ *A clear Post-16 OAP / options guide*
	  ○ *Improved Local Offer content*
	• *Deliver PFA engagement events for families and young people*
	• *Ensure information is:*
		Embedding and scaling
		• *Expand Hub provision and increase local sufficiency*
		• *Reduce reliance on out-of-area placements*
		• *Embed a fully operational graduated pathway system*
		• *Strengthen:*
		  ○ *Supported internships*
		  ○ *Employer engagement and labour market pathways*
		• *Develop consistent provider standards and expectations*
		• *Ensure mentoring and support is coordinated and linked to progression*
		• *Integrate:*
		  ○ *Adult Education*
		  ○ *Re-engagement provision for 19+ learners*
		• *Fully embed transition planning and system consistency across services*
			Optimise, sustain and evidence impact
			• *Achieve sufficiency across local provision, with all key gaps addressed (including SEN Support and re-engagement cohorts)*
			• *Deliver a mature, responsive pathway framework that is consistently applied across all partners*
			• *Ensure all young people have access to clearly defined, flexible pathways that allow movement between provision based on need*
			• *Embed re-engagement routes as a core offer, with clear progression into education, training or employment*
			• *Quality assure provision through regular review, outcomes tracking and provider accountability mechanisms*
			
			Transitions and practice
			
			• *Achieve consistently high-quality transition planning from Year 9 across 100% of cases*
			• *Ensure all annual reviews are timely, outcome-focused and clearly linked to Preparing for Adulthood (PfA) outcomes*
			• *Embed a fully integrated multi-agency transition model, with clear roles across education, health and social care*

	○ *Clear* ○ *Accessible* ○ *Consistent across partners* ***Employment and partnerships*** • *Strengthen supported internship pathway development* • *Expand employer engagement through:* ○ *Pan-Berkshire SEND Employment Partnership* ○ *Local employer networks* • *Increase:* ○ *Work experience opportunities* ○ *Vocational pathways* ***System and partnership*** • *Formalise:* ○ *Provider collaboration* ○ *Cross-border arrangements* • *Improve data flows on:* ○ *Participation* ○ *NEET risk* ○ *Progression outcomes*		• *Deliver seamless transitions into FE and beyond, evidenced by reduced drop-out and disruption* • *Establish destination-led planning as standard practice across all providers* ***Information and co-production*** • *Maintain and continuously improve a co-produced Post 16 options offer, informed by lived experience and feedback* • *Ensure the Local Offer is fully accessible, dynamic and routinely used by families and professionals* • *Embed co-production as business-as-usual, with young people and families shaping service design and review* • *Deliver an annual cycle of engagement, feedback and service refinement* • *Ensure all information is consistently understood and applied across the partnership* ***Employment and partnerships*** • *Achieve sustained growth in supported internships, with strong completion and employment outcomes* • *Embed employment as a primary outcome across all pathways* • *Establish long-term, sustainable employer partnerships, aligned to local labour market need* • *Ensure all young people access meaningful work experience and vocational opportunities* • *Strengthen transition into paid employment, apprenticeships and supported employment pathways*

			System and partnership • *Deliver a fully integrated partnership model with clear accountability, governance and shared outcomes* • *Achieve real-time, high-quality data sharing across partners, informing early intervention and planning* • *Demonstrate reduced NEET levels and improved participation rates for all SEND cohorts* • *Embed cross-border commissioning and planning arrangements to optimise provision and value for money* • *Use data to drive continuous improvement and strategic decision-making* ***Embedding impact and sustainability*** • *Evidence improved long-term outcomes, including education, employment, independence and wellbeing* • *Demonstrate reduced reliance on high-cost and out-of-area placements through strengthened local offer* • *Embed coordinated mentoring and support pathways linked directly to progression outcomes* • *Fully integrate Adult Services, Adult Education and 19+ re-engagement pathways into the SEND system*
Sufficiency and Place Planning	***Deliver planned capacity and strengthen local inclusion*** • *Deliver the first phase of the capital programme, including early years expansion, primary and secondary inclusion bases and the first Post-16 SEND Hub, increasing local capacity across all phases* • *Ensure each primary planning area has access to local inclusion base provision, reducing reliance on distant placements*	***Scale provision and rebalance the system*** • *Deliver further phases of inclusion base expansion across primary and secondary phases, increasing capacity in priority needs areas* • *Progress delivery of new special free school provision and early years specialist capacity,*	***Achieve a stable, locally sufficient system*** *Complete delivery of the capital programme, including special free schools, inclusion bases and Post-16 hubs* *Achieve a sustainable level of local specialist and inclusive provision, reducing reliance on high-cost external placements*

	• *Implement targeted expansion for ASD, SEMH, communication and language needs aligned to forecast demand* • *Begin delivery of specialist provision pipeline through special school expansion and free school mobilisation* • *Embed the use of sufficiency data (including travel mapping and need analysis) to drive commissioning decisions* • *Continue mainstream adaptations programme to improve accessibility, sensory environments and inclusive practice in education settings*	*addressing gaps for complex needs* • *Expand Post-16 SEND hubs and strengthen pathways to adulthood* • *Reduce out-of-borough placements by aligning new provision to areas of highest need and travel demand* • *Continue to rebalance the system towards mainstream inclusion, supported by enhanced local specialist outreach and expertise* • *Embed a fully responsive sufficiency model using real-time demand forecasting and placement tracking*	*Ensure that most children and young people access provision within or close to their local community* *Maintain sufficiency through dynamic planning, with regular review of demand, outcomes and placement trends* *Embed inclusive mainstream provision as the default offer, with specialist capacity targeted only where needed* *Demonstrate improved outcomes through reduced travel, improved placement stability and better access to suitable provision*

2026	2027	2028	2029
Expansion of Specialist EY Setting (16x places) 2x ASD Primary Resource Base (28x places) 2x SEMH Primary Resource Base (30x places) ASD Secondary Resource Base (25x places) C&L Secondary Resource Base (25x places) Post-16 Hub I (40x places)	Special School Expansion (28x places) ASD Primary Resource Base (21x places) C&L Primary Resource Base (21x places) ASD Secondary Resource Base (35x places) HI Secondary Resource Base (8x places)	New Specialist EY Setting (16x places) Early Help SEND Hub (General Provision) New Special Free School (120x places) Spencers Wood Primary School (incl. Resource Base) (14x places) SEMH Primary Resource Base (8x places) SEMH Secondary Resource Base (15x places) Post-16 Hub II (40x places)	Refurbished Special Free School (c.80x places) SEMH Secondary Resource Base (15x places) Post-16 Hub III (40x places)
Total Places = 164	**Total Places = 113**	**Total Places = 213**	**Total Places = 135**
			Programme Total = 625

System leadership, local partnership collaboration and co-production

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Partnership Governance *Core Minimum Requirement – CMR9, CMR31*	***Establish clear governance foundations and operational grip*** *1. Create a clear end-to-end governance framework* *In Year 1, the local area partnership will establish a clearly defined governance structure that links:* • *strategic leadership and sign-off* • *SEND reform programme oversight* • *workstream delivery* • *locality implementation* • *co-production and system feedback* *The SEND Local Reform Plan will be embedded as the single partnership delivery framework, so that all partners understand where decisions are made, how work is escalated, and how progress is monitored.* *This reflects the current draft, which already identifies the need to "embed the SEND Local Plan as the single partnership delivery framework" and "clarify decision-rights, escalation and accountability across partners".* *2. Clarify roles, responsibilities and decision-making* *A major Year 1 task will be to define who is accountable for what across the partnership. Although the adviser comments acknowledge that a helpful governance framework is in place, they also note concern that purpose, membership, cadence, decision rights and escalation routes are not yet fully fleshed out. Year 1 will therefore need to:* • *confirm the membership and role of the key strategic SEND board* • *define the relationship between strategic boards, reform programme boards and operational groups* • *make explicit the responsibilities of education, health, early years, FE, social care, commissioning and finance partners* • *ensure the named SRO role is visible and supported by clear operational leadership arrangements* *This should include a clear governance map that shows how all building blocks of the reform plan report through the system.* *3. Ensure representation is broad, explicit and meaningful* *The adviser comments are clear that the plan needs to show stronger evidence of formal representation from early years, schools, MATs and further education, and that membership should be more clearly articulated. In Year 1, governance arrangements will therefore be strengthened so that they visibly include:*	***Embed shared accountability and performance governance*** *1. Move from structure to active system accountability* *In Year 2, the focus will shift from creating governance arrangements to using them consistently to drive partnership behaviour and system improvement. Boards and locality structures should increasingly operate with:* • *stronger challenge* • *clearer ownership of actions* • *more consistent escalation of risks* • *active decision-making on priorities, resources and performance* *This means governance should begin to demonstrate mature collective accountability, rather than simply bringing partners together around updates.* *2. Localities become formal governance and performance units* *By Year 2, localities should be functioning as meaningful governance units with clear roles in:* • *tracking variation between settings* • *supporting transition pathways* • *coordinating inclusion activity* • *escalating risks or barriers* • *contributing to shared responsibility across phases* *Locality leads should report regularly into wider governance structures, and locality dashboards should be used to shape action and resource deployment. This aligns directly with the detailed locality governance content in the draft plan.* *3. Data becomes the routine basis for governance decisions* *Year 2 governance will be increasingly data-informed. Rather than using dashboards as supporting information, governance should routinely use shared data and insight to:* • *identify outliers and variation* • *challenge inconsistent practice*	***Sustain a mature, integrated governance model*** *1. Governance operates as a mature, aligned system* *By Year 3, Wokingham should have a mature partnership governance model that is:* • *clearly understood by all partners* • *aligned across strategic and locality levels* • *grounded in shared data and outcomes* • *capable of sustaining improvement over time* *It should provide clear line of sight from the reform vision to local delivery, and from system data to partnership decisions and action.* *2. Shared accountability is embedded as standard* *By this stage, governance should no longer rely on individual relationships or external pressure to maintain pace. Instead, shared accountability should be embedded so that:* • *education, health and care routinely act as one system* • *collective responsibility for SEND outcomes is standard* • *locality and system performance are jointly owned* • *accountability is consistent regardless of organisational change* *This is the mature state described in your governance strategy work earlier in the chat. It is also the logical endpoint of the governance strengthening work described in the plan.* *3. Locality governance is fully connected to system leadership* *By Year 3, locality governance should be fully embedded and connected to system leadership, with:* • *routine locality performance review* • *clear upward escalation*

	• *early years providers* • *schools and trusts* • *post-16 / FE representation, including out-of-area mainstream providers where relevant* • *health partners* • *social care and early help* • *Parent Carer Forum* • *children and young people's voice mechanisms* • *SENDIASS where appropriate* *This is not just about membership lists; it is about ensuring governance reflects the whole local SEND system and supports shared ownership of delivery.* *4. Establish locality governance as a delivery and accountability mechanism* *The draft plan and related work already point towards a locality/cluster model organised around child journeys, shared accountability and links to Family Hubs. In Year 1, governance will begin to extend beyond strategic boards into locality-level delivery and accountability structures. This will include:* • *agreeing the locality model and principles* • *identifying locality leads and anchor roles* • *clarifying how locality work reports into partnership governance* • *establishing escalation routes from localities to strategic boards* • *introducing locality-level performance discussions focused on variation, inclusion and transitions* *The aim in Year 1 is not full maturity, but to establish localities as genuine governance and delivery mechanisms rather than informal collaborative forums.* *5. Begin embedding shared data into governance* *Year 1 governance must be stronger because it is informed by better evidence. The plan already references baseline data, dashboards and variation analysis, and the adviser comments note that proposals for shared, high-quality data and joint dashboards are present. In Year 1, governance should therefore begin to routinely use:* • *baseline dashboards* • *inclusion and demand metrics* • *variation data across settings and localities* • *delivery progress across the reform workstreams* • *lived experience, complaints and feedback themes*	• *inform commissioning and resource decisions* • *prioritise intervention and support* *The adviser comments are clear that governance needs stronger links to assurance, success measures and target metrics. Year 2 should therefore be the point at which governance visibly uses these to monitor the reform programme.* *4. Stronger co-production governance and visibility of response* *In Year 2, co-production should be more fully integrated into governance and no longer dependent on a small number of forums or relationships. Boards should increasingly receive and act on:* • *structured family feedback themes* • *direct CYP insight* • *SENDIASS intelligence* • *evidence of response and change* *This should also include stronger public-facing accountability through regular "you said, we did" reporting and improved visibility of how governance decisions have been shaped by lived experience.* *5. Stronger partnership leadership across education and health* *By Year 2, governance should demonstrate more mature shared leadership across education and health, with clearer joint accountability for delivery and outcomes. This includes:* • *stronger alignment between commissioning and governance* • *more mature relationships across LA and ICB partners* • *clearer shared ownership of the main reform priorities* • *more explicit responsibility for joint delivery, rather than parallel accountability* *This is particularly important given the adviser emphasis on joint governance, shared accountability and partnership leadership as core requirements.* *6. Governance begins to evidence impact on outcomes*	• *strong links between local data and borough-wide decision-making* • *shared responsibility across settings and phases for inclusion and transitions* *At this point, localities should not only be supporting delivery, but actively shaping the wider system's response to emerging issues and inequalities.* *4. Governance is fully informed by data and lived experience* *Year 3 governance should combine:* • *predictive and shared data* • *family and CYP voice* • *SENDIASS insight* • *mediation and complaint themes* • *delivery and performance intelligence* *This integrated view should allow governance to proactively identify risks, act earlier and sustain a self-improving system. This is fully aligned to the adviser description of a future state where data and insight are shared, predictive and decision-driving, and co-production and governance are strongly connected.* *5. Strong governance supports long-term sustainability* *By the end of Year 3, governance should provide confidence that Wokingham can sustain its reform journey beyond the initial programme period. This means governance must be capable of:* • *holding partners to account for inclusive practice and outcomes* • *integrating new national standards or policy changes* • *maintaining focus on value for money and equity* • *continuing to use quality assurance, performance and lived experience together to drive improvement* *In other words, by Year 3 governance should be mature enough not only to oversee the system, but to help it keep improving.*

	This will begin to shift governance from a forum for updates to a forum for challenge, prioritisation and decision-making. *6. Integrate co-production into governance structures* *A Year 1 priority will be to ensure co-production is not treated as a parallel activity but flows directly into governance and decision-making. The current draft already describes monthly operational meetings with the Parent Carer Forum, termly family engagement sessions and "you said, we did" approaches.* *Governance in Year 1 should formalise how:* • *Parent Carer Forum feedback is escalated into boards* • *children and young people's views are captured and presented distinctly* • *co-production themes are tracked and responded to* • *governance is held accountable for acting on lived experience* *This is important because adviser feedback is clear that co-production needs to be strengthened and more visible within the plan.* *7. Strengthen dispute resolution and escalation* *The checklist and adviser commentary make clear that strengthening dispute resolution and decision-making processes is currently underdeveloped in the plan.* *Year 1 governance should therefore define and implement:* • *transparent escalation routes for system issues* • *early resolution mechanisms where concerns arise* • *clearer routes for resolving inter-agency disagreement* • *stronger oversight of complaints, mediation themes and SENDIASS intelligence* *This will support more timely decision-making, reduce drift and help rebuild confidence across the partnership.* *8. Build Year 1 governance assurance* *By the end of Year 1, governance should be able to show:* • *clear structure and purpose* • *functioning reporting cycles* • *stronger representation* • *initial locality oversight* • *routine use of baseline data* • *visible co-production influence*	*In Year 2, governance should begin to demonstrate that stronger grip is leading to better delivery and system performance.* *This may include early evidence of:* • *reduced variation across settings/localities* • *more timely escalation and decision-making* • *stronger alignment between governance and delivery* • *increased consistency in inclusion practice* • *improved links between data, alert mechanisms and intervention* *This is the stage at which governance becomes clearly visible as a driver of reform, not just a reporting structure.*	

	• *clearer escalation and accountability routes* *Year 1 is therefore about moving from a governance model that is present but not cohesive to one that is clear, operational and increasingly able to hold delivery to account.*		
Inclusion Academy/Centre of Excellence	***Establish the foundation*** • *Establish the concept of the SEND Centre of Excellence as a formal system entity within SEND reform governance, defining its role as the central organising mechanism for workforce, practice and system development.* • *Develop the Centre's operating model, including one-stop-shop access, website/platform, training offer, resource library, QA function and workforce development model.* • *Map and design the workforce pipeline, including training provision, supervision, induction and progression routes.* • *Align existing offers (outreach, training, resources, expertise) into the Centre of Excellence framework.* • *Establish QA and data model to measure engagement, quality and impact.* • *Consider a lead role across the Partnership to facilitate the development*	***Scale and embed*** • *Implement the Centre of Excellence as the primary route for workforce development, training, QA and system coordination across all partners.* • *Refine and expand the operating model, ensuring consistent access, strong engagement and clear alignment with delivery across the system.* • *Implement structured workforce pathways, including shared induction, tiered development and "grow your own" approaches.* • *Integrate all workforce and practice development activity through the Centre, reducing duplication and improving coherence.* • *Use data to monitor variation, challenge performance and refine delivery.*	***Sustain and optimise*** • *Embed the Centre of Excellence as a mature, partnership-owned system function with sustained workforce development, consistent practice and strong system identity.* • *Sustain and continuously improve the model, using data, feedback and evaluation to maintain effectiveness.* • *Establish a sustainable workforce pipeline with embedded progression routes and consistent capability across partners.* • *Maintain a fully integrated system with clear routes for learning, support and development.*

Shared Data and Maturity
Core Minimum Requirement – CMR33
	Build the foundations of a shared data system
	1. Establish governance, ownership and infrastructure
	Year 1 focuses on creating the core data system architecture, which is currently missing or fragmented.
	The partnership will:
	• *Define clear ownership and governance for SEND data and analytics*
	• *Establish roles, including dedicated data/insight capacity (e.g. SEND data analyst)*
	• *Create a data governance framework, including:*
	  ○ *ownership*
	  ○ *decision rights*
	  ○ *data sharing agreements*
	  ○ *quality assurance processes*
	This directly addresses current gaps around fragmented systems and lack of shared ownership.
		Embed and scale insight-led system management
		1. Scale consistent data use across the partnership
		In Year 2, the focus shifts to embedding consistent use of data across all partners, including:
		• *schools and trusts*
		• *early years*
		• *health services*
		• *social care*
		All partners will increasingly:
		• *use shared metrics*
		• *work from the same datasets*
		• *participate in joint analysis*
		2. Strengthen data integration and interoperability
		Data systems will become more integrated, with:
			Mature, predictive and self-improving system
			1. Fully integrated, partnership-owned data system
			By Year 3:
			• *Data is fully shared, consistent and trusted across partners*
			• *All organisations operate from a single evidence base*
			• *Data flows seamlessly across education, health and care*
			2. Predictive and proactive system management
			The system will use data to:
			• *predict demand and system pressures*
			• *identify risks early (e.g. exclusion, breakdown, escalation)*
			• *intervene before issues escalate*

	2. Develop a single, shared SEND data framework
	A major Year 1 milestone is the creation of a partnership-wide data framework, which will:
	• *Define core measures and shared definitions*
	• *Align data across:*
	  ○ *education*
	  ○ *health*
	  ○ *social care*
	• *Ensure consistency in how data is:*
	  ○ *collected*
	  ○ *interpreted*
	  ○ *reported*
	This framework will underpin all reform workstreams and enable collective accountability.
	3. Build the central SEND dashboard and baseline dataset
	Year 1 will establish a centralised SEND dashboard, bringing together key data domains:
	• *Demand: EHCP requests, assessments, waiting times*
	• *Service delivery: E@H activity, workforce deployment, provision use*
	• *Quality: complaints, QA findings, family experience*
	• *Outcomes: attendance, exclusions, placement stability, post-16 participation*
	This dashboard will:
	• *provide the first system-wide baseline*
	• *make variation visible*
	• *support early analysis of pressure and inequity*
	4. Begin routine reporting and insight generation
	Data use will move from sporadic reporting to structured, routine insight production, including:
	• *regular performance dashboards*
	• *operational insight reports*
	• *early trend analysis*
	At this stage, insight will still be developing but will begin to:
	• *inform Experts at Hand deployment*
		• *improved data sharing across organisations*
		• *reduced duplication and fragmentation*
		• *stronger alignment of datasets*
		This will enable a whole-system understanding of demand, need and provision, rather than siloed views.
		3. Move from reporting to active performance management
		Year 2 governance will use data to:
		• *identify variation across localities/settings*
		• *challenge underperformance*
		• *target support and intervention*
		Data becomes a tool for system management, not just reporting.
		4. Develop predictive and forward-looking analysis
		The system will begin to:
		• *analyse trends over time*
		• *forecast demand (e.g. EHCP trajectories)*
		• *identify emerging risks earlier*
		This allows:
		• *earlier intervention*
		• *better planning of capacity and workforce*
		• *more effective commissioning*
		5. Embed data within locality delivery model
		Localities will become data-informed delivery units, using:
		• *locality-level dashboards*
		• *variation analysis*
		• *cohort tracking*
		This will support:
		• *peer challenge*
		• *targeted improvement*
		• *shared accountability*
		6. Fully integrate lived experience with data
		Year 2 will see:
		• *systematic capture of family and CYP voice*
		• *integration of feedback into dashboards and reports*
		• *use of lived experience to shape:*
			This marks the transition to a proactive rather than reactive system.
			3. Data drives commissioning, workforce and sufficiency decisions
			Data will routinely inform:
			• *commissioning of services*
			• *workforce deployment*
			• *sufficiency planning*
			• *capital investment*
			• *Experts at Hand scaling*
			Decisions will be:
			• *evidence-based*
			• *transparent*
			• *aligned to system need*
			4. Governance fully data-driven and outcome-focused
			Governance will:
			• *use data as the primary basis for decision-making*
			• *track performance against clear KPIs*
			• *hold partners accountable for outcomes*
			There will be a clear line of sight from: data → governance → action → measurable impact
			5. Integrated performance, quality and lived experience
			The system will combine:
			• *quantitative data*
			• *qualitative insight*
			• *QA findings*
			• *family and CYP voice*
			This creates a single, coherent system insight model.
			6. A self-improving system culture
			By Year 3:
			• *data is used routinely for reflection and improvement*
			• *variation is identified and addressed early*
			• *learning cycles are embedded*
			• *the system continuously adapts and improves*

