

Norfolk Special Educational Needs and/or Disability Joint Strategic Needs Assessment

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Version Control

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Summary

This document covers a wide range of outcomes, topics and themes. In summarising these, it aims to highlight the key 'headlines' in the data, along with any notable themes.

The number of children with identified Special Educational Needs and/or Disabilities (SEND) in Norfolk

Overall, the number of children with identified SEND in Norfolk has increased, with increases in the number of children subject to Early Identification of Need (EIN) notifications, Education, Health and Care Plans (EHCPs) and Special Educational Needs (SEN) Support since 2017.

Whilst increases have also been seen in data nationally and regionally, Norfolk's rate of EHCPs is now higher than the England and East of England averages, with a notable gap growing between Norfolk and comparators between 2022 and 2025. In 2026, 7.4% of Norfolk's school population has an EHCP, compared to an East of England average of 5.9%, and an England average of 6%.

The increase has been driven by a growing number of EHCP 'starts' exceeding the number that are ceasing. There is some evidence that numbers of 'starts' has stabilised and may be starting to reduce.

There are a number of other factors and trends shown within this document that may partly explain Norfolk's higher rate of EHCPs. However, it is not possible to be definitive or precise about the drivers of Norfolk's trend, and it is outside of the remit of this document to recommend findings not directly evidenced by the available data.

Characteristics of children with SEND in Norfolk

The age profile of Norfolk's EHCP cohort reflects that of comparators, with children aged 11-15 most likely to have an EHCP.

Data about EHCP requests shows that a notable proportion of these are for children in school years that involve a transition to a new setting (e.g. starting primary school or starting secondary school).

There has been a notable increase in Early Identification Notifications for very young children, although increases are evident in all age groups.

More boys than girls have an EHCP or receive SEN Support in Norfolk, which is reflected in national and regional data. The percentage of girls receiving support for SEND has risen slightly in the last 10 years.

Children and young people whose ethnicity are white are more likely than those of other ethnicities to receive support for SEND. Again, Norfolk's pattern reflects that nationally and regionally.

A higher proportion of those with an EHCP or in receipt of SEN Support are eligible for free school meals, evidencing challenging economic circumstances for families supporting a child with SEND.

Support needs for children with SEND

Children with SEND are ascribed support needs against government classifications, called Primary Support Reasons (PSRs). Within this context, the highest ascribed PSRs in Norfolk are in order: Autistic Spectrum Disorder; Social, Emotional and Mental Health; Speech, Language and Communication Needs; and Moderate Learning Difficulty.

In many areas, Norfolk's rate of children with different PSRs is similar to national and regional averages. However, Norfolk has notably higher and growing rates of children with a PSRs of Speech, Language and Communication Needs (particularly for young children), and most notably

of Social, Emotional and Mental Health for which Norfolk's rate per head of population is much higher than the national average.

In addition to using PSRs to identify support needs, Norfolk has implemented a 'Identification of Needs Descriptors in Educational Settings (INDES) index which focuses on the complexity of need against multiple descriptors. This reaffirms the overall needs highlighted through PSRs but also shows that many children have multiple needs. In particular, it showed that needs around communication and interaction, cognition and learning, and social, emotional and mental health often coincided. This suggests that there are a growing number of children with a mixture of complex learning, communication, social and/or mental health needs.

Educational provisions and outcomes for children with SEND

Norfolk has a notably higher proportion of children with an EHCP in Independent Special Schools and State-Funded Alternative Provision schools when compared to England and East of England averages, with slightly smaller proportions in state funded primary, secondary and special schools. Overall, this means that a slightly smaller proportion of EHCPs are for children in Local Authority Maintained Mainstream Schools.

The position for children receiving SEN Support is different, with a higher proportion in state-funded primary and secondary schools, and a lower proportion in other settings.

The overall story around educational outcomes for children with SEND reflects that for all pupils in Norfolk. As such, attainment levels at Foundation stage are at or slightly above the National and East of England averages; attainment at Key Stage 2 is lower than comparators; attainment at GCSE/Key Stage 4 is again in-line with comparators; and there are mixed outcomes post-16, with generally good engagement in education, training and employment, but lower skills levels at age 19.

Within this context, children in Norfolk with an EHCP on average perform better than East of England and England averages across most ages and indicators.

Norfolk has higher absence rates, and higher rates of permanent exclusions, than the East of England and England averages for EHCP, SEN Support and 'no identified SEN' cohorts. This reflects longer term trends in these areas.