	• *support targeting of the Universal Offer* • *highlight variation across settings and localities* *5. Integrate data into governance and delivery discussions* *Year 1 will begin embedding data into governance so that:* • *dashboards are routinely discussed in partnership boards* • *performance is reviewed alongside delivery* • *early decisions begin to be influenced by data* *This marks the shift from reporting → early decision support.* *6. Establish baseline measures and maturity trajectory* *Baseline measures will be agreed for:* • *demand and escalation* • *workforce deployment* • *inclusion outcomes* • *system variation* • *lived experience* *This baseline is critical to meet Mark's challenge — it enables:* • *clear trajectory setting* • *measurable improvement over Years 2–3* *7. Begin integrating lived experience with data* *Year 1 will introduce early mechanisms to:* • *capture family and CYP feedback* • *analyse common themes* • *begin linking qualitative insight with data* *However, this will still be at an early stage and not yet fully embedded.*	○ *service design* ○ *commissioning decisions* ○ *improvement priorities* *7. Strengthen workforce capability in data use* *A key Year 2 focus will be developing:* • *data literacy across leaders and practitioners* • *confidence in interpreting and using data* • *consistent use of data in decision-making* *This ensures the system becomes data-enabled, not data-dependent on specialists.*	
Voice of Children and Young People *Core Minimum Requirement – CMR31, CMR38*	*Strengthen and formalise links between:* • *SAY YES* • *Young Experts* • *Participation Team* • *SEND governance structures* • *SENDIASS* *Develop a clear participation framework specifically for SEND, outlining:*	• *Participation framework fully embedded across all SEND services.* • *All commissioning and service redesign includes documented co-production with children and young people.* • *Routine reporting on participation impact included in*	

	• *Routes for engagement* • *Standards for inclusive practice* • *Expectations for services* *Begin to implement consistent data capture of children and young people's views.- how?* *Establish a central mechanism for collating and reporting themes from engagement activity.* *Expand school workshops (planned rollout from September 2026) to increase reach and diversity.* *Embed formal feedback loops:* • *"You said, we did" reporting* • *Regular reporting into SEND governance boards* *Strengthen advocacy pathways, ensuring all SEND children and young people know how to access support.* *Increase visibility and influence of SAY YES, including structured links into decision-making boards.* *Develop reporting to evidence how young people's views influence change.* *Build capacity by training staff in participation and co-production approaches.*	*SEND governance and performance frameworks.* • *SAY YES and other youth forums are integrated into governance, with clear escalation routes.* • *Advocacy is fully embedded, with increased reach to the most vulnerable groups.* • *Data systems enable tracking of themes, influence, and outcomes from participation.* *System Changes Required* • *Cultural shift to participation as business-as-usual.* • *Clear accountability within services for capturing and evidencing youth voice.* • *Sustainable investment in:* • *Participation infrastructure* • *Advocacy services* • *Workforce development* • *Strengthened partnerships with education settings, providers and community organisations to widen engagement.* • *Consistent approach to evaluating impact of participation on outcomes for children and young people.* •	
Co-Production *Core Minimum Requirement – CMR31, CMR37, CMR38*	***Co-production demonstrably influences service design and commissioning*** • *Establish and implement the Co-Production Charter as the formal operating model for participation, with clear expectations for how the Parent Carer Forum (PCF), children and young people (CYP), and education, health and care partners will participate, influence and respond to feedback.* • *Co-produce and agree with children and young people, families, and partners a clear set of partnership-wide minimum co-production standards, defining expectations for inclusive engagement, decision-making, and accountability, and embedding these consistently across all SEND programmes.*	***Reduction in repeated unresolved issues raised by families*** • *Fully embed the Co-Production Charter and participation framework across all reform areas, ensuring consistent application of co-production, co-design, engagement and consultation across the system.* • *Expand co-production across all priority areas, including:* ○ *Universal Offer development, implementation and review* ○ *Experts at Hand delivery and evaluation* ○ *Sufficiency, inclusion and placement planning*	***Embed co-production as a sustainable, system-wide approach*** • *Embed co-production as business as usual across the partnership, fully integrated within:* ○ *governance and decision-making* ○ *service design, commissioning and review cycles* ○ *performance management and improvement processes* • *Ensure the participation framework is consistently applied, with all partners confident in selecting and using appropriate levels of*

	• *Introduce and apply a shared participation framework (co-production, co-design, engagement, consultation), ensuring all workstreams clearly define when and how each level is used, aligned to emerging regional (SESLIP) practice.*
	• *Formalise termly SEND Update for Families sessions and monthly operational engagement with PCF, with structured pre-meets, post-meets and clear action tracking aligned to delivery milestones.*
	• *Develop and publish forward plans for co-production and co-design activity across priority reforms (including Universal Offer and Experts at Hand), ensuring families and CYP are involved early and continuously in design and implementation, not retrospectively.*
	• *Introduce a consistent "You Said, We Did" accountability model, with feedback systematically captured, themes analysed, actions owned and visible responses routinely communicated to families.*
	• *Embed co-production within service design, commissioning and decision-making processes, with clear evidence of influence at key decision points across all priority workstreams.*
	• *Improve the accessibility, clarity and transparency of communication with families, ensuring information is practical, user-friendly and clearly explains what is changing, why, and the impact for children and families.*
	• *Establish robust feedback loops into governance, ensuring themes raised through co-production are tracked, escalated, and directly inform partnership board decisions and delivery planning.*
	• *Broaden participation through a mixed and inclusive engagement model (online, in-person, daytime and evening), ensuring representation across diverse groups of families and CYP.*
	• *Begin to integrate co-production insight into the Data and Insight workstream, ensuring lived experience sits alongside performance data and begins to inform system understanding and improvement priorities.*
		• *Embed targeted co-production approaches as standard practice, including:*
		  ○ *Regular focus groups aligned to delivery milestones*
		  ○ *Surveys and rapid feedback mechanisms to test and refine services*
		• *Ensure all workstreams routinely plan, deliver and report on co-production activity, demonstrating how participation influences decision-making and service design.*
		• *Fully integrate family and CYP voice into Data and Insight systems, ensuring:*
		  ○ *feedback is analysed alongside performance data*
		  ○ *themes directly inform commissioning, investment and improvement decisions*
		• *Strengthen partner accountability by ensuring:*
		  ○ *consistent attendance and contribution across agencies*
		  ○ *named ownership of responses to feedback*
		  ○ *routine reporting of co-production activity and impact through governance*
		• *Embed consistent "You Said, We Did" reporting across the system, reducing repeated feedback issues and improving responsiveness and trust.*
			involvement (co-production, co-design, engagement, consultation).
			• *Establish a fully embedded continuous co-production cycle:*
			  ○ *engagement → insight → action → feedback → refinement*
			• *Demonstrate that co-production routinely drives:*
			  ○ *service redesign*
			  ○ *commissioning decisions*
			  ○ *measurable improvements in outcomes and experience for families and CYP*
			• *Develop a sustainable engagement infrastructure, including:*
			  ○ *long-term co-production planning aligned to system priorities*
			  ○ *stable funding and strengthened capacity for PCF and participation activity*
			• *Embed a clear culture of:*
			  ○ *transparency and openness about challenges*
			  ○ *shared ownership across partners*
			  ○ *responsiveness and accountability to families and CYP*
			• *Ensure lived experience is fully embedded as a core component of system insight, alongside quantitative data, and is routinely used to drive continuous improvement.*

Encouraging inclusive culture and behaviours			

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	Establish the foundations for culture change *1. Define and communicate the expected culture* *In Year 1, the partnership will explicitly define the behaviours and values that underpin the future SEND system. This will include a clear shift in language and practice from escalation to early help, from single-agency responsibility to shared ownership, and from inconsistent thresholds to a more confident, inclusion-first approach. A core task in Year 1 will be to make these expectations explicit through the SEND Local Reform Plan, the Universal Offer, governance forums, engagement materials and communications across education settings, services and families. The draft plan already identifies this as a key direction of travel: "shift system narrative from escalation to early help and shared responsibility".* *2. Build a common language of inclusion across the partnership* *A major Year 1 priority will be to create a shared understanding of what inclusive practice means in Wokingham and what is expected from different parts of the system. Dedicated workshops and locality-based discussions have already explored inclusive practice, early identification, workforce confidence and changing roles and responsibilities, particularly in relation to education settings and the graduated response. Year 1 should formalise this into a borough-wide shared language that is understood across schools, early years, post-16, health, social care and family-facing services. This common language should be reflected in the Universal Offer, school inclusion strategies, co-production materials and partnership communications.* *3. Use the Universal Offer as the behavioural anchor* *The Universal Offer should become one of the main tools for culture change in Year 1. It should not only describe what support is available, but also set out what good inclusive practice looks like before escalation, what settings are expected to do, and how children and young people should be supported earlier. The adviser commentary is clear that this needs to be partnership-owned and regularly refreshed, and the plan draft already links the OAP / Universal Offer to system expectations. In Year 1, this should be used to clarify behavioural expectations across the system, including proportionality, confidence in SEN Support, earlier intervention and a stronger mainstream response.* *4. Start to shift workforce behaviours through support and development* *Year 1 will need to focus on workforce confidence as a precondition for culture change. The current draft already points to the SEND Centre of Excellence,*	***Embed and normalise new behaviours across the system*** *1. Make inclusive behaviours the expected norm across settings* *In Year 2, the focus should shift from defining the desired culture to embedding it consistently across most of the system. The adviser commentary for this section already points towards a "confident, inclusive culture" in which early intervention becomes the norm and is reinforced through Experts at Hand, the SEND Centre of Excellence and peer learning. By Year 2, education settings and services should increasingly operate with:* • *greater confidence in inclusion* • *reduced recourse to crisis escalation* • *more consistent use of the graduated response* • *stronger ownership of local outcomes* *The intention is that inclusive behaviours become visible in routine practice, not just in strategy documents.* *2. Embed peer review and locality learning as core culture mechanisms* *The current plan already references peer review, locality-based learning and communities of practice. In Year 2, these should become central mechanisms for sustaining inclusive culture and behaviour change. Localities should increasingly operate as places where:* • *education settings challenge and support one another* • *variation is surfaced and addressed* • *local problems are solved collaboratively* • *inclusive practice is shared and normalised* *This is particularly important because culture change is more likely to stick where it is reinforced through peer dialogue, local leadership and shared accountability rather than only through central direction.*	***Sustain a mature, self-improving inclusive culture*** *1. Inclusive culture fully embedded across the partnership* *By Year 3, Wokingham should be able to describe an inclusive culture that is no longer emerging or dependent on a few individuals, but is embedded across the partnership. This means:* • *early intervention is the norm* • *shared responsibility is expected across education, health and care* • *inclusive language and behaviours are routine* • *mainstream inclusion is reinforced through practice, not just policy* *This is the point at which culture becomes resilient and self-sustaining.* *2. Shared values and behaviours become the operating standard* *The adviser comments describe the future state as one in which the workforce operates with a shared language, practice is underpinned by shared values and common language, and behaviours align around early help, equity and value for money. By Year 3, this should be visible in:* • *more proportionate use of specialist pathways* • *stronger relational working with families* • *more confident professional decision-making* • *greater consistency of practice across education settings and services* • *more mature participation and challenge across the partnership* *Inclusive culture should be discernible in routine behaviours, decisions and expectations.* *3. System functions reinforce the culture automatically*

	Experts at Hand, peer learning and workforce development as key enablers. In Year 1, workforce development should be focused on: • *improving confidence in meeting need earlier* • *strengthening consistent use of the graduated response* • *helping staff understand what is expected of them in a more inclusive mainstream system* • *reducing dependence on escalation as the default response* *This should include not only teachers and SENCOs, but also wider practitioners across early years, health, social care, AP, FE and family-facing services.* *5. Embed honest partnership conversations and challenge* *Culture change will require Year 1 to move beyond ambition statements and into honest system challenge. The current material already reflects that the system is not yet cohesive, that co-production is weakly connected to decision-making, and that practice and accountability remain variable. Year 1 should therefore establish a culture where partners can talk openly about:* • *what is not working* • *where variation persists* • *where thresholds are inconsistent* • *where accountability needs to be stronger* *This needs to be brokered through governance, locality discussions, quality assurance and data review, and should be treated as a sign of maturity rather than a weakness.* *6. Strengthen co-production as a behaviour, not just a forum* *The current draft and adviser comments both indicate that co-production is present but not yet systematically influencing service design, and that "you said, we did" feedback loops are not yet strong enough. In Year 1, co-production should be reframed as a core expected behaviour of the system. This means:* • *involving families and CYP earlier in design and review* • *improving how services respond to feedback* • *making visible how input changes decisions* • *ensuring engagement is accessible and family-friendly*	*3. Align behaviour change to governance and accountability* *In Year 2, the culture shift needs to be more tightly linked to governance and accountability. Partnership boards, locality arrangements and SEND governance should increasingly look not only at delivery milestones, but also at whether partner behaviours are aligned to the reform vision. This means reviewing:* • *whether data is being used to support earlier intervention* • *whether co-production evidence is influencing decisions* • *whether settings are taking shared responsibility beyond their own gate* • *whether leadership conversations reward prevention and inclusion rather than simply escalation and throughput* *This is how culture becomes embedded into the machinery of the system.* *4. Strengthen relational and family-facing culture* *By Year 2, the system should be seeing visible improvements in how it relates to families and children and young people. This includes:* • *more consistent "you said, we did" reporting* • *improved accessibility of communication* • *stronger and more timely feedback loops* • *better visibility of SENDIASS insight in system improvement* • *clearer use of CYP voice separately from parent voice* *The aim is not only to improve engagement activity, but to demonstrate that the system is more respectful, empathetic, honest and responsive in the way it behaves.* *5. Use workforce infrastructure to reinforce culture at scale* *In Year 2, the SEND Centre of Excellence, Experts at Hand and wider workforce*	*By Year 3, governance, commissioning, workforce, data, capital and quality assurance should all be reinforcing the same cultural direction. The adviser comments are particularly useful here: they describe a future state where commissioning is aligned and outcome-focused, data is shared and predictive, governance and QA are strong, and culture and leadership are inclusive system-wide. In practice, this means:* • *governance routinely challenges variation and inequity* • *commissioning decisions reward inclusion and prevention* • *workforce and supervision support inclusive behaviours* • *data is used to identify drift and respond early* • *physical capacity changes continue to support mainstream inclusion rather than dependency on specialist escalation* *This is the point where culture and system design are no longer separate things.* *4. A self-improving culture supported by families and young people* *By Year 3, the system should demonstrate that co-production, SENDIASS and CYP voice are not only inputs into governance, but active parts of a self-improving culture. Families and young people should increasingly see:* • *visible system responsiveness* • *clearer evidence that their input changes practice* • *more honest and constructive engagement* • *fewer repeated unresolved issues* *This will be one of the strongest indicators that the culture has genuinely changed, because trust and confidence improve when behaviour changes in visible ways.*

	• *building stronger roles for the Parent Carer Forum, CYP participation and SENDIASS insight* *A more responsive, transparent and relational approach should become part of the system's expected culture.* *7. Improve communications and transparency* *The draft plan highlights the need for clearer articulation of how Best Start in Life, Families First and SEND local reform fit together, and notes that a communications plan is being implemented to articulate the shared spirit and vision of reform. In Year 1, communications should therefore become a deliberate lever for culture change. Messaging should move away from corporate or siloed language and instead reinforce:* • *earlier help* • *whole-family support* • *inclusive universal services* • *reduced escalation* • *collective responsibility* *This is important both internally and externally, because culture is shaped not only through service delivery but through how the system speaks about itself and its reform journey.* *8. Establish the first culture-linked success measures* *Year 1 needs to put in place the baseline measures that will allow the partnership to assess whether culture is really changing. Adviser comments already suggest that success should be tracked through attendance, exclusions, confidence, access to specialist support, early intervention and family trust. For this building block, Year 1 should establish baseline measures for:* • *school confidence in meeting need earlier* • *family trust and confidence in pathways* • *variation in inclusive practice across education settings* • *early intervention without default EHCP escalation* • *workforce engagement in peer review / learning activity* • *complaints / mediation themes and repeated issues* • *participation and reach of co-production and CYP voice* *This matters because inclusive culture will only become meaningful if it can be*	*development should become more embedded in ongoing behavioural change. Development should move beyond awareness-building into:* • *modelling of inclusive practice* • *coaching and supervision* • *cross-phase learning* • *stronger support for schools/settings where culture is less mature* • *visible improvement in confidence and consistency across localities* *At this stage, the workforce should increasingly experience inclusive culture as part of "how we do things here", rather than as a reform add-on.* *6. Link inclusive culture to outcomes and variation* *By Year 2, the partnership should increasingly be able to show that behavioural and cultural change is having observable effects. This should include early evidence of:* • *reduced variation in practice and thresholds* • *increased confidence in mainstream support* • *more children supported earlier without statutory escalation* • *better attendance and fewer exclusions for children and young people with SEND* • *improved consistency in transitions and pathways* *This is important because adviser feedback is clear that the future state must be measurable and realistic. Inclusive culture therefore needs to be evidenced through both lived experience and system outcomes.*	*5. A mature, confident workforce and partnership* *By Year 3, the workforce should be more stable, confident and aligned, with the SEND Centre of Excellence, Experts at Hand, locality learning and peer review all functioning as part of a wider culture of continuous improvement. The partnership should be better able to:* • *sustain inclusive practice despite organisational or workforce change* • *support settings earlier and more proportionately* • *maintain a coherent approach across phases* • *continue improving without relying on crisis-driven reform energy* *This is the mature state described in the adviser feedback: a culture that is inclusive, confident and embedded system-wide.*

	observed through behaviours, decisions and outcomes. *9. Belonging strategy & system measurement of inclusion* *Develop and test a co-produced Education Belonging Strategy, including a shared definition of belonging, alignment of existing inclusion frameworks into a single system "belonging thread", and establishment of baseline measures and a borough-wide belonging index and dashboard to assess and track children and young people's experience of inclusion.*		
Enablers			
Enablers *E.g.* *Capital – investment strategy across EY, mainstream, FE* *Workforce* *Data/digital systems*	***Establishing Core Delivery Infrastructure*** *In 2026/27, the local area partnership will establish the foundational enablers required to meet the core minimum requirements, moving from a system characterised by variability and fragmented delivery infrastructure to one with clear accountability, capability and coordination.* *1. Governance, System Leadership and Accountability* *A single, integrated governance framework will be formalised, with clear system ownership across education, health and care, including representation from early years, mainstream schools (including MATs), further education, the ICB and the Parent Carer Forum.* *Defined decision-making pathways, escalation routes and named accountable leads for each priority will ensure that the SEND Local Plan operates as a delivery and assurance mechanism, with routine performance oversight.* *2. Commissioning, Finance and Market Management* *A jointly agreed commissioning and investment framework with the ICB will be established, aligned to the Reform Plan priorities and sufficiency strategy.* *Year 1 will implement a test-and-learn approach to commissioning, targeting investment towards early intervention, mobilisation of Experts at Hand, and increasing local capacity, with initial alignment between funding, activity and intended outcomes.* *3. Workforce Capacity and Capability* *The SEND Centre of Excellence will be launched as the primary system mechanism for workforce development, supervision and shared learning. A defined Experts at Hand workforce model (including educational psychology, speech and language therapy, occupational therapy and specialist teaching roles) will be mobilised, strengthening access to*	***Embedding, Scaling and Driving Consistency*** *In 2027/28, the partnership will embed and scale these enablers, ensuring they are consistently applied across all settings and partners and actively used to improve outcomes and reduce variation.* *1. Governance, System Leadership and Accountability* *Governance will operate as an active system leadership function, with routine use of performance data to hold partners to account, challenge variation and drive improvement. Locality-based delivery structures will be embedded, providing clear accountability for inclusive practice, access and outcomes at place level.* *2. Commissioning, Finance and Market Management* *Commissioning will transition to an outcome-focused model, with investment decisions informed by demand, performance and value for money. Joint commissioning with health will be embedded, and market management will actively shape provision, including outreach, alternative provision and specialist support.* *3. Workforce Capacity and Capability* *The SEND Centre of Excellence will operate at scale, providing structured development pathways, supervision and peer learning across the workforce.* *Experts at Hand will be fully operational across localities, delivering earlier intervention, increased reach and improved*	***Optimising, Sustaining and Embedding a Self-Improving System*** *In 2028/29, the partnership will ensure that all enablers are fully mature, integrated and operating as a self-improving system, sustaining reform beyond the initial programme.* *1. Governance, System Leadership and Accountability* *Governance will operate as a fully integrated, mature system, with shared ownership of outcomes across all partners, strong locality-to-system alignment and clear evidence of impact.* *Accountability will be embedded as standard across education, health and care.* *2. Commissioning, Finance and Market Management* *A sustainable, multi-year, outcome-led commissioning model will be embedded, with investment consistently aligned to need, impact and value for money.* *Reduced reliance on high-cost placements will support financial sustainability and improved resource allocation.* *3. Workforce Capacity and Capability* *The workforce will be stable, skilled and confident, with a clear pipeline supported through the SEND Centre of Excellence.* *Workforce development, supervision and collaborative practice will be embedded as business as usual across the partnership.*

	expertise and beginning to build confidence and capability across mainstream settings. *4. Data, Insight and Performance Infrastructure* *A shared SEND data and insight framework will be established, including a baseline dataset and partnership dashboard. Data will move from fragmented and inconsistent to structured and comparable, enabling identification of variation in need, service access and inclusion, and supporting early performance oversight.* *5. Sufficiency, Capital and System Capacity* *Phase 1 of the capital programme will deliver 164 additional local places, focused on mainstream inclusion and specialist provision. This will begin to address gaps in local capacity and reduce reliance on out-of-area placements, supported by a clearer, needs-led sufficiency model.* *Year 1 outcome:* *The system moves from fragmented and variable → structured, accountable and mobilised, meeting core minimum requirements for governance, data, workforce and sufficiency foundations.*	*confidence across early years, schools and colleges.* *4. Data, Insight and Performance Infrastructure* *The system will move from baseline reporting to insight-led performance management, with shared dashboards routinely used across governance, commissioning and delivery. Early predictive analysis will support proactive identification of pressure points, enabling targeted intervention and improved planning.* *5. Sufficiency, Capital and System Capacity* *Phase 2 of the capital programme will deliver a further 113 local places, strengthening the mainstream inclusive offer and reducing demand for specialist and independent placements. Sufficiency planning will be refined using live data and demand modelling to ensure provision is aligned to need.* *Year 2 outcome:* *The system moves from initial implementation → embedded, consistent and data-informed delivery, with reduced variation, improved workforce confidence and early evidence of impact on inclusion and demand.*	*4. Data, Insight and Performance Infrastructure* *The system will operate with integrated, real-time and predictive data, enabling proactive decision-making, early intervention and efficient resource deployment. Data, lived experience and performance intelligence will be fully embedded within governance and commissioning.* *5. Sufficiency, Capital and System Capacity* *Phase 3 of the capital programme will deliver a further 213 local places, completing the planned expansion and establishing a sustainable, needs-led local provision model, with most children and young people supported effectively within their local area.* *Year 3 outcome:* *The system moves from embedded delivery → mature, self-improving and sustainable, with demonstrable improvements in inclusion, reduced escalation, strengthened local provision and increased confidence from children, young people, families and professionals.*
Success measures *Core Minimum Requirement – CMR8* ***Drawing on metrics from the accompanying data template*** *E.g.* *Improve attendance of pupils in all maintained schools (mainstream and special) with SEN* *Reduce spend on ISS places* *Increase # children and young people supported by Education Psychologists/SALT/OT in maintained provision* *Improve overall effectiveness of provision* *NEET data* *Leading indicators*			

	Measure Type	Partnership Measure	Metric	Year 1 (where are we now)	Year 3 (where will we be)	Assumptions/Notes
Universal/OAP	Earlier Inclusive Practice	No of settings adopting OAP		n/a	100%	Introducing Peer Review which will be used as a metric to monitor OAP adoption
	System Performance	Access to OAP training	Number of settings accessing OAP Training	n/a	90%	Not currently recorded, will be recorded going forward
	System Performance	Audits of provision/QA	No. meeting or exceeding Audit Quality against agreed standard	n/a	90%	Introducing Peer Review which will be used as a metric to monitor quality of provision/OAP Adoption
	Lived Experience	Training/School Feedback	Positive Training Feedback	n/a	90%	SEND Centre of Excellence co-design will monitor
	Lived Experience	Parent staff confidence	Do you feel your child's education setting is inclusive	84%	95%	Send Voices Survey 2025 for the Year 1 (where are we now). Included any Yes response
	Belonging	Belonging	Children with SEND feel welcomed at their education setting	72%	95%	Send Voices Survey 2025 for the Year 1 (where are we now). % feeling welcomed
	Earlier Inclusive Practice	QA of EHCNA	% of EHCNA requests approved at first submission.	57%	80%	2025 Calendar for Year 1. Less EHCNA requests coming through, however of those that do come through, increase in first time acceptance rate due to better quality submission (evidence of graduated response)
Strengthening Partnership Engagement	Lived Experience	Parent feedback	Overall Rating for SEND in Wokingham	2.69	4.00	Send Voices Survey 2025 for the Year 1 (where are we now). Overall Rating out of 5
	System Performance	You said we did	Number of you said/we did actions recorded/published	tbc	tbc	Metric to be co-produced with Partnership
Sufficiency Place Planning	Inclusive Practice	No.inclusion/specialist bases	Number of Inclusion bases operational	85	320	No. spaces live June 26
	Inclusive Practice	No.pupils accessing inclusion/specialist bases	No.pupils accessing inclusion/specialist bases	68	298	No. spaces utilised June 26
	System Performance	WBC Utilisation of Specialist Spaces	% of commissioned places filled by WBC children	68%	90%	
	Inclusive Practice	% children not in WBC provision	% of children accessing non Wokingham Maintained Settings	32.00%	20.00%	June 2025 % of children with EHCP that are not in a Wokingham maintained setting
	Proxy Outcome	Placement Stability		tbc	tbc	Data quality cleanse underway.
	System Performance	Audits of provision	% settings with signed SLA/Contract in place	80% SLA in place	100%	Each setting will have a contract/SLA which details a set of KPIs. Some will be setting specific and some will be collected across all settings to give a borough wide data set/heat map for the borough on impact against key KPIs
	System Performance	Audits of provision	% settings meeting >80% of agreed KPIs	N/A	85%	100% of providers submit quality-assured annual reports, with ≥80% demonstrating evidenced positive impact (Green), and 100% of identified improvements delivered within agreed timescales and informing commissioning decisions.
	Outcome	Attendance	% attendance of children with EHCP and SEN Support	90%	tbc	% attendance with EHCP and SEN Support . Target to be agreed through WBEP.
	Inclusive Practice	% Children Mainstream	% Children attending Mainstream Provision	58%	68%	Jan 2026. Includes all mainstream educated with EHCP (inc inclusion & resource bases and General FE P16)
	Outcome	Travel Time	Assumption using HTST EHCP	12.06	<10	This is a measure of the average journey time for EHCP children in receipt of HTST assistance. It assumes an average journey time of 2-minutes-per-mile. At present, the average one-way journey length is 6.03 miles, with a target to reduce this below 5 miles within 3 years.
	System Performance	Costs	Average costs provision	£23,775	£23,965	
Experts at Hand	System Performance	No. of MAIC sessions/CYP discussions	No of MAIC sessions/ year	21	tbc	Current 25/26. Format of MAIC will change as per Experts at Hand plan. Co-design will determine future target.
	Inclusive Practice	No. of MAIC sessions/CYP discussions	Number of Settings Attending	75%	100%	Current 25/26. Format of MAIC will change as per Experts at Hand plan
	Inclusive Practice	Settings accessing EAH		n/a	100%	Reporting will be developed to monitor
	Inclusive Practice	Coaching/peer support for setting staff		tbc	tbc	Introducing Peer Review which will be used as a metric to monitor coaching/peer support
	Lived Experience	Staff feedback		tbc	tbc	SEND Centre of Excellence co-design will determine measure
	System Performance	Quality assurance		tbc	tbc	SEND Centre of Excellence co-design will determine measure
	Lived Experience	Session/training evaluations		tbc	tbc	SEND Centre of Excellence co-design will determine measure
	Earlier Inclusive Practice	EHCP Requests	No. of EHCP requests	414	380	Calendar year 2025
	Inclusive Practice	Part-time timetables	No. children on Part-time Timetables with EHCP & SEN Support	208	187	Number of children on a PTT as at April 26 for children with EHCP & SEN Support
	Outcome	Overall School Absence	% absence for children with SEND	9.70%	tbc	Autumn 25-26 (Sept-Dec25) school absence for children with SEND. Target to be agreed through WBEP.
	Outcome	Exclusions	% exclusions for children with SEN or EHCP	0.20%	0.00%	% of exclusions for academic year 24/25 for children with sen or ehcp
	Outcome	Suspensions	% Suspensions for children with SEN or EHCP	21.90%	10.00%	% of suspension for academic year 24/25 for children with sen or ehcp
	Lived Experience	Staff Confidence		tbc	tbc	SEND Centre of Excellence co-design will determine measure
	Lived Experience	Parent Confidence	How well CYPs needs are being met by Education/Health/Social Care	25%	75%	SEND Voices 2025 survey. Q15. those met quite well/very well across all 3 services
Progress & Preparation for Adulthood	Outcomes	% of YP with EHCP aged 16-25 in Education, employment or training		73%	tbc	As at February 2026. Target will be agreed through the Partnership
		% learners who successfully sustain their placement for at least two terms				Data available, metric under development
		% of YP progressing to a higher level course, supported internship				Data available, metric under development
	Outcomes	SATS for Children with EHCP (KS2 RWM)		7%	tbc	2025 SATS for children with EHCP (KS2 RWM). National 9%. Target to be agreed through WBEP.
	Outcomes	SATS for Children with SEN Support (KS2 RWM)		36%	tbc	2025 SATS for children with SEN Support (KS2 RWM). National 28%. Target to be agreed through WBEP.
	Outcomes	Attainment 8 score for YP with EHCP		14.7	tbc	2025 Attainment 8 with EHCP (DfE Stats Publication) National 14.8. Target to be agreed through WBEP.
	Outcomes	Attainment 8 score for YP with SEN Support		41.2	tbc	2025 Attainment 8 with SEN Support (DfE Stats Publication) National 33.7. Target to be agreed through WBEP.

High-level roadmap for the next 3 years: Workstream swim lanes

Key Milestones by year and workstream

Building Block 1 **Strengthening inclusion across education settings**	**Universal SEND Offer**	Establish the Universal Offer as a credible, jointly owned foundation, with a strong emphasis on clarity, consistency and shared baselines across the partnership	Embed the Universal Offer consistently across all settings, strengthening workforce capability and ensuring that practice is aligned across education, health and care	Optimise the model, aligning to national standards and demonstrating measurable impact on outcomes and system sustainability
	Local Delivery Model	Co-produce a Localities model with education, health, care and parent carer representatives, establishing locality clusters, and launching pilot locality working	Embed locality working, governance and accountability. Refine locality metrics and introduce regular performance review cycles. Integrate with Core Workstreams	Localities operates as a fully embedded system structure, acting as communities of practice with an integrated, data-driven system
	Early Years	Co-produce a partnership-wide Early Years Foundation Stage framework, with an established baseline Best Start dataset, and a refined EY–Primary transition network	EYFS Framework fully adopted and embedded across all EYFS providers, with expanded local SEND provision in early years, and consistent use of evidence-based interventions	Full alignment to National Inclusion Standards, with sustained sufficiency across early years provision, and highly consistent inclusive practice across system
Building Block 2 **Access to specialist support and local placements**	**Experts at Hand**	Mobilise and deliver of a jointly commissioned Experts at Hand model, providing settings with access to consultation, modelling, intervention and workforce development across localities, with initial delivery focused on priority cohorts	Scale, standardise and embed the Experts at Hand model, moving from targeted delivery to consistent coverage across all settings, with broader implementation, deeper consistency and stronger system grip	Optimise, sustain and evidence impact, moving to a stable, high-confidence and sustainable operating model
	Inclusive / Alternative Provision	Establish and launch a borough-wide 3-tier AP model, clearly defining universal, targeted and specialist support and aligning this to school delivery	Expand APDF provision in education settings and fully integrate AP model with Core Workstreams	AP model fully embedded, with an established sustainable trading model between education settings for in-house AP provision
	Early Years	Map current early years support, identify gaps, and deliver an equitable "Experts at Hand" model with integrated multi-disciplinary input and enhanced EY panel access	EAH scaled across all settings and aligned to locality delivery, with embedded feedback loops	Fully embedded early intervention model
	Post 16	Design and launch the Post-16 SEND Hub, strengthening consistency of the post-16 pathway framework	Expand and embed Post-16 SEND Hub provision, with a fully operational graduated pathway system	Further expand and embed Post-16 SEND Hub provision
	Sufficiency and Place Planning	Deliver first phase of the capital programme and strengthen local inclusion, including early years expansion, primary and secondary inclusion bases and the first Post-16 SEND Hub, special school expansion and free school mobilisation	Scale provision and rebalance the system, delivering further phases of inclusion base expansion across primary and secondary phases, expand Post-16 SEND hubs, and progress delivery of new special free school provision and early years specialist capacity	Achieve a stable, locally sufficient system, completing delivery of the capital programme, including special free schools, inclusion bases and Post-16 hubs
Building Block 3 **System leadership, local partnership collaboration and co-production**	**Partnership Governance**	Establish clear governance foundations and operational grip to establish localities as genuine governance and delivery mechanisms and begin embedding shared data into governance	Embed shared accountability and performance governance by moving from structure to active system accountability, with localities functioning as meaningful governance units	Sustain a mature, integrated governance model with shared accountability that is embedded, and localities actively shaping the wider system's response to emerging issues and inequalities
	Inclusion Academy	Establish the foundation of the SEND Centre of Excellence, developing the Centre's operating model, mapping and designing the workforce pipeline and aligning to existing offers	Implement the Centre of Excellence as the primary route for workforce development, training, QA and system coordination across all partners, refining and expanding the operating model, and implementing structured workforce pathways	Embed the Centre of Excellence as a mature, partnership-owned system function with sustained workforce development, consistent practice and strong system identity, sustaining and continuously improving the model
	Shared Data and Maturity	Build the foundations of a shared data system, creating the core data system architecture, a partnership-wide data framework, and establishing a centralised SEND dashboard	Embed and scale insight-led system management, with consistent use of data across all partners, strengthening data integration and interoperability, moving from reporting to active performance management, and embedding data within locality delivery model	A fully integrated, partnership-owned data insight system with a Predictive and proactive system management that drives commissioning, workforce and sufficiency decisions
	Voice of Children and Young People	Strengthen and formalise links between CYP forums, develop a clear participation framework, and implement consistent data capture of children and young people's views	Participation framework fully embedded across all SEND services	
	Co-Production	Establish and implement the Co-Production Charter as the formal operating model for participation, and introduce and apply a shared participation framework	Fully embed the Co-Production Charter and participation framework across all reform areas	Embed co-production as business as usual across the partnership, and ensure the participation framework is consistently applied
Building Block 4 **Encouraging inclusive culture and behaviours**	**Culture and Behaviour Change**	Establish the foundations for culture change, defining and communicating the expected culture and behaviours, building a common language of inclusion across the partnership, using the Universal Offer as the behavioural anchor and focusing on workforce confidence as a precondition for culture change	Embed and normalise new behaviours across the system, making inclusive behaviours the expected norm, shifting from defining the desired culture to embedding it consistently across most of the system	Sustain a mature, self-improving inclusive culture that is fully embedded across the partnership

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?*
Strengthening inclusion across education settings							
Universal Offer *Core Minimum Requirement – CMR20* *Outcome* *By the end of 2026–27, the local area partnership will have a clearly defined, consistently applied universal SEND offer across education, health and social care.* *This will set out:* • *what children, young people and families can expect without a diagnosis or EHCP* • *what schools and settings are reasonably expected to provide and access*	Education: WBEP Local Authority: Area SENCO Principle EP Education Belonging	**Refresh and expand the Ordinarily Available Provision (OAP)** • Undertake a structured review of the existing education-led OAP • Co-develop expanded sections covering: ○ health (including therapies at a universal/pre-statutory level) ○ social care and Early Help • Align the OAP explicitly to the SEND & Inclusion Strategy and Families First	• Multi-agency agreement on core universal expectations and principles • Baseline dataset established and published at borough and cluster level (attendance,	**Launch the refreshed universal offer** • Publish and communicate the expanded OAP across schools, settings, families and partners • Provide clear guidance on how education settings use the OAP to meet need earlier and more consistently • Reinforce links between the universal offer and escalation routes (including EAH) • Identify and launch self-audit process to all settings	• Universal Offer formally launched and in active use across the partnership • ≥50–60% of schools/settings engaged in self-audit and/or peer	Expand support for education settings: • Representatives from first cohort of education settings support second cohort in next cycle **Expand and normalise peer review activity** • Extend participation in self-audit and peer review to	• ≥75–85% of schools/settings engaged in peer review and universal practice activity • All settings have live inclusion strategies aligned to OAP expectations • Demonstrable reduction in variation

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2026-27 Local delivery plan			Q2		Q3		Q4	
	• *how universal practice is quality-assured, supported and improved through peer learning* *The universal offer will act as the primary mechanism for reducing avoidable escalation, improving inclusion in mainstream, and building trust, transparency and shared accountability across the system.* . *Success measure* *Progress will be measured through a combination of established baseline metrics and new indicators developed through this work:* *Baseline position (Q2):* • *Current OAP adoption across education settings (education-led baseline)* • *Variation in SEN Support rates and EHCP prevalence across education settings (school census)* • *Attendance, suspension, exclusion and part-time timetable rates for CYP with SEND* • *Parent/carer confidence baseline (existing surveys and PCF feedback)* *Process and implementation measures:* • *Publication and adoption of a refreshed multi-agency Ordinarily Available Provision (OAP)* • *% of schools/settings engaged in self-audit and peer review activity* • *% of settings with inclusion strategies aligned to OAP expectations*		• Coproduction with CYP and families • Agree how the OAP will be used as a reference point for both universal practice and EAH engagement • Draft OAP v2 (multi-agency) completed and circulated **Define expectations for universal delivery at system level** • Agree a set of non-negotiable principles/expectations for inclusive universal practice • Clarify the respective roles of education settings, Area SENCOs, health practitioners, outreach and EAH • Set out what good universal practice looks like before additional specialist input is requested • Agreed set of non-negotiable universal expectations signed off by partnership **Embed early identification approach across Universal Offer and early years pathways** • Establish expectation of support before escalation • Establish expectation of support before escalation **Support for settings to design and embed Inclusion Strategies** **Design and co-produce inclusion audit and self-evaluation**	exclusions, SEN Support/EHCP variance, lived experience) • Draft expanded OAP (education, health and social care) co-produced and tested with partners • ≥25% of schools/settings engaged in initial self-audit pilot • Clear articulation of the link between Universal Offer, Experts at Hand and escalation pathways	• Published final OAP and implementation guidance in active use across the partnership **Pilot self-audit with first cohort of education settings** • First cohort of education settings compete self-audit • Use findings to support education settings to develop action plans with individual education settings • Bespoke coaching and training for education settings in areas identified • Education settings complete audits 3 x a year to identify progress and areas for continued development • Implement peer review activity within selected localities • Use peer reviewers drawn from schools/settings to build credibility and trust • Capture themes, strengths and improvement areas at locality level • Ensure findings are developmental, not punitive • Operational peer review model active across priority localities with expanding participation **Embed communities of practice linked to universal priorities** • Establish locality-based communities of practice	review activity • Early evidence of improved consistency across clusters • Measurable increase in SEN Support, particularly in early years and primary phases • First "You said, we did" publication demonstrating responsiveness to partner and family feedback	additional localities • Begin embedding peer review outcomes into school improvement dialogue • Use findings to inform system-level priorities and EAH focus areas **Embed early intervention and inclusive practice at scale** • Early intervention embedded, with evidence of reduced escalation over time • All settings have live inclusion strategies in place, reviewed through peer and cluster processes • Evidence increased ability of mainstream settings to retain and support children locally **Strengthen governance and system grip** • Ensure universal data and peer review insights are reviewed routinely at partnership governance • Use insight to challenge variation and	between education settings in SEN Support approaches • Stabilisation in EHCP request growth trajectory (early signs of reduced escalation) • Evidence of: ○ Improved confidence in meeting needs earlier ○ Increased ability to maintain children in mainstream settings • Universal data and peer review insight embedded in partnership governance cycle

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	Practice and consistency measures: ● *Reduction in variance between education settings in SEN Support and EHCP rates* ● *Peer review evidence of improved alignment to agreed universal expectations* *Outcome measures (trajectory emerging through Year 1):* ● *Improved attendance and reduced exclusions for CYP with SEND* ● *Stabilisation of EHCP growth over time* ● *Improved parent/carer and CYP confidence in early support* *How this connects to the wider reform programme* ● *The Universal Offer is the foundation on which Experts at Hand operates* ● *Peer review and OAP clarity reduce avoidable specialist demand* ● *Data and lived experience feedback ensure the model remains responsive* ● *Year 1 focuses on credible build and test, enabling confident scaling in Years 2–3*		**approach, aligned to best practice model** ● Co-design (including CYP & Families) a multi-tiered inclusion audit (e.g. Bronze, Silver, Gold award) ● Design an audit tool that education settings can use to assess their provision ● Use data from the audit to create action plans alongside education settings and to develop a training and support offer ● Support education settings to create action plans using the data gathered ● Define how peer review operates within and across localities (secondary-led, with primaries and EY) ● Ensure the model supports improvement rather than compliance ● Agree how peer review learning will feed system-wide practice improvement ● Prototype self-audit tool **Establish universal data and insight baseline** ● Agree the core universal dataset (attendance, exclusions, part-time timetables, complaints themes, lived experience, audit scores) ● Establish baseline positions at cluster and borough level ● Align this dataset to the wider SEND performance dashboard		aligned to cluster groupings ● Use these forums to: ● share peer review learning ● moderate expectations of universal practice ● address common inclusion challenges (attendance, behaviour, OAP reasonable adjustments, , uniform, SEMH, SLCN etc.) **Introduce an ongoing refresh cycle which is informed by feedback and emerging national standards** ● Publish the first "You said, we did" update linked specifically to universal practice ● Demonstrate how feedback from education settings, families and CYP is shaping delivery ● First partnership-level insight report produced, combining data, peer review findings and lived experience **Strengthen early identification and inclusive practice** ● Increase early identification and SEN Support, particularly in early years and primary phases ● Support education settings to develop and publish inclusion strategies, including workforce capability and inclusion priorities ● Ensure settings increasingly meet need within mainstream provision, supported by EAH and workforce development		support targeted improvement ● Maintain clear line of sight between universal practice, EAH demand and statutory escalation **Consolidate learning and refine the model** ● Review what has worked and what needs adjustment in Year 1 ● Refine the quality mark and peer review approach ready for Year 2 scaling ● Agree Year 2 priorities for widening reach and deepening impact ● Full Year 1 evaluation of the Universal Offer completed (data and lived experience) **Embed evidence-led system improvement** ● Clear evidence base established linking Universal Offer, Experts at Hand demand and statutory escalation ● Partnership-level insight embedded into ongoing performance reporting and	