Safeguarding outcomes for children with SEND

Data about children and young people with SEND in Norfolk reflects the findings of broader research and shows that children with an EHCP are more likely to have a Child Protection Plan or be looked after. Data about children and young people supported by Norfolk's Youth Justice Service (YJS) also suggests that a disproportionate number have an EHCP, and that the majority of those within the YJS with an EHCP have a Primary Support Reason of Social, Emotional and Mental Health.

Key processes and stages for children and young people with SEND

An analysis of key processes, particularly for children and young people with an EHCP, provides additional insight into Norfolk's overall figures, and into the experiences and outcomes of children and their families.

Whilst the process for assessing needs and providing support is complicated, key elements include (in the order they might occur): requests for an assessment; acceptance or refusal of that assessment; the assessment itself; and then (depending on the outcome) the issuing of EHCPs to those with an identified need for support. Activity in some, but not all, of these areas is counted and recorded as part of national data collections.

This data shows that the rate of requests for an EHCP assessment in Norfolk has historically been above East of England and England averages, although in the most recent data Norfolk's rate of requests has reduced slightly and now is in line with the regional average. In addition, benchmarking data shows that a much smaller proportion of initial requests for an EHCP are refused each year in Norfolk compared to comparators.

Comparator data about the number of assessments is not available. However, historically higher rates of requests and low levels of request refusals suggest that Norfolk may have undertaken a higher rate of assessments than other areas. Within this context, and whilst a similar proportion of assessments go on to an EHCP compared to elsewhere, it is likely that the overall number of EHCPs issued has been above geographical comparator averages due to a combination of factors including high levels of requests, low refusals and high rates of assessments.

There is some suggestion that these trends may be changing. A reduction in requests in 2025, alongside a reduction in assessments that result in an EHCP, may lead to reduced EHCPs (or a 'flattening' of historical increases) in future years.

All of this means that around 178 EHCPs are issued each month based on the average for 2025.

Data suggests a mixed picture in terms of children's and families' experiences of key processes. A higher proportion of EHCPs are issued in time compared to England, East of England and Statistical Neighbour averages; but a growing proportion of decisions about children with SEND are appealed (in Norfolk and nationally). Data about timely reviews suggests the percentage of children with an EHCP receive annual reviews is above that of geographical comparators.

Experiences of children and young people with SEND, their families, and those working to support them

A number of recent sources of qualitative 'voice' data help stakeholders understand the views and experiences of children and young people, their families, and professionals. These include the 2024 Flourish Survey, the 2024 Flourish Special Schools survey, and three SEND Surveys in 2025 for children and young people, families and carers, and professionals. The findings from these provide insight into children's and families' outcomes.

Data from both Flourish and SEND surveys shows that many children with SEND have broadly similar aspirations as those without SEND, enjoy similar activities outside of school, and strive to learn the same skills needed for independence as they get older. However, it also shows that the challenges and barriers that they face means that outcomes for children with SEND are on average both more challenging and more complex than for those without SEND.

Comparing responses within the Flourish survey for children who state they do, or do not, have SEND suggests that those with SEND are more likely to experience poor outcomes in a number of areas around educational attainment, bullying, safeguarding, their mental health, and taking part in activities outside of school. They are also more likely to experience barriers to good outcomes, with access to transport, information and appropriate support amongst issues highlighted by many children and young people with SEND in their day-to-day lives.

It is clear that the complex challenges faced by children and young people with SEND are shared by their families and support networks.

Parents and carers for children with SEND report a range of practical challenges to ensure their child can access the support they need. It is clear from feedback from parents and carers that they have to make significant sacrifices to ensure their child gets the support they need and are sometimes frustrated by barriers to improved outcomes. Survey responses from children and

young people also show the importance of supportive and safe family and community settings in securing good overall outcomes.

Professionals supporting children with SEND and their families report both improvements in the options available to them, and areas of improvement including around the provision of information. They express notable frustration around capacity and resources, with a clear consensus in responses that funding and staffing levels cannot always meet the demand, and that this is not well-understood by the wider system or by the public.

Overall, whilst most families feel that their child's place of learning has made reasonable adjustments, and that (where relevant) EHCPs have made a positive difference, a proportion of children and young people with SEND, and their families, are struggling. Reviewing voice data from a range of perspectives suggests a system for support that is, overall, under significant pressure.