2026-27 Local delivery plan			Q2		Q3		Q4	
			• Baseline performance dashboard established and agreed **Align Universal Offer expectations with mainstream inclusion capacity (bases and adaptations)** **Deploy investment to enable delivery at pace** ● Commission external support where required (e.g. Whole Education model) ● Provide workforce capacity to support co-production, audit design and implementation ● Develop data infrastructure and reporting capability to support ongoing monitoring and improvement				decision-making cycles	
	Locality Delivery Model Core Minimum Requirement – CMR7, CMR8, CMR27, CMR28, CMR29, CMR30	Education: WBEP Local Authority: Principle EP Education Belonging	**Model Finalisation and Co-Production** ● Co-produce and formally agree the Localities model, including: ○ Cluster structure (secondary anchor schools and feeder networks) ○ Alignment to Family Hub geographies ○ Defined locality size to ensure manageability and strong peer relationships ● Agree and publish locality principles, including: ○ Shared responsibility for inclusion outcomes and transitions across phases ○ Expectation that education settings act beyond their own setting	• Localities defined, agreed and operational • Leadership and governance foundations in place • Baseline established to track variation	**Operational Locality Working** ● Localities move into active delivery phase, including: ○ Regular multi-agency locality meetings ○ Joint problem-solving and planning ● Education settings begin to operate as connected systems, not isolated settings **Embedding Shared Accountability** ● Introduce expectation that: ○ Secondary anchors take a lead role in overseeing transition outcomes across feeders ○ All settings contribute to locality-level inclusion outcomes	• Clear evidence of locality-level collaboration and joint working Early examples of shared accountability emerging • Initial reduction in variance across pilot clusters (leading indicators) • Improved coordinati	**Full Implementation of Locality Governance Framework** ● Embed a formal Localities governance model, including: ○ Regular, structured locality meetings with defined agendas ○ Clear accountability for locality leads ○ Standardised reporting into partnership boards ● Ensure clear line of sight from locality performance to system-level decision-making	• Localities fully functioning as a delivery and accountability mechanism • Governance framework embedded and linked to partnership decision-making • Measurable reduction in variation across settings within localities (early-stage) • Clear shift towards shared system responsibility

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			Leadership and Governance Foundations ● Identify and confirm locality leads, including: ○ Secondary anchor leads ○ Named representatives across education, health and care ● Establish initial locality governance arrangements, including: ○ Reporting lines into partnership governance ○ Agreed escalation routes for risks and issues **Metrics and Baseline** • Agree a core set of locality metrics, including: ○ SEN Support variation ○ Inclusion indicators (attendance, exclusion, participation) ○ Transition outcomes ● Establish baseline performance for each locality, highlighting variation and priority areas **Early Mobilisation** • Convene initial locality meetings, bringing together all partners ○ Begin early joint working focused on: ○ Transitions ○ Inclusion challenges ○ Alignment with Universal Offer		● Begin to shift practice from: ○ "my school" → "our locality cohort" **Integration with Core Programmes** ● Align locality delivery with: ○ Universal Offer implementation ○ Experts at Hand deployment ● Localities become the primary delivery mechanism for early intervention and support **Governance and Performance (early stage)** ● Introduce termly locality performance discussions, focused on: ○ Variation between settings ○ Identification of outliers ● Begin escalation of key issues into partnership governance structures **Transitions and Inclusion (priority focus)** ● Pilot improved transition pathways across phases, including: ○ Early years → primary ○ Primary → secondary ● Develop shared approaches to: ○ Prevent breakdowns at transition points ○ Reduce escalation to specialist provision	on around transitions	**Performance and Accountability** ● Embed termly locality performance reviews, using agreed metrics to: ○ Identify variation between settings ○ Target support and intervention ● Establish expectation that: ○ All partners are accountable for locality outcomes ○ Outliers are actively challenged and supported **Maturation of Practice** ● **Localities operate as:** ○ Communities of practice, supporting workforce development ○ Platforms for peer challenge, support and improvement ● Increased consistency in inclusive practice across settings within each locality **Integration with Data & Insight** ● Use locality-level dashboards to: ○ Track performance in real time ○ Inform targeted intervention	for inclusion and transitions

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							• Embed use of data in: ○ Locality discussions ○ System governance and decision-making **Sustained Focus on Transitions and Inclusion** • Embed consistent approach to: ○ **Transitions across all phases** ○ **Inclusion as a shared responsibility** • Demonstrate early impact in: ○ **Reduced escalation at key transition points** ○ **Improved experience for children and families**	
	Early Years *Core Minimum Requirement – CMR7, CMR25, CMR26, CMR27*	Head of Service, Best Start in Life	*Continued to refine Transition Network Meeting approach based on evidence gathered during current round of networking sessions* *Recruit Best Start Inclusion Practitioners via Portage Service* *Co-production of Wokingham's Speech Language and Communication framework based on feedback from SLC provider survey – decision reached as to mix of*	*Baseline - % of education settings and % of PVI settings involved in Transition Network Meeting* *Feedback from education settings & PVI regarding impact – confidence measures re; data sharing on transition*	*Continue roll-out of Wokingham Early Impact Group (WEIP) as a universal offer – tranche 2 of 6 new clusters identified and launched (in alignment with wider EAH Cluster arrangements)* *Commence roll-out of Wokingham's Speech Language & Communication framework across the EYFS* *Launch Best Start Inclusion Practitioners via Family Hubs* *Begin delivery of Early Years Sufficiency Action Plan*	*• No of WEIP clusters* *• % of settings involved in WEIP clusters* *• stablising the gaps in GLD between FSM cohort and WBC average* *Early indicators of shift:* *• increase in SEN Support (earlier identification)*	*Continue 'test and learn' evaluation of Wokingham Early Impact Group (WEIP) as a universal offer – refine model and start planning for tranche 3 of new clusters. Roll out audit and peer review across clusters* *Agree any changes to Transition Network processes and plan for 2027 cohort* *Evaluate sufficiency actions and refine plan*	*Early impact:* *• reduction in variation across settings* *• narrowing the gaps in GLD between FSM cohort and WBC average* *• increase in needs met at SEN Support level*

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		evidence based interventions and frameworks. *Development of online EYFS 'Hub' or web-page for resource sharing across the network* *Update Early Years Ordinarily Available Provision document based on new Ofsted Framework* *Core Best Start data set agreed and development of Best Start Dashboard commences*	*Wokingham model EYFS framework agreed and signed off by WBEP*		*• increased E.Yrs identification rates*	*Target support to address GLD variation across settings via WEIP network*	
Access to specialist support and local placements							
Experts at Hand *Core Minimum Requirement – CMR7, CMR8,*	Local Authority: WBC Commissioner Berkshire West LA: RBC, WBC, WBC (SEND Centre of Excellence) Partnership: ● schools, early years and FE settings ● health partners via LA-held commissioning and	**Joint commissioning and governance** • Confirm WBC lead commissioner / ICB co-commissioner model in all plan documents and governance papers. Establish named SRO, named ICB counterpart, programme board, operational group, and clinical governance route. Finalise Year 1 commissioning approach and draft legal / procurement / IG route. Draft specification and contract reporting requirements. Agree escalation route and risk register. **Wokingham E@H service model** • Finalise Wokingham definition of E@H and	• A formally agreed joint commissioning position, with WBC as lead commissioner and the ICB as co-commissioner, including governance, reporting and risk ownership clearly defined • A draft but coherent Wokingham Experts	**Joint commissioning and governance** • Finalise and sign Year 1 commissioning / mobilisation agreement. Confirm funding route, review points and reporting cadence. Implement contract / mobilisation governance and first formal reporting cycle. **Wokingham E@H service model** • Launch agreed Year 1 model in first-wave. Test consultation, observation, modelling, implementation support, group / cohort work, and advice routes. **Universal Offer / OAP integration** • Use live E@H activity to support education	● A live jointly commissioned Year 1 model in operation, with agreed reporting cycles and governance functioning ● First-wave clusters/localities actively delivering E@H, with: ● termly multi-agency	**Joint commissioning and governance** • Review commissioning performance in practice. Refine specification, KPIs, risk controls and year 2 commissioning route. Prepare senior decision on longer-term model. **Wokingham E@H service model** • Evaluate what parts of the model are working / not working. Tighten operating manual, access	• A fully operational Year 1 Experts at Hand model in initial localities, with: ○ consistent delivery cycles ○ structured multi-agency working ○ clear pathways into action and support • A refined and agreed operating model for Year 2, based on evaluation of: ○ what has worked ○ what has not worked

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		secondment arrangements • Parent Carer Forum and CYP voice • SEND Reform Programme governance	draft operating manual. Define in-scope / out-of-scope activity. Agree relationship to Universal Offer, statutory pathways and existing therapy/outreach routes. Produce school-facing summary of "what E@H is / isn't". **Universal Offer / OAP integration** • Map E@H explicitly to Universal Offer / OAP. Define the 3–4 priority inclusion themes (e.g. ASD, SLCN, SEMH, EBSA). Agree evidence-based approaches and how E@H will strengthen universal and targeted responses. Link to peer review / self-audit / inclusion strategy development. **Cluster / locality design** • Co-design cluster model with schools, EY and post-16. Confirm principles: ownership of child journey, alignment with Family Hubs, manageable size, not a budget-holding structure. Agree first-wave pilot clusters/localities and local leads. **Equitable access and prioritisation** • Draft and agree prioritisation framework so access is not determined by most proactive education settings. Use available data, locality intelligence, risk indicators and agreed criteria. Include EY and post-16 considerations.	at Hand service model, with clear articulation of: • what E@H is and is not • how it integrates with the Universal Offer and existing pathways • A defined access and prioritisation framework, ensuring equity of access (not demand-led by individual education settings) • An agreed cluster/locality design, including identified pilot areas and local leadership • A clearly defined Year 1 workforce model, including roles,	settings with agreed priority areas. Start aligning cluster demand themes to peer review / school improvement findings. **Cluster / locality design** • Run first termly planning cycles in live clusters. Test what works around composition, cadence, participation and action planning. **Equitable access and prioritisation** • Apply prioritisation framework in live settings and test whether access is equitable. **Mini-MAIC / planned MDT delivery** • Begin live mini-MAIC cycles in first-wave clusters / education settings. Use actions to drive modelling, group work and implementation support. **Workforce model** • Recruit / align first-wave capacity, including assistants and trainees where possible. Confirm role descriptions and deployment model. **SEND Centre of Excellence / workforce pipeline** • Launch initial Academy elements: induction, supervision framework, assistant/trainee pathways, role-specific training. **Advanced practitioner / strategic clinical** leadership • Put role / function into operation or	planning cycles in place • clear action planning and follow-up activity underway • Initial workforce mobilised, including: • core practitioners (EP, SaLT, OT, outreach) • first assistant/trainee roles deployed where possible • A functioning delivery model in practice, including: • consultation • observation and modelling • cohort/group support • implementation follow-up • Evidence of alignment with the Universal	criteria and role clarity. **Universal Offer / OAP integration** • Review how effectively E@H is strengthening the Universal Offer in practice. Agree refinements for Year 2. **Cluster / locality design** • Review cluster effectiveness, participation and equity of access. Amend geography / composition / cadence where needed. **Equitable access and prioritisation** • Review access patterns and adjust criteria where required. **Mini-MAIC / planned MDT delivery** • Refine format, frequency, disciplines involved and follow-up process. **Workforce model** • Review actual vs assumed capacity, productivity and supervision burden. Update Year 2 assumptions. **SEND Centre of Excellence / workforce pipeline**	○ what needs scaling or redesigning • A robust and reliable performance dashboard, demonstrating: ○ activity and reach across settings ○ equity of access ○ workforce utilisation ○ emerging outcome indicators • Clear evidence of additionality, showing how E@H: ○ differs from previous arrangements ○ strengthens early intervention ○ improves system coordination • Strengthened alignment to system priorities, including: ○ reduction in variation across education settings ○ improved support at SEN Support level ○ increased use of Tier 2 intervention • Early trajectory indicators showing:

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			Mini-MAIC / planned MDT delivery • Confirm purpose, format and membership of mini-MAICs / termly planning meetings. Define expected outputs: themes, agreed actions, follow-up, review. **Workforce model** • Confirm Year 1 workforce assumptions across EP / SaLT / OT / assistants / trainees / specialist teaching / programme support / data support. Agree what is direct E@H capacity and what remains core/statutory. **SEND Centre of Excellence / workforce pipeline** • Confirm Academy purpose, governance, curriculum outline, progression routes, supervision model and delivery partnerships. Identify required trainee/assistant pathways. **Advanced practitioner / strategic clinical leadership** • Agree the strategic clinical leadership within E@H. Proposal 1 SLAP across Berkshire West. **Data and baseline dashboard** • Establish Year 1 baseline for activity, waiting times, staffing, school coverage, existing routes, and wider inclusion indicators. Confirm KPI set and reporting format. **Additionality / distinction from existing services**	supervision and indicative capacity • A baseline dataset and KPI framework, covering: • current activity levels • access patterns • workforce deployment • inclusion indicators (attendance, exclusions, SEN Support variation, AP use) • A co-produced engagement and communications plan with education settings, PCF and CYP • A defined SEND Centre of Excellence model (design	mobilisation, with explicit remit for pathway design, clinical interface and workforce development **Data and baseline dashboard** • Produce first live reporting cycle on activity, timeliness, staffing, reach, and initial feedback. **Additionality / distinction from existing services** • Test and monitor whether activity is genuinely additional and not being absorbed into pre-existing pathways. **Co-production and communications** • Use live delivery feedback to update communications and pathway explanation. **Early years** • Begin early delivery / first wave testing in agreed EY contexts. **Post-16 / out-of-area FE** • Begin engagement with post-16 providers / out-of-area mainstream FE settings attended by Wokingham young people. **Impact and learning review** • Mid-year learning review completed and used to refine Q4 and Year 2 planning.	Offer, with E@H supporting priority needs (ASD, SLCN, SEMH, EBSA) • A live data dashboard, showing: • activity levels • reach across settings • response times • emerging patterns of need • Early evidence that access is being applied more equitably across clusters, not driven by demand from individual education settings • Early SEND Centre of Excellence components	• Review what the Academy must scale in Year 2 (e.g. curriculum, placements, supervision capacity, university links). **Advanced practitioner / strategic clinical** leadership • Review value added and decide long-term Year 2/3 configuration. **Data and baseline dashboard** • Refine KPI definitions and strengthen Wokingham-level reporting. Integrate with wider SEND dashboard. **Additionality / distinction from existing services** • Refine contract/reporting to tighten distinction and assurance. **Co-production and communications** • Review trust, clarity and usefulness of information. **Early years** • Evaluate and refine EY design, especially around PVI access and	○ improved school confidence ○ clearer pathways and decision-making ○ reduced duplication across services • A functioning SEND Centre of Excellence, with: ○ active training and supervision ○ initial pipeline of assistant/trainee roles ○ clear Year 2 expansion plan • A clear Year 2 implementation plan, including: ○ scaling across additional clusters/localities ○ workforce expansion ○ full embedding of governance and reporting • A completed Year 1 evaluation, evidencing: ○ system learning ○ impact to date ○ readiness for scale Trajectory outcome: Wokingham moves from early operational model → tested, evidenced and scalable system, ready for borough-

2026-27 Local delivery plan		Q2		Q3		Q4	
		• Explicitly define in specification what E@H funds and delivers that is "over and above" current routes. Build this into contract and reporting logic. **Co-production and communications** • Co-produce school- and family-facing narrative and materials. Establish input route with PCF, CYP and settings into service design. **Early years** • Finalise the Year 1 early years E@H model, linked to Best Start, Family Hubs, language screening and EY pathways. Clarify role of maintained nurseries, school nurseries and PVIs. **Post-16 / out-of-area FE** • Define Year 1 approach for local and out-of-area post-16 providers. Clarify access, communication and information-sharing expectations. **Impact and learning review** • Establish year-end evaluation framework from the outset, including school voice, family voice, CYP voice and system metrics.	stage), including governance, structure and delivery approach • A clearly articulated additionality narrative, evidencing how E@H will add value beyond existing services • Recruitment of roles as per recruitment schedule. **Trajectory outcome:** Wokingham moves from conceptual / fragmented model → clearly defined, agreed and measurable mobilisation design, ready for live testing.		operational, including: ● supervision structures ● training pathways ● initial workforce development activity ● First system learning captured, including: ● school feedback ● practitioner feedback ● operational risks and gaps Trajectory outcome: Wokingham moves from design → early operational delivery, with a functioning model that is being tested, refined and understood across the system.	transition to school. **Post-16 / out-of-area FE** • Refine model and expectations for Year 2. **Impact and learning review** • Complete Year 1 evaluation and recommendations for Year 2 scale / refinement.	wide embedding in Year 2.
Inclusive Provision/Alternative Provision *Core Minimum Requirement – CMR4, CMR7, CMR8*	Head of Strategic Commissioning	Bulmershe and Waingels (successful bidders in 1st round of APDF) to open their in-house AP to their own pupils. Impact to be fed back to SENDAP.	High Tier 3 reliance	Primary schools can bid for IIF to develop provision within their setting. LA-level SEND data sets will be shared with education settings to understand need	Increased Tier 2 use	Successful bidders will develop their in-house AP internally to meet the needs of their pupils as well as	Base line number of children accessing tier 2 support (increase) Number of children reintegrating to

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			Second round of bidding for alternative provision development fund (APDF) to develop in-house AP within Secondary schools will be complete. Foundry early intervention model (tier 2) to be launched September 2026, enabling enhanced outreach, in-reach and support programmes for in-school support for pupils at tier 2. All support to be time-limited with additional support for reintegration. Inclusion Innovation Fund (IFF) criteria to be reviewed and amended to develop tier 1 and 2 support in Primary. Develop monitoring and evaluation framework		and trends to develop AP offer. Develop monitoring and evaluation for internal AP/inclusion units Scope out phase 2 of Foundry College (PRU) re-commissioning activity for September 2028 and beyond developing project group and linking to cluster model/E@H		test out their delivery models. Monitoring and evaluation of pupils at tier 3 support; understanding their journey and any missed opportunities for earlier intervention to prevent escalation	mainstream school from tier 2 (12 weeks) recorded and baselined (increase) Small reduction in new PEX for preventable reasons Staff report higher confidence in meeting needs of at risk pupils (for PEX and S19) Families and YP report improved attendance (and engagement/belonging) Internal AP impact baselined (early impact to include school level reduction in commissioning external/offsite)

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Early Years *Core Minimum Requirement – CMR7, CMR8, CMR25, CMR26, CMR27*	Head of Service, Best Start in Life	• Map and analyse existing specialist support across the system, including access to EP, S&LT, OT & Health Visiting across early years foundation stage. • Identify gaps in provision and support, in early years and for most common need types • Design Early Years Experts at Hand model aligned to Universal Offer and Best Start, ensuring: • timely access to specialist support without reliance on EHCP • equitable access across settings (not dependent on individual school capacity) • integration with existing commissioned services • Agree KPIs that measure reach and effectiveness of the local specialist offer and build these into Early Years Panel process	KPIs TBC	• Implement agreed Experts at Hand model aligned to Universal Offer and Best Start. • Negotiate consistent S&LT / OT / Health Visitor input at an expanded Early Years Support Panel	Implement measures of level and effectiveness of data sharing at panel, e.g.: % of cases arriving at panel with relevant data provided in referral % of cases arriving at Panel where an intervention plan is agreed at first meeting Time between initial referral and intervention plan being implemented NB – These remain examples until agreed in Q1	• Implement redesigned Early Years Support Panel to include consistent S&LT / OT / Health Visitor input. • Feedback loops established ensuring that needs presented at EYs Support Panel shape development of appropriate training modules, & group consultation.	Implement measures of level and effectiveness of data sharing at panel, e.g. % of cases arriving at panel with relevant data provided in referral % of cases arriving at Panel where an intervention plan is agreed at first meeting Time between initial referral and intervention plan being implemented NB – These remain examples until agreed in Q1
Post-16 *Core Minimum Requirement – CMR7, CMR8, CMR28, CMR29, CMR30*	Post-16 / PFA Strategic Lead Post-16 Participation & Adult Learning	**Define and design the system** ○ Finalise and agree Post-16 SEND Hub service specification, funding model and delivery arrangements	100% completion of service specification, funding model and provider agreements	**Launch and implement** • Launch and operationalise the Post-16 SEND Hub, supporting initial cohort • Implement post-16 pathway framework in practice, including:	Post-16 Hub live with first cohort engaged and pathways in active use across referrers	**Embed and strengthen consistency** • Finalise and embed a fully defined graduated post-16 pathway	Increasing proportion of young people routed through defined pathways (reduction in ad hoc / reactive decisions vs Q2 baseline)

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			○ Secure provider delivery agreements (Activate Learning and partners)
			○ Complete a full mapping of post-16 provision, sufficiency gaps and out-of-borough placements, including:
			  ○ Middle cohort (EBSA/SEMH /anxiety)
			  ○ SEN Support and NEET cohorts
			  ○ Home educated young people
			○ Develop and agree a system-wide post-16 pathway framework, including:
			  ○ Re-engagement, Hub, FE, supported internships and employment pathways
			  ○ Draft entry/exit criteria and referral routes via SEND panel
			○ Begin strengthening transition planning from Year 9 onwards, including:
			  ○ Clear annual review expectations
			  ○ Multi-agency alignment (SEND, social care, health)
			○ Initiate co-production activity to develop:
				Baseline established: full post-16 provision/gap map and defined pathway framework agreed	○ Referral routes via SEND panel
					○ Structured entry and exit processes across pathways
					• Establish re-engagement pathways, including:
					○ Confidence-building and skills development
					○ Routes back into education or employment for NEET/disengaged young people
					• Embed consistent transition planning processes, including:
					○ Earlier planning from Year 9
					○ Multi-agency coordination across SEND, education, social care and health
					• Publish and communicate:
					○ Post-16 options guide
					○ Updated Local Offer content (co-produced with families and young people)
					• Introduce data collection and monitoring processes, including:
					○ Participation and engagement
					○ NEET risk indicators
					○ Progression tracking
					• Strengthen employment pathways, including:
					○ Employer engagement and work experience opportunities
					○ Expansion of supported internships through
						≥ initial data visibility established: routine tracking of participation and NEET risk in place	framework, including:
							○ Clear entry criteria, progression routes and outcomes across all pathways
							• Review and evaluate the Post-16 SEND Hub, including:
							○ Engagement, cohort suitability and early outcomes
							○ Implications for sufficiency and future expansion
							• Embed re-engagement pathways linked to progression, ensuring:
							○ Mentoring and support are coordinated
							○ Clear routes into education, training or employment
							• Embed consistent transition planning across all partners, ensuring:
							○ Year 9+ planning is standard practice
							○ Improved quality and timeliness of annual reviews
							• Strengthen and formalise cross-border collaboration, including:
								First full cycle of quarterly data reporting and oversight in place (participation, NEET, progression)

2026-27 Local delivery plan			Q2		Q3		Q4	
			○ Post-16 options guide (OAP) ○ Improved Local Offer content ○ Begin formalising provider and cross-border relationships, including: ○ Engagement with Pan-Berkshire SEND Employment Partnership ○ Initial scoping of cross-border processes		Pan-Berkshire partnership • Formalise provider collaboration and early cross-border processes, including: ○ Named contacts and referral routes ○ Initial shared expectations across providers		○ Clear agreements with out-of-area providers ○ Consistent expectations and standards • Embed routine data reporting and oversight, including: ○ Participation ○ NEET reduction ○ Progression outcomes Use learning to inform: ○ Future Hub expansion ○ Additional provision required to meet demand and close gaps	
System leadership, local partnership collaboration and co-production								
	Partnership Governance Core Minimum Requirement – CMR9, CMR31	Director of SEND and Inclusion SEND Independent Chair	**Mobilise, define and establish governance clarity** Finalise and publish end-to-end SEND governance framework, including: • strategic boards • programme boards • operational groups • locality interfaces Clearly define and document: • roles and responsibilities across partners • decision-making authority	Governance moves from fragmented and unclear → clearly defined and documented system All partners understand: • where decisions are made	**Implement, operationalise and begin accountability** Implement new governance arrangements across all workstreams: • regular board and programme cycles operational • consistent reporting templates in place Launch locality governance arrangements, including: • clear leadership (e.g. secondary anchors / locality leads) • defined reporting into programme governance	Governance moves from structure → active system management Decisions increasingly: • data-informed • multi-agency Localities begin to operate as delivery + accountability units Early evidence of:	**Embed, strengthen accountability and evidence impact** Governance cycles fully embedded and operating consistently across all workstreams Locality governance functioning effectively, with: • regular performance review • escalation into system governance	Governance moves from **operational → effective and outcome-focused** Clear evidence that governance: • drives decisions • challenges variation • improves delivery

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2026-27 Local delivery plan			Q2		Q3		Q4	
			• escalation routes Confirm SEND Reform Programme as the single delivery framework across all partners Map current governance against delivery workstreams (Universal Offer, E@H, AP, sufficiency, co-production) Establish baseline assessment of governance effectiveness, including: • representation gaps • duplication • decision delays Define locality governance principles (role, accountability, reporting lines) Agree core partnership membership expectations, including: • schools/MATs • early years • health (ICB) • social care • PCF and CYP voice Establish initial data pack for governance (baseline dashboard aligned to reform priorities) Agree co-production expectations within governance (e.g. where and how PCF/CYP are involved)	• how to escalate issues • their role in delivery SEND Reform Plan recognised as the single organising framework Initial line of sight between strategy and delivery established	Embed routine data dashboards into governance meetings, including: • inclusion metrics (attendance, exclusions, SEN Support variation) • E@H activity and access • AP usage and escalation Begin systematic performance discussions across governance: • identify variation between settings/localities • escalate risks where required Embed co-production into governance activity, including: • PCF attendance and influence in key forums • CYP voice fed into discussions Integrate SENDIASS insight into governance reporting: • common issues • disputes • service gaps Implement early escalation and dispute resolution routes across governance Begin joint decision-making across partners on: • commissioning priorities • system risks • workforce and capacity gaps	• shared ownership • challenge across partners Co-production and SENDIASS begin to influence decisions, not just inform them	Strengthen accountability mechanisms, including: • clear ownership of actions • tracking of delivery milestones • escalation of underperformance Refine and embed single shared data and insight framework across governance Demonstrate use of governance to: • reduce variation between settings • target support more effectively Strengthen co-production within governance, including: • routine “you said, we did” reporting • evidence of PCF/CYP influence on decisions Fully integrate SENDIASS and mediation insight into governance: • track resolution rates • identify systemic issues Undertake governance effectiveness review, including: • clarity of decision-making	Partners operating with **shared accountability**, not silo responsibility Governance provides **clear line of sight from data → decision → action → impact**

2026-27 Local delivery plan			Q2		Q3		Q4	
							• speed of escalation and resolution • partner engagement and accountability Produce Year 1 governance impact report, evidencing: • improved clarity and grip • stronger partnership working • early system improvements	
	Inclusion Academy/Centre of Excellence	To be co-designed	• **Academy establishment** Formally establish the Academy within SEND reform governance, with agreed purpose, scope and delivery role as the foundation of system change. Define how it underpins the Universal Offer, Experts at Hand and locality delivery. • **Workforce and roles** Map current workforce and design Academy roles, including specialist, assistant and supervision capacity, aligned to system need. • **Practice and delivery alignment** Define how the Academy supports consistent delivery of the Universal Offer, early intervention and Experts at Hand, including expectations for settings. • **Locality integration**	System position • No single infrastructure currently binds workforce, practice and delivery • SEND Centre of Excellence defined as the central system mechanism Key trajectory shifts Academy: ○ Clearly articulated as the foundation	• **Academy establishment** Finalise and implement the operating model, ensuring all partners understand how the Academy functions and supports delivery. • **Workforce and roles** Begin deployment of roles and implementation of supervision and development activity through the Academy. • **Practice and delivery alignment** Test and refine how practice is modelled, supported and quality assured through the Academy in localities. • **Locality integration** Test locality-based delivery supported by the Academy, including multi-agency working and shared problem-solving. • **Co-production and engagement**	System position • Academy moves from design into live operation Key trajectory shifts Academy: ○ Operating model live and being used by partners ○ Recognised as the route for workforce and practice support Workforce:	• **Academy establishment** Complete initial evaluation and refinement of the Academy model, confirming readiness for Year 2 scaling. • **Workforce and roles** Review workforce effectiveness and confirm Year 2 expansion of the pipeline. • **Practice and delivery alignment** Confirm consistent approaches and refine delivery guidance ready for scale. • **Locality integration** Evaluate locality effectiveness and confirm	**System position** • Academy embedded as core system infrastructure **Key trajectory shifts** Academy: • Fully embedded in governance, delivery and planning cycles • Recognised as the **central delivery mechanism across the partnership** Workforce: • Coherent workforce

2026-27 Local delivery plan			Q2		Q3		Q4	
			Align Academy support with locality structures, ensuring clear routes for access, support and collaboration across settings. • **Co-production and engagement** Establish co-design approach within the Academy, including structured involvement of families, CYP and settings in shaping delivery. • **Data and evaluation** Establish baseline measures linked to workforce confidence, consistency and access to support.	of SEND reform ○ Governance, scope and operating model agreed Workforce: ○ Full baseline established (capacity, gaps, training activity) Practice: ○ Shared expectations for inclusive practice defined System: ○ Clear link established: Academy → Universal Offer → Experts at Hand → locality delivery Data: ○ Baseline measures agreed (coverage, engageme	Run co-design cycles and integrate feedback into workforce development and practice expectations. • **Data and evaluation** Produce initial monitoring and review whether delivery is achieving intended changes.	○ Training, development and supervision offer underway ○ Initial engagement across schools/settings evident Practice: ○ Consistent approaches starting to emerge (shared language, expectations) System: ○ Localities accessing support through the Academy ○ Improved coordination between education, health and care Data: ○ First system insight available	model for Year 2 scale. • **Co-production and engagement** Demonstrate how co-production has influenced the Academy model and wider system. • **Data and evaluation** Complete Year 1 evaluation linking Academy delivery to early system improvements.	development model in place • Increased participation and early signs of improved capability Practice: • Clear reduction in variation across settings • More consistent graduated response in operation System: • Locality delivery model stable and consistently supported • Clear linkage between strategy, delivery and outcomes Data: • Evidence of early system impact (confidence, consistency, access trends)

2026-27 Local delivery plan			Q2		Q3		Q4	
				nt, confidence, access) A defined and agreed system model with clarity on how the Academy underpins the whole plan.		(who is engaging, what support is being used) A functioning system mechanism, with early evidence of behavioural and practice change.		• Ability to identify variation and target improvement
	Shared Data and Maturity Core Minimum Requirement – CMR33	Local Authority: Lead / Convenor Partnership: • education settings and trusts • health partners (ICB, providers and community services) • social care and early help • Parent Carer Forum and CYP voice • SEND Reform Programme	**Confirm Data & Insight governance, ownership and decision-rights** Embed the Data & Insight workstream within existing SEND Reform Programme governance, confirming: • LA responsibility for convening and holding the SEND insight function • partnership accountability for supplying, validating and using data • escalation routes where data indicates risk, drift or inequity Agree principles to ensure SEND data and insight: • informs action, not just reporting • supports early intervention rather than retrospective assurance	• Governance and ownership for SEND Data & Insight confirmed • Shared SEND data and insight framework agreed • SEND JSNA scope and priority cohorts defined • Early insight products commissioned and in development	**Produce and embed early insight products** Deliver initial SEND insight products that: • identify pressure points and emerging need • highlight inequity in access and experience • support targeted Experts at Hand deployment Insight will deliberately combine: • quantitative data • lived experience feedback • practitioner intelligence Products will be designed for decision-making forums, not technical audiences. **Use insight to inform delivery and intervention** Ensure insight is routinely used to:	• SEND insight products in regular use • Evidence of earlier identification of risk and pressure • Delivery decisions demonstrably informed by data and insight	**Consolidate insight-led assurance** Use data and insight routinely to: • support SEND assurance and escalation • monitor quality of EHCPs and provision delivery • understand whether reforms are improving lived experience Strengthen alignment between data, QA activity and practice improvement. **Review effectiveness of the Data & Insight model** Review:	• Data & Insight embedded as core SEND infrastructure • Stronger assurance and confidence in system oversight • Clear roadmap for expanded, mature use in Years 2–3

2026-27 Local delivery plan			Q2		Q3		Q4	
		governance	• is used consistently across education, health and care Establish a time-limited Data & Insight task-and-finish group to oversee Year 1 mobilisation and alignment. Define the shared SEND data and insight framework Q2 focuses on clarity and discipline, not volume. This includes: a) Agreeing priority SEND insight questions Confirm the small number of high-value questions the system needs insight on, covering: • patterns of need and emerging demand • access, timeliness and pathway performance • inclusion and mainstream sustainability • quality of plans, provision and annual review • lived experience and equity • financial pressure and placement reliance b) Aligning indicators and definitions For each priority area: • agree common definitions and data sources • identify where data quality needs to improve • confirm reporting cadence and audiences		• target Experts at Hand pilot activity • shape Universal Offer development and support to settings • inform SEND sufficiency and commissioning discussions Insight will be tabled as a standing input to relevant SEND governance and delivery forums. **Build data quality and assurance discipline** Identify priority data quality gaps that limit effective insight and: • agree improvement actions with partners • standardise reporting where feasible • clarify expectations where statutory or contractual levers apply This phase focuses on **fit-for-purpose data**, not perfection		• usefulness of Year 1 insight products • effectiveness of governance and escalation routes • maturity of the SEND JSNA and needs profiling Refine the model to support greater sophistication and scale in Years 2–3. **Prepare for expanded use in Years 2–3** Confirm readiness to: • expand SEND JSNA products • deepen equity and outcomes analysis • support more proactive commissioning and sufficiency planning Agree priorities for the next phase of SEND intelligence maturity.	

2026-27 Local delivery plan			Q2		Q3		Q4	
			This framework will align explicitly to: ● national SEND reform measures ● Local SEND & Inclusion Strategy priorities ● inspection and assurance requirements **SEND JSNA scoping and needs-profiling foundations** In Q2 the partnership will scope and commence a SEND-specific JSNA by: ● agreeing the purpose and questions the JSNA must answer ● identifying core datasets across education, health and care ● prioritising cohorts, geographies and phases for early focus Initial outputs will include: ● early needs profiling to inform Year 1 commissioning and delivery ● identification of cohorts at risk of exclusion, delay or poor outcomes This is deliberately framed as an **iterative product**, not a one-off document. **Integration with delivery workstreams** Work with Experts at Hand and Universal Offer leads to:					

2026-27 Local delivery plan			Q2		Q3		Q4	
			• clarify what insight is needed to support Year 1 delivery and test-and-learn • ensure early data products directly support operational decisions • avoid parallel or duplicative reporting					
	Voice of Children and Young People *Core Minimum Requirement – CMR31, CMR38*	Children's Services Participation Manager	Strengthen and formalise links between: • SAY YES • Young Experts • Participation Team • SEND governance structures • SENDIASS Develop a clear participation framework specifically for SEND, outlining: • Routes for engagement • Standards for inclusive practice • Expectations for services Begin to implement consistent data capture of children and young people's views.- how? Establish a central mechanism for collating and reporting themes from engagement activity.		• Expand school workshops (planned rollout from September 2026) to increase reach and diversity. • Embed formal feedback loops: ○ "You said, we did" reporting ○ Regular reporting into SEND governance boards • Strengthen advocacy pathways, ensuring all SEND children and young people know how to access support. • Increase visibility and influence of SAY YES, including structured links into decision-making boards. • Develop reporting to evidence how young people's views influence change. • Build capacity by training staff in participation and co-production approaches. This work will continue over Q2 and Q3		• Expand school workshops (planned rollout from September 2026) to increase reach and diversity. • Embed formal feedback loops: ○ "You said, we did" reporting ○ Regular reporting into SEND governance boards • Strengthen advocacy pathways, ensuring all SEND children and young people know how to access support. • Increase visibility and influence of SAY YES, including structured links into decision-making boards. • Develop reporting to evidence how young people's	

2026-27 Local delivery plan		Q2		Q3		Q4	
						views influence change. Build capacity by training staff in participation and co-production approaches	
Co-Production *Core Minimum Requirement – CMR31, CMR37, CMR38*	SEND Voices Director SEND and Inclusion	Embed and operationalise the Co-Production Charter and participation framework from the outset of delivery • Co-produce, agree and implement the Co-Production Charter as the system-wide operating model, including: ○ Defined roles, responsibilities and expectations across all partners ○ Clear ownership routes and accountability for responding to family feedback • Introduce and apply a shared participation framework (co-production, co-design, engagement, consultation), ensuring all workstreams explicitly define how and when each level will be used • Formalise termly 'SEND Update for Families' sessions as a core engagement forum: ○ Planned and scheduled across the academic year ○ Clear expectations for attendance, including mandatory representation from education, health and care partners	• Co-Production Charter agreed, implemented and understood across all partners • Participation framework (co-production, co-design, engagement, consultation) operational and being applied across workstreams • Governance routes established for capturing, tracking and responding to feedback • All engagement activity aligned to consistent "You Said, We Did" principles	Deliver co-production and co-design activity at pace, ensuring visible influence on system design and delivery • Ensure consistent partner attendance and active participation across all engagement activity, in line with agreed expectations in the Co-Production Charter • Implement live "You Said, We Did" reporting, demonstrating: ○ actions taken in response to previous feedback ○ timelines and ownership for outstanding actions • Deliver targeted co-production and co-design activity linked to priority reforms, including: ○ Focus groups and co-design sessions for Universal Offer and Experts at Hand ○ Explicit use of participation levels (co-production / co-design / engagement) aligned to each activity ○ Mixed delivery model (online evening sessions, daytime and in-person opportunities) • Begin systematic capture and analysis of	• First full cycle of co-produced and co-designed activity delivered across priority reforms • Clear, real-time evidence of feedback influencing service design and delivery decisions • Increased participation from families and CYP, with improved inclusivity and accessibility • Consistent application of participation levels across all workstreams	Demonstrate impact, accountability and system-wide embedding of co-production • Provide clear, tangible examples of system changes driven by co-production, including evidence of influence on service design, commissioning and delivery decisions • Fully embed co-production within governance and decision-making, including: ○ Formal, routine reporting of co-production activity and impact to SEND Assurance and partnership boards ○ Clear system responses and ownership for priority issues raised • Strengthen targeted co-	• All engagement activity demonstrates clear and consistent "You Said, We Did" outcomes • Co-production is visibly and routinely influencing system decision-making and service design • Strong governance oversight of co-production, with clear accountability and system responses • Improved trust from families, evidenced through increased confidence in transparency and responsiveness • Initial integration of lived experience into system insight, informing performance and improvement discussions

2026-27 Local delivery plan			Q2		Q3		Q4	
			• Introduce structured pre- and post-engagement processes: ○ Pre-meets to co-design agenda and content with PCF and CYP ○ Post-meets to review actions, ownership and delivery progress • Establish monthly operational meetings between LA, PCF and programme leads to align co-production activity with delivery milestones • Implement a consistent "You Said, We Did" accountability model, ensuring feedback is: ○ systematically captured ○ tracked with named ownership ○ routinely reported and visible to families • Develop and publish a 12-month co-production and co-design plan, aligned to programme delivery milestones across all priority workstreams	• Clear visibility for families on how their feedback will influence delivery from the outset	feedback themes, ensuring: ○ feedback is consolidated and categorised at system level ○ priority issues are escalated through governance with clear system responses • Improve the quality and accessibility of communication: ○ reduce reliance on technical or corporate language ○ clearly articulate practical impact and changes for families • Demonstrate that engagement activity is directly influencing delivery decisions in real time, not retrospectively	• Noticeable improvement in clarity, accessibility and usefulness of communication with families	production and co-design activity, including: ○ Expanded focus groups linked to service design, implementation and evaluation ○ Increased use of surveys and rapid feedback tools for responsive insight • Improve transparency and system accountability by: ○ openly acknowledging challenges and areas for improvement ○ demonstrating consistent ownership of issues across partners • Begin formal integration of co-production insight into Data & Insight dashboards, ensuring: ○ feedback themes inform performance discussions ○ links between lived experience and quantitative data are visible and routinely used	

2026-27 Local delivery plan		Q2		Q3		Q4	
Encouraging inclusive culture and behaviours							
	Director SEND and Inclusion	**Mobilise & define** **1. System culture definition & expectations** Define and publish shared inclusion principles (early help, shared responsibility, inclusion-first). Align language across SEND Plan, Universal Offer, comms and leadership forums. **2. Universal Offer as behavioural anchor** Finalise co-produced Universal Offer and explicitly link to expectations of inclusive practice and graduated response. **3. Workforce confidence & SEND Centre of Excellence** Launch SEND Centre of Excellence design and begin workforce engagement (training, comms, expectations). Focus on early intervention, SEN Support and inclusive practice. **4. Locality & peer learning culture** Establish locality-based discussions and peer review approach. Agree principles for shared accountability and challenge. **5. Co-production as a system behaviour** Establish structured co-production framework (planned engagement, clear	Culture shift clearly defined and communicated Universal Offer and co-production frameworks established Baseline data and expectations in place Workforce, governance and localities aligned to new direction	**1. System culture definition & expectations** Reinforce expectations through leadership, locality and governance discussions. Embed language into school and service practice. **2. Universal Offer as behavioural anchor** Use Universal Offer in peer review, QA and locality discussions to challenge and support practice. **3. Workforce confidence & SEND Centre of Excellence** Deliver training, coaching and modelling through E@H and Academy. Embed into practice. **4. Locality & peer learning culture** Implement structured peer review and locality learning cycles. Identify and address variation. **5. Co-production as a system behaviour** Deliver regular engagement and improve "you said, we did" reporting. Strengthen influence on decision-making. **6. SENDIASS integration & early resolution** Increase SENDIASS involvement in early resolution and service feedback loops.	New behaviours actively being demonstrated in practice Workforce confidence increasing Localities and peer challenge functioning Co-production and SENDIASS visibly influencing decisions	**1. System culture definition & expectations** Review consistency of understanding and refine messaging based on feedback and data. **2. Universal Offer as behavioural anchor** Evaluate impact of the Universal Offer on behaviour and practice consistency. **3. Workforce confidence & SEND Centre of Excellence** Review workforce confidence and capability through feedback and QA. Refine Year 2 delivery. **4. Locality & peer learning culture** Evaluate impact of locality working on behaviour, consistency and outcomes. **5. Co-production as a system behaviour** Review impact of co-production on trust, responsiveness and decision-making.	Inclusive behaviours becoming consistent across most settings Early resolution improving and escalation reducing Data shows early impact on system variation and confidence Clear evidence of culture shift ready to scale into Year 2

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2026-27 Local delivery plan			Q2		Q3		Q4	
			ownership, feedback loops). Co-design with PCF and CYP. **6. SENDIASS integration & early resolution** Clarify SENDIASS role in early support, mediation and system insight. Strengthen links to governance and improvement. **7. CYP voice embedding** Define approach to systematically capturing CYP voice separately from parents. Establish mechanisms and routes. **8. Mediation & dispute resolution culture** Map current mediation and complaint pathways. Define early resolution principles and expectations. **9. Communication & transparency** Deliver clear communications on reform vision (early help, inclusion, Families First alignment). Simplify messaging. **10. Data & culture alignment (measurement of behaviours)** Establish baseline measures for culture (confidence, variation, exclusions, trust, engagement). **11. Belonging strategy & measurement framework** Initiate development of a co-produced Education Belonging Strategy. Begin co-design of a shared definition of belonging and map existing inclusion frameworks into a single "belonging thread". Identify proxy indicators (attendance, engagement, behaviour, participation, lived experience) and define the		**7. CYP voice embedding** Integrate CYP insight into governance, service design and evaluation. **8. Mediation & dispute resolution culture** Embed early resolution approaches across services and monitor consistency. **9. Communication & transparency** Strengthen transparency through regular updates and "you said, we did". **10. Data & culture alignment (measurement of behaviours)** Embed data into governance and locality discussions to drive behaviour change. **11. Belonging strategy & measurement framework** Publish a co-produced definition of belonging and develop a draft Education Belonging Strategy. Establish baseline data across agreed proxy indicators (attendance, engagement, behaviour, participation, lived experience) and develop a borough-wide belonging index and dashboard framework aligned to performance and governance.		**6. SENDIASS integration & early resolution** Review mediation, tribunal trends and SENDIASS feedback themes. **7. CYP voice embedding** Review quality and impact of CYP engagement. Strengthen approach where needed. **8. Mediation & dispute resolution culture** Review complaints, disputes and mediation patterns. Refine approach. **9. Communication & transparency** Evaluate effectiveness of communication and adjust approach. **10. Data & culture alignment (measurement of behaviours)** Review trends and link data to culture change outcomes. **11. Belonging strategy & measurement framework** Produce and refine the draft Belonging Strategy through stakeholder engagement and governance. Pilot the belonging dashboard/index in localities or clusters, embed belonging measures within performance and	

2026-27 Local delivery plan			Q2		Q3		Q4	
			approach to developing a belonging index and dashboard.				oversight arrangements, and prepare for full consultation and rollout in Year 2.	