Introduction and context

The purpose of this document

The objective for this Joint Strategic Needs Assessment is to provide an evidence base to inform the planning of services and activities that support children and young people with Special Educational Needs and/or Disabilities (SEND). It aims to provide a definitive 'single version of the truth', bringing together statutory and local data, including 'voice' data from children, families and professionals. A range of needs assessments then form Norfolk's overall Joint Strategic Needs Assessment (JSNA).

Strategic context

There is a requirement (as set out in statutory guidance¹) for an area's JSNA to fully account for the needs of children and young people with SEND, and a specific SEND Joint Strategic Needs Assessment is part of the information that must be provided as part of the Government's Local Area SEND Inspection Framework².

Within Norfolk there are also a range of partnership strategies and activities that require a consistent evidence base, that this document aims to provide a point of reference for those. They include:

- The Norfolk Area SEND and Alternative Provision Strategy (NASAPS)³ and within this Norfolk's SEND Local Area Inclusion Plan (LAIP) and Local SEND Reform Plan.
- Norfolk's Children and Young People Strategic Alliance's (CYP SA) Flourish Strategy⁴ – for which 'Improving outcomes for children and young people with SEND' is a whole-partnership priority.
- Norfolk's Local First Inclusion (LFI) SEND Improvement Programme⁵.
- The Local Area SEND Inspection – which is likely to be announced in 2026/27.

All of these require a clear evidence base to inform both planning and review activity, and this document aims to provide both a 'moment in time' assessment of needs and the basis for the more regular monitoring of data.

This is the third SEND Joint Strategic Needs Assessment document, with the first published on Norfolk Insight in 2022⁶, and the second published in October 2025. This document is an update of the 2025 publication and is produced as part of an annual cycle.

Definitions, terminology and language

NHS England states that "A child or young person has special educational needs and disabilities if they have a learning difficulty and/or a disability that means they need special health and education support"⁷.

Reflecting this, much of the data available from all sources reference both the child or young person's disability within the context of the nature of the support required from health, education and other services.

Within local and national strategies, children and young people with SEND are understood to be those with support needs aged 0-25. It is important to recognise this age range, with statutory data for SEND sometimes referring to the whole SEND cohort (0-25) but also those of school age (often referred to by the school year that the child is in). This distinction will always be made when presenting and describing the data.

In presenting and reviewing data, particularly about children and young people's support needs, this document uses classifications of need determined by statutory guidance. Feedback from children and young people and their carers suggests that these classifications do not always describe their needs in a way that is recognised by them or that is sensitive to the nature of those needs. This document recognises that some of the language used around support needs is not always right but is necessary to repeat within the context of the way some data must be gathered by law.

Throughout this document and reflecting the local and national policy context for SEND, abbreviations and acronyms will be used for conciseness. Whilst these will be set out within the text, it may be helpful to have a basic glossary of terms and abbreviations used in this document as below.

Producing this document

This document has been produced in partnership by analysts working within Children's Services and Public Health (mainly within Norfolk County Council's Insight and Analytics service), with direction and guidance from Norfolk's Children and Young People Strategic Alliance (CYPSA) and its Local Inclusion Partnership (LIP). This approach ensures that the document provides analysis across a wide range of themes and sources and is presented in a way that supports partners and stakeholders to understand and apply its findings.

Table of terms and abbreviations

Term/abbreviation	Meaning
SEN	Special Educational Need – referring to a disability or learning difficulty that requires special educational provision to be made for a child or young person.
SEND	Special Educational Need and/or Disability – this includes all children with special educational needs, and also those with disabilities who may or may not have a special educational need.
Alternative Provision	Education arranged by local authorities for pupils who, because of exclusion, illness or other reasons, would not otherwise receive suitable education
EHCP/ Education Health and Care Plan	An EHC plan describes the special educational needs that a child or young person has and the help that they will be given to meet them. It also includes the health and care provision that is needed. EHCPs are for children who need more help than SEN Support can provide.
Special school	A school which is specifically organised to make special educational provision for pupils with SEN
NASAPS	Norfolk Area SEND and Alternative Provision Strategy
Local Inclusion Partnership	Local Inclusion Partnership
LFI	Local First Inclusion
CYPSA	Children & Young People Strategic Alliance
SEN Support	This describes extra help given to children who have special educational needs and need more assistance than normally provided to other students of the same age, but whose needs do not require an EHCP.
EIN/Early Identification of Need notification	Health and other professionals are required to submit an EIN notification when a child of pre-school age will require additional support.
PSR/Primary Support Reason	The main need that determines the requirement for an Early Identification Notification or Education, Health and Care Plan.

Data sources

Data sources are labelled and referenced with footnotes or as part of data visualisations throughout this document.