Projected Investment Spend per quarter *Core Minimum Requirement – CMR37*

Please specify funding source for each category

Example categories:
Programme oversight/additional leadership capacity.
Workforce
Recruitment
Workforce training and development
Data/Digital

Total Spend

Description	FTE 25/26	FTE 26/27	FTE 27/28	FTE 28/29	25/26 Budget £	Q2	Q3	Q4	26/27 Budget £	27/28 Budget £	28/29 Budget £
SALT		0.50	2.00	2.00			17,172	17,172	34,344	141,497	145,742
OT		0.50	2.00	2.00			17,888	17,888	35,775	147,393	151,815
Assistant SALT		0.00	1.75	2.00			0	0	0	103,175	121,452
Assistant OT		0.00	1.75	2.00			0	0	0	110,913	130,561
Health		**1.00**	**7.50**	**8.00**							
AEPs		4.00	5.50	7.00			107,060	107,060	214,120	303,247	397,530
Locum cover EPs		1.45	1.49	0.00			107,590	107,590	215,180	227,749	0
Permanent Eps		0.00	2.00	3.49			0	0	0	185,606	333,599
EPS		**5.45**	**8.99**	**10.49**							
Advanced SALT Practictioner		0.50	1.00	1.00			19,875	19,875	39,750	81,885	84,342
Specialist Teachers Through Specialist Outreach		1.25	3.00	3.00			51,013	51,013	102,025	252,206	259,772
Deputy Area SENCO		0.83	2.00	2.00			26,500	26,500	53,000	131,016	134,946
Specialist Teachers Through Specialist Outreach		**2.08**	**5.00**	**5.00**							
Schools Offer		**8.53**	**21.49**	**23.49**	**0**	0	347,097	347,097	**694,194**	**1,684,688**	**1,759,758**
Specialist Locum Early Years		0.00	0.40	0.40			0	0	0	26,203	26,989
Deputy EY SENCO		0.00	1.00	1.00			0	0	0	65,508	67,473
Service Manager		0.50	1.00	1.00			22,525	22,525	45,050	92,803	95,587
SEND Academy						34,000	33,000	33,000	100,000	100,000	100,000
PCF						22,000			22,000	30,000	31,500
Allocation cf to 27-28 FY (use by September 27)								181,700	181,700	-181,700	
Other Offer		**0.50**	**2.40**	**2.40**	**0**	56,000	55,525	237,225	**348,750**	**132,814**	**321,550**
Total E@H		**9.03**	**23.89**	**25.89**	**0**	56,000	402,622	584,322	**1,042,944**	**1,817,503**	**2,081,308**
Administration 10%											
Management & Administration											
Programme Manager		0.50	1.00	1.00			19,875	19,875	39,750	81,885	84,342
Service Delivery Officer		0.50	1.00	1.00			10,865	10,865	21,730	44,764	46,107
Joint Commissioning (LA & Health)		0.50	1.00	1.00			22,525	22,525	45,050	92,803	95,587
Associated expenditure							11,919	11,919	23,838	8,464	32,270
Total Administration		**1.50**	**3.00**	**3.00**	**0**	0	65,184	65,184	**130,368**	**227,916**	**258,305**
Transformation 10%											
Academy											
Interim Recruitment capacity							17,500	17,500	35,000	60,000	63,000
Technology											
Assistive Technology Library							40,000		40,000	62,000	65,100
Data Analyst		0.50	1.00	1.00			15,900	15,900	31,800	65,508	67,473
SEND Audit Tool						20,000			20,000		
Associated expenditure							1,784	1,784	3,568	40,408	62,732
Total Transformation		**0.50**	**1.00**	**1.00**	**0**	20,000	75,184	35,184	**130,368**	**227,916**	**258,305**
TOTAL					**0**	76,000	542,990	684,690	**1,303,680**	**2,273,335**	**2,597,918**

Experts at Hand Staffing in year 1

Description	Q3	Q4
SALT	1.00	1.00
OT	1.00	1.00
Assistant SALT	0.00	0.00
Assistant OT	0.00	0.00
Health	**2.00**	**2.00**
AEPs	8.00	8.00
Locum cover EPs	2.90	2.90
Permanent Eps	0.00	0.00
EPS	**10.90**	**10.90**
Advanced SALT Practictioner	1.00	1.00
Specialist Teachers Through Specialist Outreach	2.50	2.50
Deputy Area SENCO	1.67	1.67
Specialist Teachers Through Specialist Outreach	**4.17**	**4.17**
Schools Offer	**17.07**	**17.07**
Specialist Locum Early Years	0.00	0.00
Deputy EY SENCO	0.00	0.00
Service Manager	1.00	1.00
SEND Academy		
PCF		
Allocation cf to 27-28 FY (use by September 27)		
Other Offer	**1.00**	**1.00**
Total E@H	**18.07**	**18.07**
Administration 10%		
Management & Administration		
Programme Manager	1.00	1.00
Service Delivery Officer	1.00	1.00
Joint Commissioning (LA & Health)	1.00	1.00
Associated expenditure		
Total Administration	**3.00**	**3.00**
Transformation 10%		
Academy		
Interim Recruitment capacity		
Technology		
Assistive Technology Library		
Data Analyst	1.00	1.00
SEND Audit Tool		
Associated expenditure		
Total Transformation	**1.00**	**1.00**
TOTAL	**22.07**	**22.07**

Core Minimum Requirement – CMR9

2026-27 Local delivery plan: Workstream Swim lanes

Key Milestones by quarter and workstream

		Q2	Q3	Q4
Building Block 1 **Strengthening inclusion across education settings**	**Universal SEND Offer**	Refresh and expand the Ordinarily Available Provision	Launch the refreshed universal offer	Expand support for schools
		Define expectations for universal delivery at system level	Pilot self-audit with first cohort of schools	Expand and normalise peer review activity
		Embed early identification approach across Universal Offer and early years	Embed communities of practice linked to universal priorities	Embed early intervention and inclusive practice at scale
		Define expectation that all settings develop aligned inclusion strategies	Introduce an ongoing refresh cycle which is informed by feedback and emerging national standards	Strengthen governance and system grip
		Design and co-produce inclusion audit and self-evaluation approach	Strengthen early identification and inclusive practice	Consolidate learning and refine the model
		Establish universal data and insight baseline		Embed evidence-led system improvement
		Deploy investment to enable delivery at pace		
	Local Delivery Model	Model finalisation and co-production	Delivery of operational locality working	Full Implementation of Locality Governance Framework
		Establish leadership and governance foundations	Embedding of shared accountability	Performance and Accountability
		Agree metrics and establish a baseline	Integration with core programmes	Maturation of Practice
		Early Mobilisation with partners	Governance and Performance (early stage)	Integration with Data & Insight
			Transitions and Inclusion (priority focus)	Sustained Focus on Transitions and Inclusion
	Transitions	Define expectations for transition support across phases, including early years to reception	Strengthen transition processes, with improved information sharing and alignment of support	Consistent transition model embedded across all phases, reducing gaps and escalation points
	Workforce Development	Mobilise Inclusion Academy model, including training, coaching and modelling aligned to Universal Offer	Deliver training programme focused on priority needs	Embedding of supervision, coaching and ongoing development
	Early Years	Refine Transition Network Meeting approach	Roll-out of Wokingham Early Impact Group	'Test and learn' evaluation of Wokingham Early Impact Group (WEIP) as a universal offer
		Recruit Best Start Inclusion Practitioners	Commence rollout of Wokingham's Speech Language & Communication framework across EYFS	Agree changes to Transition Network processes
		Co-production of Wokingham's Speech Language and Communication framework	Launch Best Start Inclusion Practitioners via Family Hubs	Evaluate sufficiency actions and refine plan
		Development of online EYFS Hub	Begin delivery of Early Years Sufficiency Action Plan	Target support to address GLD variation across settings via WEIP network
		Update Early Years Ordinarily Available Provision		
		Agree core Best Start data set		

2026-27 Local delivery plan: Workstream Swim lanes

Key Milestones by quarter and workstream

		Q2	Q3	Q4
Building Block 2 **Access to specialist support and local placements**	**Experts at Hand**	Confirm joint commissioning and governance	Finalise Year 1 commissioning / mobilisation agreement	Review commissioning performance in practice
		Define Wokingham E@H service model	Launch Wokingham E@H service year 1 model	Wokingham E@H service model evaluation
		Map E@H to Universal Offer / OAP	Universal Offer / OAP integration using live E@H activity to support schools with priority areas	Review E@H Universal Offer / OAP integration
		Co-design cluster model with schools, EY and post-16	Run first termly planning cycles in live clusters	Cluster / locality design review
		Draft equitable access and prioritisation framework	Apply prioritisation framework in live settings	Equitable access and prioritisation review
		Define Mini-MAIC / planned MDT delivery	Begin live mini-MAIC cycles in first-wave clusters	Mini-MAIC / planned MDT delivery refinement
		Confirm Year 1 workforce model assumptions	Recruit / align first-wave capacity workforce model	Workforce model review
		Define Inclusion Academy / workforce pipeline	Launch initial Inclusion Academy elements	Inclusion Academy / workforce pipeline review
		Agree the strategic clinical leadership within E@H	Advanced practitioner / strategic clinical leadership role in operation	Advanced practitioner / strategic clinical leadership review
		Establish year 1 baseline data	Produce first live reporting cycle data and baseline dashboard	Data and baseline dashboard refinement
		Define additionality / distinction from existing services	Test and monitor Additionality activity / distinction from existing services	Additionality / distinction from existing services contract refinement
		Co-production and communications with schools	Use live delivery feedback to update communications	Co-production and communications review
		Finalise the Year 1 early years E@H model	First-wave testing of E@H model in EY contexts	Evaluate and refine EY design
		Define Year 1 approach for local and out-of-area post-16 providers	Engagement with post-16 providers / out-of-area mainstream FE settings	Refine Post-16 / out-of-area FE model
		Establish year-end evaluation framework for Impact and learning review	Mid-Year Impact and learning review	Complete Year 1impact and learning evaluation and recommendations
	Inclusive Provision / Alternative Provision	Bulmershe and Waingels Secondary Schools to open their in-house AP to their own pupils	Primary school bids for IIF to develop provision within their setting	Successful primary school development of in-house AP
		Second round of bidding for alternative provision development fund to develop in-house AP within Secondary schools	LA SEND data sets shared with schools to understand need and trends to develop AP offer	Monitoring and evaluation of pupils at tier 3 support
		Foundry College early intervention model to be launched	Develop monitoring and evaluation for internal AP/inclusion units	
		Inclusion Innovation Fund (IFF) criteria to be reviewed	Scope phase 2 Foundry College re-commissioning activity	
		Develop monitoring and evaluation framework		

2026-27 Local delivery plan: Workstream Swim lanes

Key Milestones by quarter and workstream

		Q2	Q3	Q4
Building Block 2 **Access to specialist support and local placements**	**Early Years**	Map and analyse existing specialist support	Implement agreed Experts at Hand model aligned to Universal Offer and Best Start	Implement redesigned Early Years Support Panel
		Identify gaps in provision and support	Early Years Support Panel membership expansion to include S&LT / OT / Health Visitor input	EYs Support Panel Feedback loops established
		Design Early Years Experts at Hand model aligned to Universal Offer and Best Start		
		Agree KPIs that measure reach and effectiveness of the local specialist offer		
	Post 16	Define and design the Post-16 SEND Hub system	Launch and operationalise the Post-16 SEND Hub	Embed and strengthen consistency of the post-16 pathway framework
				Use learning to inform future Hub expansion and additional provision to mee demand
Building Block 3 **System leadership, local partnership collaboration and co-production**	**Partnership Governance**	Mobilise, define and establish SEND governance framework	Implement, operationalise and begin accountability	Embed, strengthen accountability and evidence impact
	Inclusion Academy / Centre of Excellence	Formally establish the Academy within SEND reform governance	Finalise and implement the Academy operating model	Complete initial evaluation and refinement of the Academy model
		Workforce and role mapping	Workforce and role deployment	Review workforce effectiveness
		Academy practice and delivery alignment with the Universal Offer, early intervention and Experts at Hand	Test and refine how practice is modelled	Confirm consistent approaches and refine delivery guidance
		Align Academy support with locality structures	Test locality-based delivery supported by the Academy	Evaluate locality effectiveness
		Co-production and engagement with the Academy	Run co-design cycles and integrate feedback into workforce	Demonstrate how co-production has influenced the Academy model
		Establish workforce data baseline	Produce initial monitoring and review delivery	Complete Year 1 evaluation
	Shared Data and Maturity	Confirm Data & Insight governance, ownership and decision-rights	Produce and embed early insight products	Consolidate insight-led assurance
		SEND JSNA scoping and needs-profiling foundations	Use insight to inform delivery and intervention	Review effectiveness of the Data & Insight model
		Integration with delivery workstreams	Build data quality and assurance discipline	Prepare for expanded use in Years 2–3

2026-27 Local delivery plan: Workstream Swim lanes

Key Milestones by quarter and workstream

		Q2	Q3	Q4
Building Block 3 **System leadership, local partnership collaboration and co-production**	**Voice of Children and Young People**	Strengthen and formalise links between CYP forums	Expand school workshops	Expand school workshops
		Develop a clear participation framework	Embed formal feedback loops	Embed formal feedback loops
		implement consistent data capture of children and young people's views	Strengthen advocacy pathways	Strengthen advocacy pathways
		Establish a central mechanism for collating and reporting themes from engagement activity	Increase visibility and influence of SAY YES	Increase visibility and influence of SAY YES
			Develop reporting to evidence how young people's views influence change	Develop reporting to evidence how young people's views influence change
			Build capacity by training staff in participation and co-production approaches	Build capacity by training staff in participation and co-production approaches
	Co-Production	Embed and operationalise the Co-Production Charter and participation framework from the outset of delivery	Deliver co-production and co-design activity at pace, ensuring visible influence on system design and delivery	Demonstrate impact, accountability and system-wide embedding of co-production
Building Block 4 **Encouraging inclusive culture and behaviours**	**Culture and Behaviour Change**	Define and publish shared inclusion principles	Reinforce expectations through leadership, locality and governance	Review consistency of understanding and refine messaging based on feedback and data
		Finalise co-produced Universal Offer	Use Universal Offer in peer review	Evaluate impact of the Universal Offer on behaviour and practice consistency
		Launch Inclusion Academy design	Deliver training, coaching and modelling through E@H and Academy	Review workforce confidence and capability through feedback and QA
		Establish locality-based discussions and peer review approach	Implement structured peer review and locality learning cycles	Evaluate impact of locality working on behaviour, consistency and outcomes
		Establish structured co-production framework	Deliver regular engagement and improve "you said, we did" reporting	Review impact of co-production on trust, responsiveness and decision-making
		Clarify SENDIASS role in early support, mediation and system insight	Increase SENDIASS involvement in early resolution and service feedback loops	Review mediation, tribunal trends and SENDIASS feedback themes
		CYP voice embedding	Integrate CYP insight into governance, service design and evaluation	Review quality and impact of CYP engagement
		Map current mediation and complaint pathways	Embed early resolution approaches across services	Review complaints, disputes and mediation patterns. Refine approach
		Deliver clear communications on reform vision	Strengthen transparency through regular updates and "you said, we did"	Evaluate effectiveness of communication
		Establish baseline measures for culture	Embed data into governance and locality discussions to drive behaviour change	Review trends and link data to culture change outcomes
		Initiate development of a co-produced Education Belonging Strategy	Publish a co-produced definition of belonging and develop a draft Education Belonging Strategy	Produce and refine the draft Belonging Strategy through stakeholder engagement and governance

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 partnership will deliver the Year 1 plan through established SEND governance, with shared accountability across education, health, social care and the voluntary sector. Named leads, delegated authority and multi-agency task and finish groups will ensure delivery pace, coordination and collective ownership of the building blocks.

Delivery will be underpinned by an integrated partnership delivery function, drawing on existing programme management capacity across organisations. This function will coordinate milestones, manage dependencies and support prioritisation against agreed quarterly deliverables. Transition funding in Year 1 will be used to strengthen this capacity where required, including targeted programme management support to embed consistent delivery discipline and accelerate mobilisation.

A locality-based delivery model will enable partners and settings to work collaboratively around shared cohorts and communities, supporting peer review, joint problem-solving and continuous improvement as the primary environment for reform delivery.

Corporate and professional functions across the partnership (including finance, HR, commissioning and communications) will align to the reform priorities, ensuring coherent deployment of resources, aligned investment decisions and consistent system messaging. Workforce capacity will be flexed through secondments, shared roles and development routes, including the SEND Centre of Excellence.

Data and analytics capability will be established as a shared partnership function. Transition funding in Year 1 will support the development of a strengthened data and insight offer, enabling partners to agree priority measures, improve data sharing and deliver integrated reporting. This will provide timely, triangulated insight—combining performance data, quality assurance and lived experience—to inform decision-making and track impact against the plan.

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.

The 2026/27 block transfer allows WBC to continue investment in early intervention and outreach initiatives and strategy. Reforms promote a local system and the block transfer supports the authorities aim of developing additional local specialist places to reduce the dependence on expensive INMSS placements, whilst aiming to improve outcomes for our children and young people.

Specialist outreach is contributing to a robust system of support for children with additional needs within mainstream education settings and aligns with Reform guidelines. Our evaluation of outreach services and early intervention measures already in place demonstrates positive outcomes with children and education settings being better supported to achieve their targets following SEND & Inclusion visits. They have contributed to a reduction in primary school PEX for persistent disruptive behaviour and feedback from SALT support has confirmed it was valuable, well focused and sustainable.

These approaches demonstrate how the block transfer continues to strengthen support delivery for mainstream education settings, promote a stronger local offer via contributing towards building a more inclusive, provision aligned system whilst in tandem striving to improve outcomes and create a more cost efficient local authority SEND system.

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.

Core Minimum Requirement – CMR12, CMR13, CMR14, CMR15, CMR16, CMR17, CMR18, CMR19

Wokingham's capital strategy is designed to deliver a mainstream inclusive sufficiency model, aligned with the wider SEND Reform Plan. The Council published its SEND Sufficiency Statement in May 2025, mapping forecast EHCP-driven demand (largely rooted in ASD and SEMH needs), provision gaps and recommendations. The provision expansion priorities were developed through extensive stakeholder engagement with SEND Voices, where families consistently supported expansion of mainstream-led provision through resource bases and SEND units (now inclusion bases), covering a greater range of needs and a broader geographical distribution. The baseline capital programme includes six new secondary and nine new primary specialist inclusion bases. The location of the primary settings has been developed with a view to ensuring that each of the Borough's seven primary planning areas contains at least one primary Inclusion Base, to ensure that pupils have local access to inclusive mainstream settings. While inclusion bases meet most needs, a smaller cohort requires highly specialist provision. The analysis within the SEND Sufficiency Statement shows increasing need for complex placements that cannot be met within inclusion bases. To address this, the programme includes delivery of two new special free schools and expansion of an existing special school. Following the adoption of the SEND Sufficiency Statement, the Council formulated costed plans to deliver on its recommendations. This builds on the already existing SEND Sufficiency Capital Programme of £9.7 million, funded by the 2023/24 HNPCA allocation. Allocation of the £12.96 million (plus £1.5 million of WBC capital) government settlement to the delivery of a new 120-place special free school for complex needs.

£5.2 million for the delivery of an 80 place SEMH special free school within a former primary school building.

The funding of the Spencers Wood Primary School project, incorporating a 14-place Inclusion Base.

This new investment is projected to deliver 454 specialist places, in addition to the 237 places within the existing SEND Sufficiency Programme (66 having already been delivered). Wokingham's HNPCA allocation for 2024-27 totals £4.9 million, meaning that the above proposals represent >£13.2 million worth of direct investment from Council borrowing.

The future SEND Sufficiency Programme delivery schedule is set out in the below table.

2026	2027	2028	2029
Expansion of Specialist EY Setting (16x places)	Special School Expansion (28x places)	New Specialist EY Setting (16x places)	Refurbished Special Free School (c.80x places)
2x ASD Primary Resource Base (28x places)	ASD Primary Resource Base (21x places)	Early Help SEND Hub (General Provision)	SEMH Secondary Resource Base (15x places)
2x SEMH Primary Resource Base (30x places)	C&L Primary Resource Base (21x places)	New Special Free School (120x places)	Post-16 Hub III (40x places)
ASD Secondary Resource Base (25x places)	ASD Secondary Resource Base (35x places)	Spencers Wood Primary School (incl. Resource Base) (14x places)	
C&L Secondary Resource Base (25x places)	HI Secondary Resource Base (8x places)	SEMH Primary Resource Base (8x places)	
Post-16 Hub I (40x places)		SEMH Secondary Resource Base (15x places)	
		Post-16 Hub II (40x places)	
Total Places = 164	Total Places = 113	Total Places = 213	Total Places = 135
			Programme Total = 625

Reducing long-distance travel remains a key priority. The Council has undertaken a mapping exercise to determine where pupils accessing specialist provision are travelling to, broken down by primary planning area and primary need type. This is used to inform decisions on the future development of specialist provision, prioritising locating provision close to those cohorts that are presently undertaking long journeys out of Borough.

Improving mainstream estate suitability and innovation complements this growth. A dedicated Mainstream Adaptations Fund has enabled sensory environments, accessible facilities and secure access arrangements in five schools, with continued investment planned and allowed for within existing budgets. Innovative enablers, including assistive technology, will be adopted where improved outcomes can be evidenced.

8. **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 leaders and parent carer forum leaders.

Engagement and co-production are central to both the development and delivery of Wokingham's SEND Reform Plan and will continue as a structured, evolving programme across the full three-year roadmap and beyond. Since Spring 2026, intensive engagement with system leaders, practitioners, children, young people (CYP) and families has shaped priorities, tested assumptions and built shared ownership. It's not a one-off exercise; engagement, co-production and co-design will continue throughout the three-year transition to the future state, evolving as the system matures.

Engagement spans all partners: schools, early years settings, alternative provision, FE and post-16 providers (including those attended out of area by Wokingham learners), health, social care, voluntary sector, the Parent Carer Forum (PCF) and CYP. Workshops, locality discussions and targeted provider forums have addressed inclusive practice, early identification, workforce confidence and changing roles and responsibilities aligned to the Schools White Paper, including strengthened expectations of mainstream inclusion and ownership of the graduated response. Engagement with AP and FE (including out-of-area providers) is embedded through transition forums and commissioning discussions, ensuring shared accountability for preparation for adulthood outcomes.

Year 1, co-production and co-design will be explicitly embedded across core delivery areas, including the Ordinarily Available Provision, pathway design, access routes, communications and key elements of Experts at Hand. Ensuring partners, families and CYP shape how the system operates in practice, not just how it's described.

Co-production is delivered through SEND Voices Wokingham and structured CYP participation, alongside direct engagement sessions capturing lived experience. Feedback from CYP and parent carers is captured distinctly and used to inform both strategic intent and delivery design. To strengthen clarity and consistency, the partnership will establish a shared framework defining levels of involvement (co-production, co-design, engagement, consultation), aligned to emerging regional work, ensuring shared understanding of roles, expectations and decision-making.

To address the need for stronger, systematic engagement and communication, the partnership will implement a multi-year engagement and communications framework, aligned to the delivery roadmap:

- Year 1: Co-design and launch a structured engagement model, including termly partnership workshops, locality cluster forums and roadshows for schools, FE, AP and families, with quarterly co-production sessions with PCF and CYP focused on key delivery priorities
- Years 2–3: Scale and refine engagement through regular cycles of co-design, peer learning and system-wide events, ensuring consistent reach across all sectors and localities
- Ongoing: Embed engagement and co-production within governance, workstreams and commissioning cycles, directly informs decisions

These mechanisms will be supported by a communications plan co-produced with partners and families, including consistent messaging on how SEND reform, Families First and Best Start in Life operate as a single, coherent system. Structured "you said, we did" feedback loops will evidence how engagement and co-production shape delivery.

Success will be measured through participation and reach across all sectors and clusters, frequency and impact of co-production activity, and improvements in CYP and parent/carer confidence. These measures will be tracked through the SEND dashboard and reviewed through partnership governance.

Additional support from senior Department for Education officials is welcomed to contribute to key engagement events.

9. **Risks and Mitigations**

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.

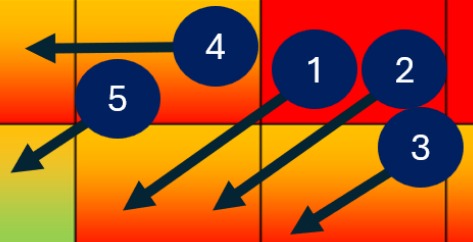
Risk	Impact	Likelihood	RAG	Mitigation	Residual RAG
1. The SEND Partnership does not operate as a single, accountable system, resulting in reform ambition not being consistently translated into shared practice or lived experience	Critical • Children, young people and families experience variability depending on setting rather than a consistent system • Pathways, thresholds and inclusion approaches remain interpreted rather than applied consistently • Universal Offer, EAH and wider reforms fail to land as a coherent, joined-up model • Inspection learning does not result in sustained, system-wide change • Inclusion and belonging remain aspirational rather than embedded and measurable	Likely	Red	• Strengthened governance with system-level accountability and escalation • Named leads across education, health and care with shared delivery expectations • Locality model to drive consistency and ownership • Deepened co-production with visible impact ("you said, we did") • Shared standards and joint workforce development • Alignment of improvement activity to inspection findings • Routine assurance and performance oversight	Amber
2. The system is unable to shift from dependency on specialist intervention to confident, early	Critical	Likely	Red	• Whole-system workforce strategy aligned to reform ambition	Amber

and inclusive practice, due to workforce capacity, capability and confidence constraints	• Early intervention does not become the default, and demand continues to escalate into EHCP pathways • Universal and targeted support is inconsistently applied, limiting impact of reforms • Workforce fatigue and competing priorities reduce momentum and quality of delivery • Recruitment and retention pressures destabilise progress • Reform delivery becomes diluted or slowed by system capacity constraints			• SEND Centre of Excellence to build a sustainable pipeline of skills • Experts at Hand model to embed practice change through modelling and support • Flexible deployment and shared capacity across partners • Cluster-level peer learning and development • Phased implementation aligned to workforce readiness • Ongoing workforce monitoring and support	
3. The system lacks a single, trusted view of impact, limiting its ability to evidence progress, target need and drive equitable improvement	Moderate • Decisions remain driven by activity rather than measurable outcomes • Variation and inequality are not consistently identified or addressed • Limited ability to demonstrate progress against success measures and DfE expectations • Weak system grip reduces pace and precision of improvement	Likely	Amber	• Single, shared data and insight function across the partnership • Integrated dashboards linking KPIs, outcomes and lived experience • Locality and setting-level transparency of data • Regular performance cycles and deep-dive reviews • Embedding CYP and parent voice into evaluation • Dedicated analytical capacity and tools • Triangulation of QA, performance and experience data	Amber

	• Lived experience is not consistently used to validate system performance				
4. The system is unable to rebalance investment towards early intervention and local provision, due to financial pressure and sufficiency/capital constraints	Critical • Continued reliance on high-cost, late intervention and external placements • Insufficient local provision across early years, AP, post-16 and specialist pathways • Capital delivery does not keep pace with demand • Financial recovery and sustainability are compromised • Children and young people are educated further from home, reducing confidence in the local offer	Possible	Red//Amber	• Joint financial planning and oversight across partners • Demand management and pathway redesign to reduce escalation • Strong commissioning focused on value and outcomes • Clear sufficiency strategy and capital pipeline with governance • Integrated financial, demand and sufficiency modelling • Early warning systems through data dashboards • Engagement with regional/national funding discussions	Amber
5. Families and young people do not experience SEND reforms as real, accessible or trustworthy, resulting in continued reliance on escalation and challenge	Critical • Lack of confidence in accessing support early or locally • Inconsistent experiences across settings undermine credibility of the system • Continued growth in complaints, mediation and tribunal activity • Co-production is not experienced as meaningful or influential	Possible	Amber	• Co-production embedded as standard practice across design and delivery • Clear, accessible articulation of pathways and the local offer • Consistent “you said, we did” feedback at all levels • Regular measurement of trust, experience and satisfaction • Use of SENDIASS and complaints intelligence to drive improvement • Targeted work to rebuild trust post-inspection	Green

	• Inspection legacy continues to impact trust and engagement • Communication does not consistently enable understanding or navigation of the system			• Independent facilitation to strengthen participation and voice	

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					



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

Delivery of Wokingham's SEND future state is dependent on a range of national and local reforms that impact system capacity, pace of change, accountability and funding. These dependencies have been considered through joint partnership working and have shaped a flexible, one-system delivery approach aligned to SEND reform, Families First and Best Start in Life. Dependencies will be actively managed through programme governance, with horizon scanning, scenario planning, escalation and course correction where conditions change.

National policy and funding reform (critical dependency)
Delivery is highly dependent on national policy direction and funding certainty. Changes to funding arrangements, delays in multi-year allocations or lack of clarity for Years 2–3 present a significant risk to delivery stability. This may lead to short-term delivery approaches, workforce instability and reduced ability to scale effective models such as Experts at Hand. This will be managed through a phased commissioning approach with explicit "exit/scale" decision points, prioritisation of early actions that reduce demand (e.g. strengthening OAP and early intervention), and development of a multi-year financial and accountability framework. This includes three-year and indicative five-year modelling, scenario planning, and use of KPI and quarterly returns to demonstrate impact and value for money. Early engagement with DfE and NHSE will support alignment between funding certainty and deliverability.

NHS reforms / ICB transformation
Delivery depends on NHS reforms, including workforce pressures, commissioning arrangements and transformation across community and specialist services. Progress is dependent on equitable capacity across the ICB footprint. This will be managed through joint governance, shared priorities and joint commissioning/secondment arrangements to ensure health contributions are embedded within SEND pathways.

Reforms to Children's Social Care (Families First / Family Help)
SEND reform is dependent on Families First, particularly whole-family early intervention. This will be managed through aligned thresholds, shared pathways and integrated workforce development to ensure SEND does not become the default route for unmet need.

Best Start in Life, including Family Hubs and Best Start Strategy
Best Start is a critical dependency, providing the foundation for early identification and inclusive early years practice. Delivery will be managed through aligned pathways, joint commissioning and a Year 1 integration output that clarifies the interface between Family Hubs and Experts at Hand, ensuring a coherent "no wrong door" system.

Curriculum and Assessment Review / accountability reform
Delivery depends on how inclusion is reflected in national accountability and inspection frameworks. This will be managed through close engagement with education leaders and flexible local implementation aligned to emerging national direction.

Local Government Reorganisation (LGR)
LGR may impact corporate capacity and leadership stability. This will be mitigated through stable programme governance, continuity planning and clear accountability across partners.

Additional cross-system dependencies
Delivery is also dependent on workforce sufficiency (education, health and specialist roles), sufficiency and capital delivery, data and digital maturity (including data-sharing across clusters), and the effective alignment of commissioning across SEND, AP, early years and post-16. These will be managed through integrated workforce planning, capital programme governance, strengthened data-sharing agreements, and joint commissioning arrangements.

Section 3 – Monitoring and Evaluation

11. **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.

Delivery of the Local SEND Reform Plan will be monitored through a single, partnership-owned performance and assurance cycle that connects delivery milestones, outcomes, finance and lived experience. This approach ensures the partnership can identify early whether delivery is on track, understand the cause of any drift, and take timely corrective action. This provides a clear, auditable line of sight from Year 1 milestones through to the success measures.

Monitoring

Programme delivery grip will be maintained through a single programme tracker aligned to Year 1 workstreams, supported by a consolidated RAID log (risks, assumptions, issues, dependencies and decisions). Milestones are defined as operational system changes (e.g. consistent pathways, cluster-based delivery and embedded OAP), rather than task completion.

A core monitoring tool is the Wokingham SEND Business Intelligence dashboard (Power BI), developed into a shared multi-agency operational and governance platform. Used weekly by operational teams and reviewed monthly through SEND governance, it brings together a consolidated KPI framework directly drawn from success measures, ensuring full alignment between strategy, delivery and impact.

The dashboard tracks:

- Demand: EHC needs assessment requests, escalation patterns and timeliness, measuring reduction in avoidable escalation and earlier identification of need
- Service delivery: Deployment and reach of Experts at Hand, therapy and specialist capacity, outreach activity and places created, evidencing improved access to timely, local support and strengthened mainstream capability
- Service quality: Multi-agency quality assurance of plans and practice; complaints, mediation and tribunal trends; and separately reported parental and CYP satisfaction, measuring confidence, consistency and experience
- Outputs and outcomes: Attendance, exclusions, placement stability and post-16 participation (including NEET), alongside OAP and Universal Offer audit scores and % of settings meeting agreed standards, evidencing improved inclusion and reduced variation across settings

Data will be analysed at borough, locality and settings level, supported by strengthened data-sharing agreements with all settings. This enables peer challenge, identifies variation and provides assurance that the Universal Offer and OAP are consistently applied.

SEND, finance, place planning and capital teams will align forecasting and assumptions to maintain a single view of demand, sufficiency and affordability, distinguishing complexity-led need from access-driven escalation.

Feedback

Quantitative monitoring will be triangulated with structured qualitative insight. Including distinct capture of children and young people's voice (through participation work, settings and targeted engagement) alongside Parent Carer Forum input, with analysis distinguishing between service user and parental perspectives.

A structured feedback cycle will include locality peer review, SENCo networks and communities of practice, alongside routine OAP/Universal Offer audits (self, peer and system-level moderation) to assess consistency of practice. Complaints, mediation and tribunal themes are reviewed alongside KPI data.

Clear "you said, we did" feedback loops demonstrating how CYP and parent input informs service change.

Governance

Workstream leads are accountable for delivery trajectories, initiating corrective actions and escalating risks. Performance is reviewed monthly through SEND partnership governance and the Strategic SEND Improvement Board, informing prioritisation, commissioning and resource deployment. Targeted deep-dives are commissioned where data indicates sustained variation, drift or affordability risk, ensuring rapid course correction and continuous system improvement.

12. **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.

INSERT DOCUMENT UPLOAD LINK

Section 4 – Governance

13. **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.

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?*
SEND Programme					
Health and Wellbeing Board	Statutory accountability for delivery of the Health and Wellbeing Strategy	Chair: Executive Member for Adult Services, Health and Wellbeing (Political leadership) WBC Local Authority: - Chief Executive - Deputy Chief Executive - Executive Director for Children, Adults and Health - Executive Interim Director, Place and Growth - Director of Children's Services - Director of Public Health - Executive Members (Political leadership) Health Partners: - Berkshire Healthcare NHS Foundation Trust	Minimum six meetings annually Additional meetings as required	Formally agrees and oversees strategic priorities for health and wellbeing across the borough. Provides strategic direction and endorsement of system-wide plans.	Full Council and Executive

		- Royal Berkshire NHS Foundation Trust - Wokingham North Primary Care Network - Healthwatch Wokingham Voluntary and Community Sector leadership: - Wokingham Volunteer Centre - Involve Community Services - SEND Voices (parent/carer)			
Berkshire West Safeguarding Children Partnership	Statutory Safeguarding Partnership to coordinate safeguarding services, provide strategic leadership, and ensure effective partnership working to protect children	Chair: Director of Children's Services (WBC) Lead Safeguarding Partners: - Reading Borough Council Chief Executive - West Berks Chief Executive - Wokingham Borough Council Chief Executive - Thames Valley Police Chief Constable - ICB Chief Executive Delegated Safeguarding Partners: - Executive Director Children's Services, Brighter Futures for Children (Reading) - Executive Director (People) Children and Family Services (West Berks) - Director of Children's Services (WBC) - Director of Safeguarding (ICB) - Chief Superintendent (TVP)	Three times per year	The BWSCP ensures a multi-agency plan to protect children, acting as the final authority for safeguarding strategies in the region	Health and Wellbeing Board

		Relevant Agencies: - Independent Scrutineer - Reading Borough Council / Brighter Futures for Children's services - West Berkshire Council Children's Services - Wokingham Council Children's Services - Thames Valley Police - Integrated Care Board - Berkshire Healthcare NHS Foundation Trust and the Royal Berkshire Hospital - Probation Services - Youth Offending Services - Royal Berkshire Fire and Rescue - Public Health - Voluntary Sector - Education settings - Community Safety Partnerships			
Children and Young People Partnership	To provide strategic, multi-agency leadership and oversight to align partners, drive system-wide improvement, and ensure better outcomes for children and young people	Chair: Director of Children's Services (WBC) WBC Local Authority: - Director of Public Health - Service Director Family Help & Safeguarding - Service Director SEND & Inclusion - Service Director Strategy, Transformation & Commissioning - Service Director Homes, Care & Provision - Service Director Education - Service Director Practice Improvement Quality	Every two months	Provides collective strategic leadership and agrees system-wide priorities and programmes, but does not hold formal statutory decision-making authority	Health and Wellbeing Board

		- Head of Early Help - Head of SEND - Head of Best Start in Life - Head of Strategic Commissioning and Transformation - Public Health Consultant - Youth Participation Manager - Head of Programme Implementation - Head of Community Safety - Deputy Leader and Executive Councillor for Children's Services (Political leadership) Health Partners: - Head of All-age Learning Disability and Neuro-Divergence and SEND (ICB) - Designated Clinical Officer for SEND (ICB) - Head of Children's Commissioning (ICB) - Associate Director of Nursing Women, Children and Young People (Royal Berkshire NHS Foundation Trust) - Director of Children's, Young People and Family Services (Berkshire Healthcare NHS Foundation Trust) - NHSE - Healthwatch Wokingham Education partners: - Maintained School Headteachers (secondary, primary and special schools)			

		- Multi-Agency Trust / Academy Trust CEO, senior leadership and operational leads - Further Education, Alternative Provision and Specialist Providers Voluntary and Community Sector leadership: - SEND Voices (parent/carer) - Community Safety Partnership - SEND & Inclusion Charities - Involve Community Services			
SEND Area Partnership Improvement Board	To provide strategic, multi-agency leadership and oversight of SEND system improvement across Wokingham. Specific responsibility and reporting oversight of SEND Reform Plan and SEND Priority Action Plan, led by SRO.	Chair: SEND Independent Chair WBC Local Authority: - Director of Children's Services (WBC) - Service Director Education - Service Director SEND & Inclusion - Service Director Homes, Care & Provision - Service Director Strategy, Transformation & Commissioning - Service Director Adult Social Care - Head of Strategic Commissioning and Transformation - Head of SEND - Head of Children with Disabilities - Head of Education Access and Sufficiency - Data and Insight Team Manager - Deputy Leader and Executive Councillor for Children's Services (Political leadership)	Monthly	Sets strategic SEND priorities, holds partners to account for delivery, and authorises escalation of system-level risks and issues	Health and Wellbeing Board

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		Health Partners: - Director of Vulnerable People's Services (ICB) - Head of All-age Learning Disability and Neuro-Divergence and SEND (ICB) - Designated Clinical Officer for SEND (ICB) - Associate Director of Nursing Women, Children and Young People (Royal Berkshire NHS Foundation Trust) - Service Director, Children, Families and All-age Services (Berkshire Healthcare Foundation Trust) Education partners: - Maintained School Headteachers (secondary, primary and special schools) - DfE SEND Advisor Voluntary and Community Sector leadership: - SEND Voices (parent/carer)			
Schools Forum	Statutory forum representing schools and providers that advises and makes limited decisions on the allocation and management of local education funding (DSG).	Chair: Primary Head School Members: - Primary Headteachers - Secondary Headteachers - Academy Headteachers/representatives	Quarterly	Approves specific elements of DSG funding—primarily de-delegation, limited block transfers, central retention, and certain	Department for Education

		- Special School Headteachers - School Governors Non-school Members: - Wokingham Borough Council non-Executive Councillor - Officer from Children's Services in a non-strategic financial management role - Oxford Diocese - Roman Catholic Diocese - Early Years Forum representatives - A representative from the 14 – 19 Partnership A representative of the Learning & Skills Council		financial arrangements for maintained schools.	
SEND Assurance Board	Provides system-wide assurance by scrutinising SEND performance, quality, and outcomes	Co-Chairs: - Service Director SEND & Inclusion (WBC) - Designated Clinical Officer for SEND (ICB) WBC Local Authority: - Service Director Strategy, Transformation and Commissioning - Head of Strategic Commissioning and Transformation - Head of SEND - Head of Children with Disabilities - Education Partnership Team Leader - Public Health Intelligence Manager - Preparation for Adulthood Strategic Commissioner	Monthly	Provides assurance and challenge, recommending actions and escalating risks, but does not hold formal statutory decision-making authority	SEND Area Partnership Improvement Board

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		- Youth Participation Manager - SEND Local Offer Co-ordinator - SENDIASS Manager - SEND Customer Relations Manager - SEND Practice and Quality Lead - Quality Assurance Manager - Data and Insight Team Manager Health Partners: - Head of Children's Commissioning (ICB) - Children and Young People Mental Health Commissioning Lead (ICB) - Head of Children and Young People's Integrated Therapies and All Age Neurodiversity Services (Berkshire Healthcare NHS Foundation Trust) Education partners: - Maintained School Headteachers (secondary, primary and special schools) Voluntary and Community Sector leadership: - SEND Voices (parent/carer) - SEND & Inclusion Charity			
Wokingham Education Partnership Board	To strengthen educational vision, strategy and collaboration across the borough's education system to	Co-Chairs: - Independent Chair - Wokingham Primary Heads Association - Wokingham Secondary Heads Federation	Every two months	The Board has authority to consider any strategic issue within its remit and to request the	SEND Assurance Board (Delivery)

	improve educational inclusion and outcomes for children and young people	- Schools Forum WBC Local Authority: - Director of Children's Services - Service Director SEND & Inclusion - Service Director Education - Principal Educational Psychologist - Head of Strategic Commissioning and Transformation - Head of Education Access and Sufficiency - Deputy Head of the Virtual School - Education Partnership Team Leader - School Admissions and Home to School Transport Manager - School Organisation and Place Planning Manager - School Improvement Lead - Data and Insight Team Manager Education partners: - Wokingham Primary Heads Association - Wokingham Secondary Heads Federation - Wokingham Special Schools - MAT Leaders Anchor Group - Early Years - Schools Learning Alliance - ACTIVATE LEARNING - Post 16 - Regional Schools Commissioner Office		information required to fulfil its role, with partners expected to cooperate—operating as a system leadership forum rather than a formal decision-making body	SEND Area Partnership Improvement Board (Strategic)