A number of sources of both national and local data are referenced many times, with key sources listed below. References to local systems do not provide hyperlinks – please contact i&a@norfolk.gov.uk with any questions about these data sources.

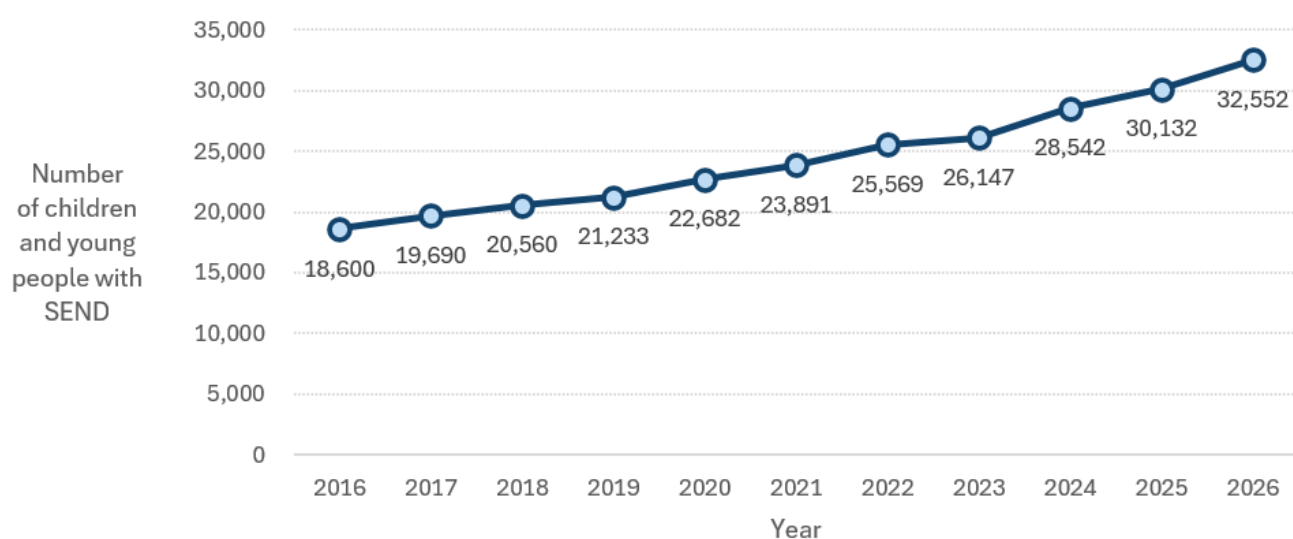
Title	Description	Link
Special Educational Needs in England	Annual data publication relating to school-aged children with SEND, drawn from the School Census.	https://www.gov.uk/government/collections/statistics-special-educational-needs-sen
Education, Health and Care Plans	Annual data publication relating to children 0-25 about children in receipt of EHCPs and SEN Support, drawn from the SEN2 data return.	https://explore-education-statistics.service.gov.uk/find-statistics/education-health-and-care-plans/2026
Education Statistics	A range of education data publications relating to Key Stages are published as part of a calendar of releases. Most contain breakdowns as relevant for children in receipt of SEN Support or an EHCP.	https://explore-education-statistics.service.gov.uk/
Census, 2021	National 10-yearly Census for England.	https://www.nomisweb.co.uk/sources/census_2021
ONS Mid-year population estimates	Annual population estimates by local authority area.	https://www.nomisweb.co.uk/datasets/pstnew
Pupil absence in schools in England	Annual publication of data around pupil absence from school.	https://explore-education-statistics.service.gov.uk/find-statistics/pupil-absence-in-schools-in-england/2025-26-autumn-term
Suspensions and permanent exclusions in England	Annual publication of data around pupil exclusions and suspensions from school	https://explore-education-statistics.service.gov.uk/find-statistics/suspensions-and-permanent-exclusions-in-england/2024-25
Tribunal Statistics	Quarterly data about decisions about children with SEND that are taken to Tribunal.	https://www.gov.uk/government/collections/tribunals-statistics
Norfolk County Council systems	Norfolk County Council has statutory responsibility for the recording of data about children with SEND around their EHCP, SEN Support or service provisions. They also include data about SEND children who are 'Missing Education' or 'Elective Home Educated'. A number of systems are used to record and report this data.	Not available online.