Commissioning and Insight Board	To provide integrated oversight of commissioning and system insight, ensuring evidence-based decisions, effective contract management, and continuous service improvement	Chair: Service Director, Strategy, Transformation and Commissioning WBC Local Authority: - Service Director Family Help & Safeguarding - Service Director SEND & Inclusion - Service Director Homes, Care & Provision - Service Director Education - Service Director Practice Improvement Quality - Service Director - Customer and Change - Deputy Head of the Virtual School - Head of Strategic Commissioning and Transformation - Head of SEND Strategy and Programmes - Head of Help and Protection - Head of Children with Disabilities - Head of Early Help - Head of Quality Assurance and Safeguarding - Head of Best Start in Life - Head of Corporate Parenting - Head of Residential Care and Fostering - Principal Educational Psychologist - Head of Education Access and Sufficiency - Head of Quality Assurance and Safeguarding - Home Finding and Quality Assurance Team Manager	Six-weekly	The Board provides oversight, challenge, and recommendation on commissioning and insight, and agrees actions and escalations, but does not hold formal decision-making authority	SEND Assurance Board (Delivery) SEND Area Partnership Improvement Board (Strategic)

		- Commissioning Managers - Public Health Consultant - Senior Public Health Programme Officer - Finance Business Partner - Capital and Treasury Manager - Children's Service Analyst Lead - Data and Insight Team Manager Health Partners: - Head of All-age Learning Disability and Neuro-Divergence and SEND (ICB)			
Priority Area Action (PAP) Working Groups	Multi-agency groups that develop, deliver and monitor priority actions in response to SEND inspection findings	Chair: PAP Leads - LA Operational Leads - ICB Operational Leads - BHFT Operational Leads	As required	Delegated authority to develop and refine action plans and agree delivery approaches within their priority area	SEND Assurance Board (Delivery) SEND Area Partnership Improvement Board (Strategic)
Area for Improvement (AfI) Working Groups	Multi-agency groups that develop, deliver and monitor areas for improvement in response to SEND inspection findings	Chair: AfI Leads - LA Operational Leads - ICB Operational Leads - BHFT Operational Leads	As required	Delegated authority to develop and refine action plans and agree delivery approaches within their priority area	SEND Assurance Board (Delivery) SEND Area Partnership Improvement Board (Strategic)
Local Area Plan Working Group (work in progress)	To lead the co-production, development and ongoing refinement of the SEND Local	Chair: Service Director SEND & Inclusion - LA Operational Leads	As required	Develops and refines the Local Area Plan and coordinates delivery	SEND Assurance Board (Delivery)

	Area Partnership Plan, ensuring alignment with national expectations, local priorities, and measurable outcomes	- ICB Operational Leads - BHFT Operational Leads - School Representation		across partners, with delegated authority to agree approaches within scope but no formal decision-making authority	SEND Area Partnership Improvement Board (Strategic)
Experts at Hand Working Group (work in progress)	To lead and coordinate the design, implementation and continuous improvement of the Experts at Hand model, enabling multi-agency delivery of early intervention and inclusive support across the SEND system	Chair: Service Director SEND & Inclusion - LA Operational Leads - ICB Operational Leads - BHFT Operational Leads - School Representation	As required	Delegated authority to design and implement the Experts at Hand model and its delivery approach, and to recommend strategic, financial and commissioning decisions to programme governance for approval	SEND Assurance Board (Delivery) SEND Area Partnership Improvement Board (Strategic)
Data Working Group (work in progress)	To support delivery and assurance of the SEND Local Plan by developing, analysing, and maintaining the data, metrics, and insight required to track progress, inform decision-making, and provide evidence of impact	Chair: Head of SEND Strategy & Programmes - LA Operational Leads - ICB Operational Leads - BHFT Operational Leads - School Representation	As required	Delegated authority to agree data definitions, KPIs, reporting frameworks and data quality standards for the SEND Local Plan, recommend metric changes and data improvements, and escalate performance risks	SEND Assurance Board (Delivery) SEND Area Partnership Improvement Board (Strategic)

WBC Internal Governance					
Full Council	The authority-wide decision body that sets the strategic, financial and constitutional framework for the council	Chair: Mayor - Leader of the Council - Executive Committee Members (Political leadership) - Non-Executive Committee Members (Political Members)	Six times per year	Approves the budget, policy framework, governance arrangements and key appointments, and makes decisions reserved by law or outside the Executive's delegated authority	Full Council is the highest decision-making body and does not escalate internally; issues escalate externally only where required
Executive	To provide strategic leadership and decision-making to deliver the council's functions within the agreed policy and budget framework	Chair: Leader of the Council - Executive Committee Members (Political leadership)	Monthly	Key strategic decisions on policy, services, and significant financial matters within the Council's agreed framework	Full Council
Children's Services Overview and Scrutiny Committee	To provide independent challenge and assurance on the effectiveness, quality, and impact of children's services, driving improvement and accountability on behalf of local residents	Chair: Labour Committee Member WBC Local Authority: - Director of Children's Services - Service Director Education - Service Director SEND & Inclusion - Service Director Homes, Care & Provision - Service Director Strategy, Transformation & Commissioning - Service Director Practice Improvement Quality Political representation:	Every two months	No direct decision-making powers but influences decisions by scrutinising performance and making recommendations	Full Council

		- Deputy Leader and Executive Councillor for Children's Services (Political leadership) - Non-Executive Committee Members (Political Members) Voluntary and Community Sector leadership: - SEND Voices (parent/carer) - Church representative - Parent governor representative			
Corporate Leadership Team (CLT)	Provides strategic leadership, makes key corporate decisions, and oversees delivery and performance across the organisation's priorities	Chair: Chief Executive - WBC Directors	Weekly	Holds decision rights for strategic direction, investment, prioritisation, and approval of major changes across the organisation's portfolio	Executive
Children's Services Improvement Board	To provide assurance, oversight, and continuous improvement of Children's Services practice and outcomes, ensuring services are responsive, evidence-led, and delivering the right support at the right time	Chair: Chief Executive - CLT (WBC Directors) - Director of Children's Services - Service Directors (Children's Services) - Heads of Service (Children's Services) - Quality Assurance Manager	Quarterly	Provides challenge, assurance, and evidence-led insight to shape priorities and hold services to account for improvement, but does not hold formal approval or resource-allocation decision rights	CLT

SEND and Education DCS POMS	Provides DCS-level oversight of SEND and Education performance and practice, using data and assurance to monitor outcomes, drive accountability, and track improvement actions through a structured review cycle	Chair: Director of Children's Services - Service Directors (Children's Services) - Heads of Service (Children's Services) - Performance Leads	Monthly	Enables operational decision-making to address performance issues, set priorities, and hold services to account, with authority to escalate strategic risks but no formal approval or investment decision powers	CLT
Children's Services Transformation Board	Provides strategic oversight, assurance and decision-making to ensure delivery of the transformation programme, improved outcomes for children, and financial sustainability across SEND, Education and Social Care	Chair: Director of Children's Services - Service Directors (Children's Services) - Head of SEND Strategy & Programmes - Business Change Programme Manager - Finance Business Partner - HR Business Partner	Fortnightly	Authority to make strategic, financial and programme-level decisions, including approving business cases, setting priorities, reallocating resources, and directing action to ensure delivery	CLT
ICB Internal Governance					
NHS England (NHSE)	To lead and oversee the NHS to ensure high-quality, safe, and effective healthcare for the population, using resources efficiently and improving health outcomes	Independent Chair Non-Executive Directors (NEDs) Executive Directors: - Chief Executive Officer - Chief Financial Officer - Chief Nursing Officer - National Medical Director - Chief Strategy Officer / Transformation leads	Approximately 5–6 times per year (roughly every 2–3 months)	NHSE operates through a scheme of delegation: the Board retains responsibility for strategy, performance, risk and governance, while operational and delivery decisions are delegated to the Chief Executive and	The NHSE Board is the top internal decision-making body; it escalates nationally significant issues to the Department of Health and Social Care and, ultimately, is

				executive team, remaining accountable to the Board	accountable to Parliament
Thames Valley ICB Board	Provide strategic leadership, system-wide governance, and assurance that the ICB and partners deliver statutory duties, performance, and population health outcomes across Thames Valley	Co-Chairs: - Chair of Thames Valley ICB - Chief Executive of NHS Frimley and Thames Valley ICB Non-Executive Directors (NEDs): - NED and Chair of the Audit & Risk Committee - NED and Chair of the System Productivity Committee (Finance & Resources) - NED and Senior Independent Director and Chair of the Place & Organisational Development Committee - NED and Deputy Chair of the ICB Executive Directors: - Chief Nursing Officer - Chief Financial Officer - Chief Medical Officer - Chief Strategic, Digital and Transformation Officer - Chief Delivery Officer Executive leads for: - Children & young people / SEND - Safeguarding	Every two months	Decision-making authority for the Thames Valley Integrated Care Board Holds ultimate decision-making authority for strategy, finance and commissioning, with operational delivery delegated through committees, executives and place-based structures	NHSE

		- Mental health - Population health Partner Members: - Partner Member, Primary Medical Services - Partner Member, Local Authorities - Partner Member, Mental Health - Partner Member, NHS and Foundation Trusts			
Thames Valley ICB Perinatal and CYP Board	A key assurance committee of the Thames Valley Integrated Care Board (ICB). Its purpose is to provide strategic oversight and assurance for perinatal and CYP services, driving integrated delivery and improved outcomes for 0–25s across the Thames Valley	Chair: ICB Executive Lead for Children & Young People ICB: - Chief Nursing Officer - Chief Medical Officer - Director of Strategy / Transformation / Population Health - CYP Programme Lead - Safeguarding leads - Designated Clinical Officer (DCO) Local Authority: - Director / Service Directors of Children's Services - Head of SEND - EHCP / Assessment leads - Principal Educational Psychologist	Every two months	Specific to Children and Young People (CYP), decision-making focuses on joint commissioning, pooled budgets, and strategic improvements	Thames Valley ICB Board

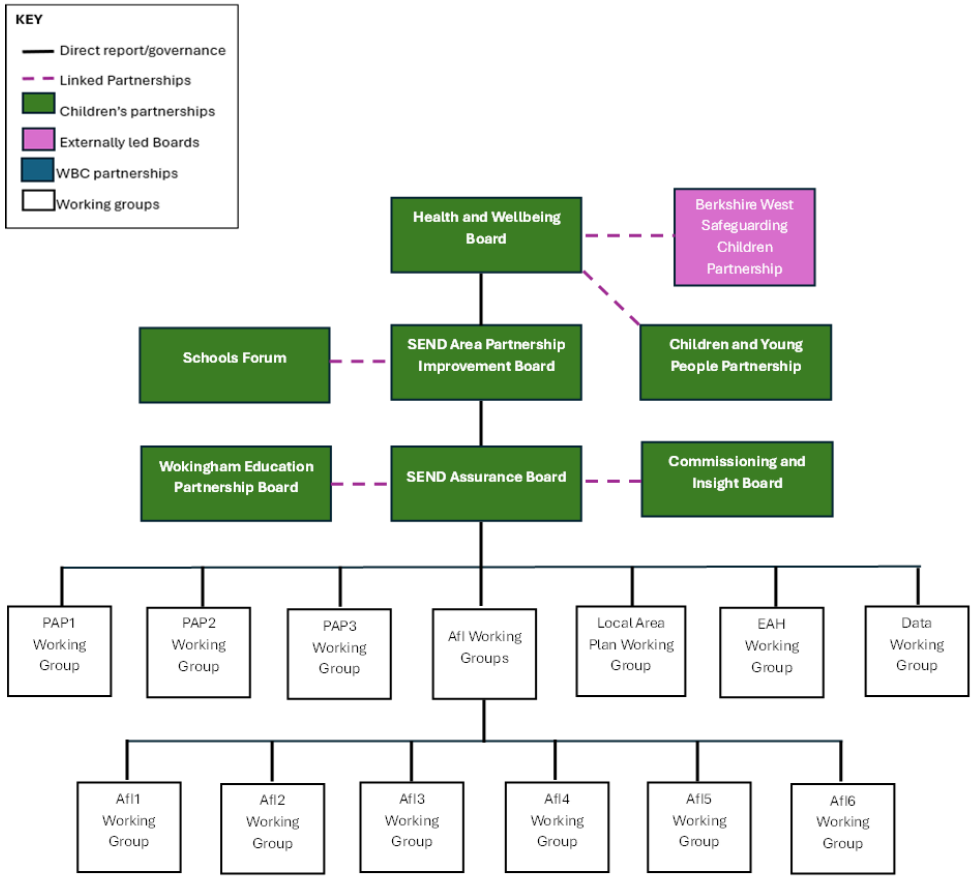
		- Head of Children with Disabilities - Public Health Consultant - Looked After Children leads - CYP Continuing Care leads NHS Providers: - Community health providers (Berkshire Healthcare NHS FT) - Acute trusts (paediatrics representation) - CAMHS providers - Maternity and neonatal representation Primary Care: - GP representative / Primary Care Network (PCN) lead - Clinical lead for children's primary care Voluntary and Community Sector leadership: - SEND Voices (parent/carer) - Young People participation representative - Healthwatch Education sector representation: - Schools - Academy trust representation - Special schools and alternative provision - Further education / post 16 providers			

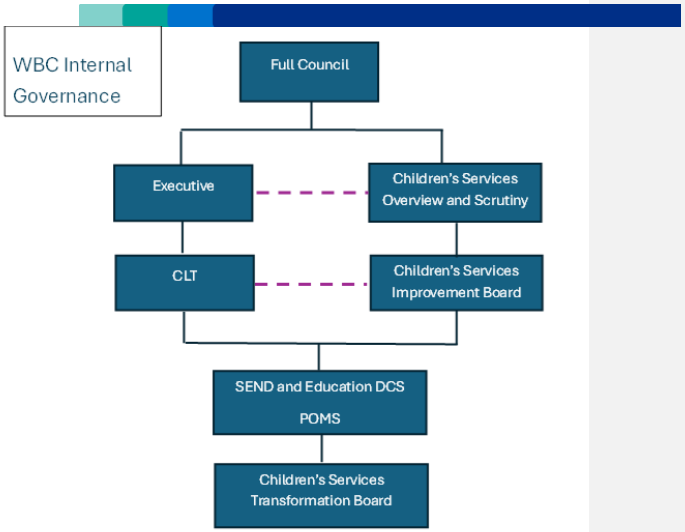
Thames Valley ICB SEND Partnership Meeting	To bring health, local authority and wider partners together to coordinate SEND system improvement across the Thames Valley Integrated Care Board footprint—supporting effective partnership working, meeting statutory duties under the Children and Families Act 2014, and responding to rising demand and complexity in SEND services	Chair: ICB Executive Lead for Children & Young People / SEND ICB: - ICB SEND & CYP Leads - Designated Clinical Officer (DCO) for SEND - Children's commissioning leads (Therapies, CAMHS, Neurodevelopment) - Safeguarding / SEND quality leads - Programme leads (SEND improvement, ASD/ADHD pathways) Local Authority: - Director / Service Directors of Children's Services - Head of SEND - EHCP / Assessment leads - Principal Educational Psychologist - Head of Children with Disabilities - Public Health Consultant NHS Providers: - Community health providers (Berkshire Healthcare NHS FT) - Acute trusts (RBFT, OUH where relevant) - CAMHS providers - Therapy services (Speech & Language, OT, Physiotherapy)	Every two months	Advisory and operational forum with no formal decision-making powers, responsible for coordination, assurance, and escalation of SEND issues to ICB decision-making boards	Thames Valley ICB Board

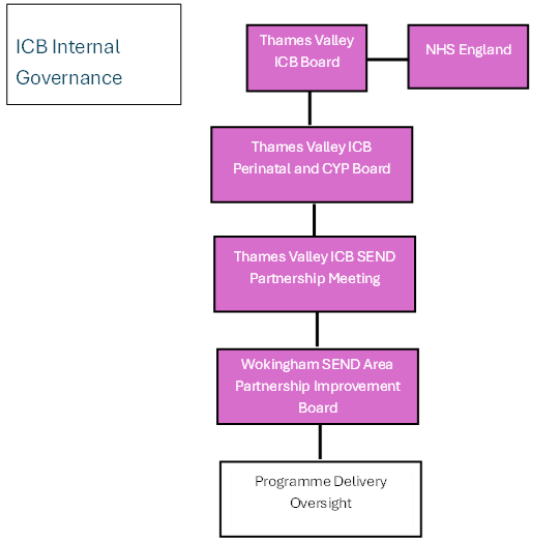
		Primary Care: - GP representative / Primary Care Network (PCN) lead - Sometimes paediatric GP or clinical SEND champion Voluntary and Community Sector leadership: - SEND Voices (parent/carer) - Young People participation representative - Healthwatch Education sector representation: - Schools, special schools and further education representatives - Early Years and Child Care representatives			

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

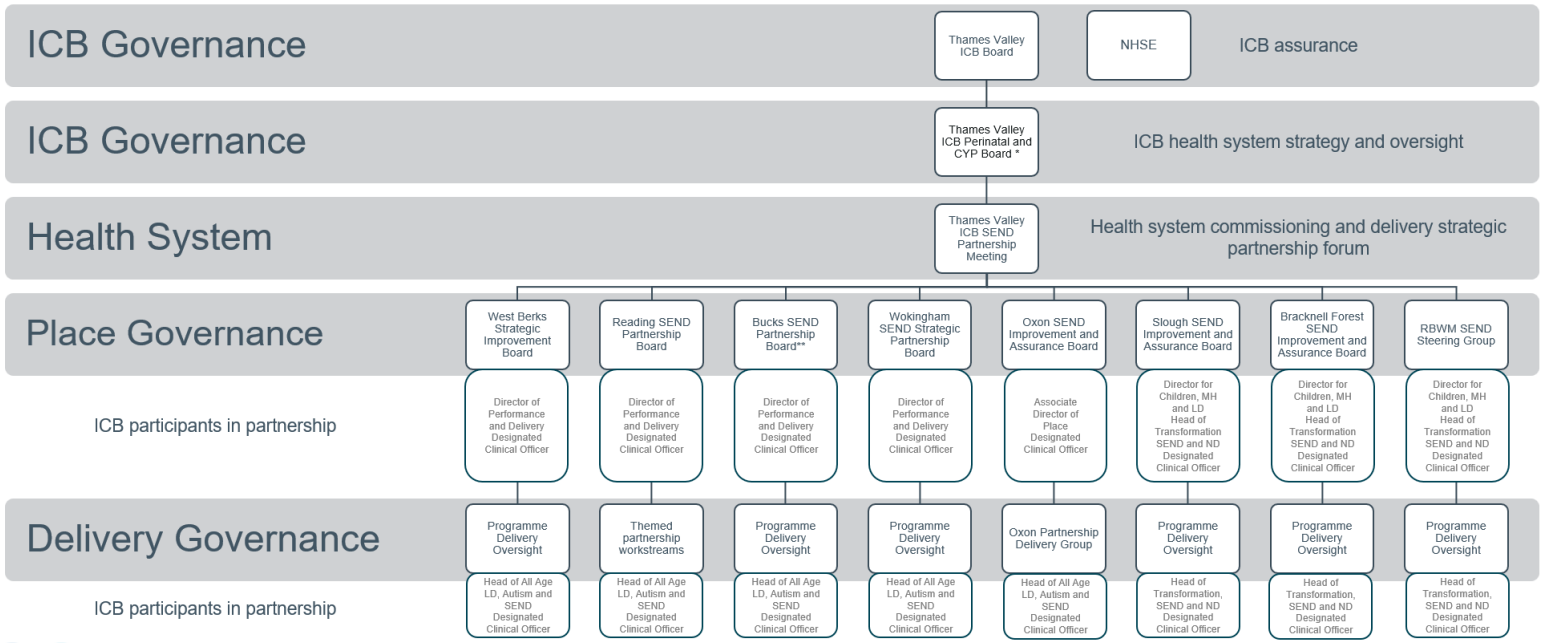
SEND Programme Governance







Thames Valley SEND Governance Structure



SRO Chief Nursing Officer

*Board responsible for Care Leavers and SEND ages 0-25
** ICB representatives also participate in the Bucks Executive Partnership

Section 5 – Central Government Support

14. **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

Funding formula reform
A fundamental shift in the national funding formula is required to better reflect current and emerging demand in Wokingham Borough and the ongoing impact of the Fair Funding Settlement and DSG allocation. This should place greater emphasis on up-to-date indicators of need, including EHCP growth, complexity of need, and responsive population data. Reducing reliance on historic spend and introducing specific adjustments for high-cost and complex cases would improve fairness and responsiveness. Enabling greater in-year flexibility would allow local areas to respond to rapid changes in demand, ensuring funding aligns more closely with real system pressures and supports timely intervention and inclusion.

Specialist expertise and delivery challenge
Continued access to DfE-appointed SEND reform and sufficiency expertise would provide constructive challenge, strengthen assurance, and support delivery discipline.

Workforce development and sufficiency
National support is needed to address workforce shortages across education, health and care, including recruitment and retention strategies for specialist roles and strengthening inclusive practice in mainstream settings.

Capital and sufficiency planning
Greater clarity on multi-year capital funding, with flexibility in deployment, is needed to plan inclusion bases and reduce reliance on high-cost placements.

Data, tools and evaluation
Standardised tools for forecasting, data collection and impact evaluation would improve consistency and comparability.

System leadership and alignment
Stronger national alignment across education, health and care, including NHS priorities, would support effective system-wide delivery and early intervention.

Peer learning and engagement
Facilitated peer learning and senior DfE engagement with local partners would strengthen implementation and shared ownership.

Annex B - Supporting Documents

Document	Link
The Schools White Paper	Every Child Achieving and Thriving
SEND Consultation Document	SEND reform: putting children and young people first.
LA and Schools Budget 2026-27	Schools Operational Guide 2026-27
Local Partnership Maturity Assessment Guidance and Tool	Included in commission pack
Local SEND Reform Plan – Data template	Included in commission pack
Local SEND Reform Plan Quality Assessment Framework	Included in commission pack
Local Inclusion Partnership Grant 2026-27	To be published Spring 2026
Experts at Hand Guidance	To be published Spring 2026
High Needs Capital Allocations 2026-27	To be published Spring 2026
Guidance on Inclusion bases	To be published Spring 2026

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**					