Prevalence of SEND

Numbers of children and young people with SEND

It is difficult to determine the number of children and young people with SEND. Data about EHCPs is likely to capture most children and young people aged 0-25 with complex SEND needs. Data about EHCPs and SEN Support in schools provides a broad sense of need, but only for children and young people of school age whose needs have been recognised; and broader data about disability from, for example, the national Census does not indicate whether disabilities impact on education or health outcomes in line with definitions of SEND.

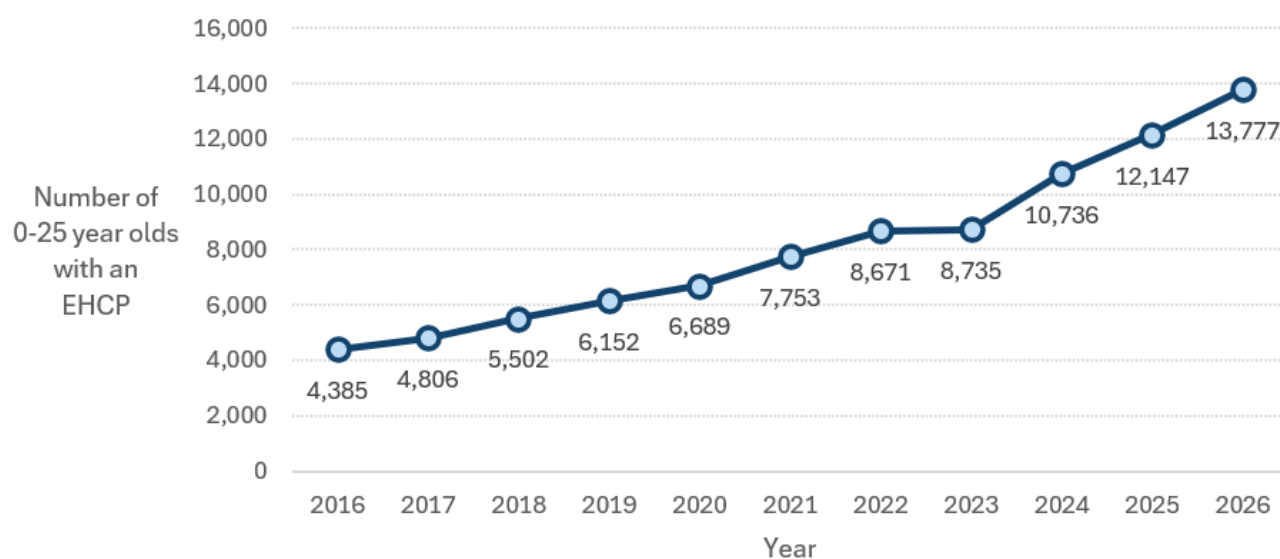
Figure 1: Total children and young people with an identified Special Educational Need and/or Disability in Norfolk over time



Data from Special Educational Needs in England publication and Education, Health and Care Plans publication (both 2026)

In 2026 there were around 32,500 children and young people with an identified SEND in Norfolk – comprising around 13,800 (aged 0-25) with an EHCP and around 18,800 (of school age) who are receiving SEN Support. This number has increased over time, as shown in the graph (Figure 1), with the number increasing from 18,600 children in 2016 to 32,552 in 2026.

Figure 2: Total children and young people aged 0-25 in Norfolk with an EHCP over time



Data from Education, Health and Care Plans publication (2026)

Within the context of these overall figures, numbers of EHCPs have risen faster. The graph (Figure 2) shows the increasing number of children and young people (aged 0-25) with EHCPs since 2016, rising from 4,385 in 2016 to 13,777 in 2026, representing a 214% increase since 2016.

Numbers of school-aged children in receipt of SEN Support have also increased, albeit not as steeply, with the increase from around 14,200 children in 2016 to around 18,800 in 2025 representing a 32% increase.

This suggests that the proportion of children with more complex identified needs has increased fastest, with the rise in numbers of children with EHCPs greater than that for those with SEN Support.

Local data, from Norfolk County Council's (NCC) systems, shows that the overall increase in EHCPs is mainly driven by an increase in new EHCPs. For example, in the reporting period from April 2025 – March 2026 NCC issued just over 2,000 new EHCPs but only ceased around 1,000 EHCPs (EHCPs might cease for a number of reasons, including if there is no longer a need for it to be able to meet the child or young person's needs, or when a young person becomes too old to be the subject of an EHCP). Within this context, the number of EHCPs ceased within the year increased from around 580 in 2024/25 to around 1,000 in 2025/26.

Nationally and regionally, other areas have seen similar increases for both EHCPs and SEN Support. The graphs (below) show numbers of school-age children with an EHCP (Figure 3) and SEN Support (Figure 4) expressed as a percentage of the school population, and with Norfolk's rate shown alongside England and East of England averages. Note that the (left) Y-axis of the two graphs are not the same scale.

Figure 3: The percentage of the school population with an EHCP over time for Norfolk and regional and national averages

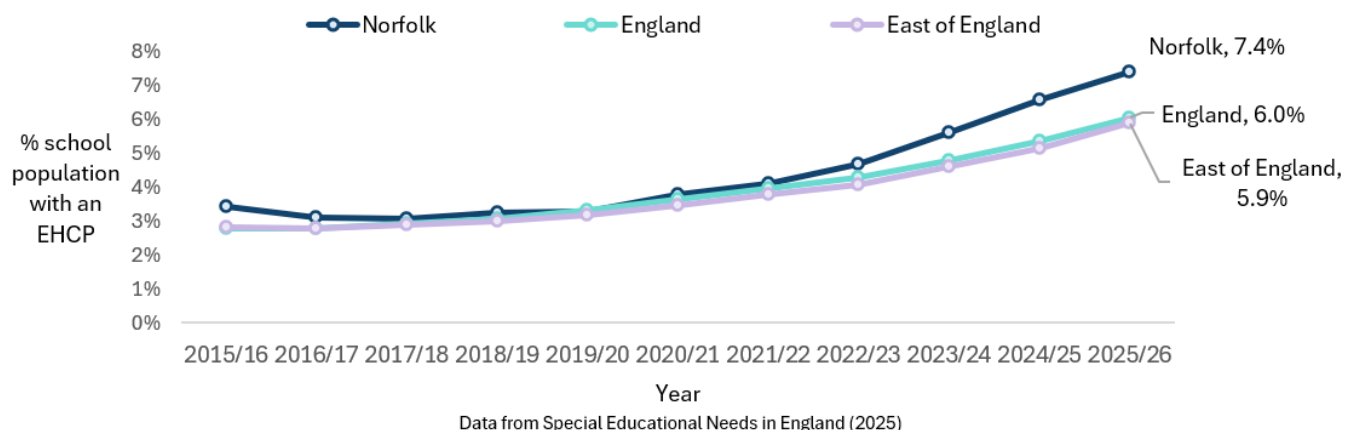
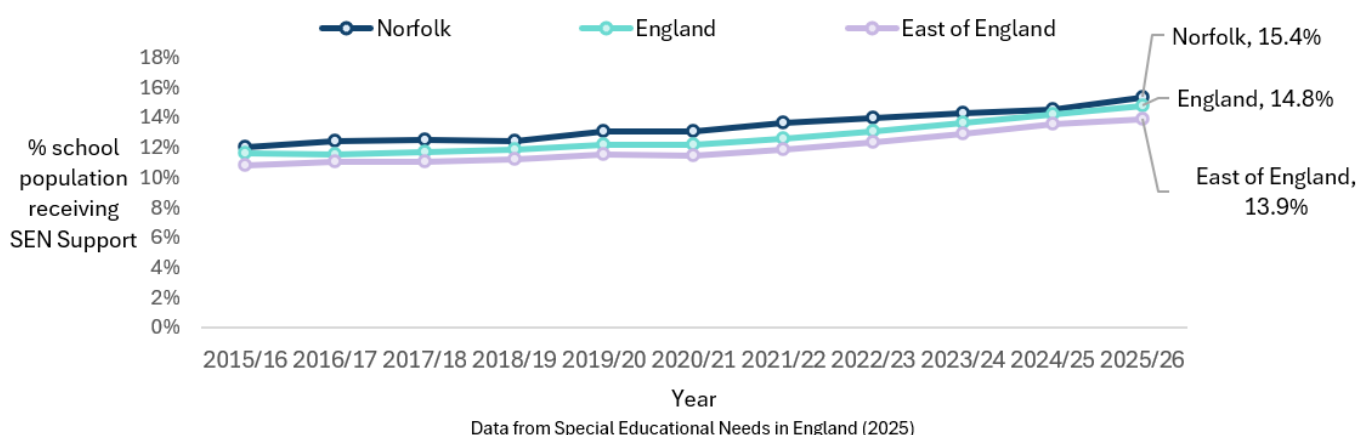


Figure 4: The percentage of the school population receiving SEN Support over time for Norfolk and regional and national averages



The graphs show that in 2026 in total around 23% of Norfolk's total school pupils either had an EHCP or were in receipt of SEN Support.

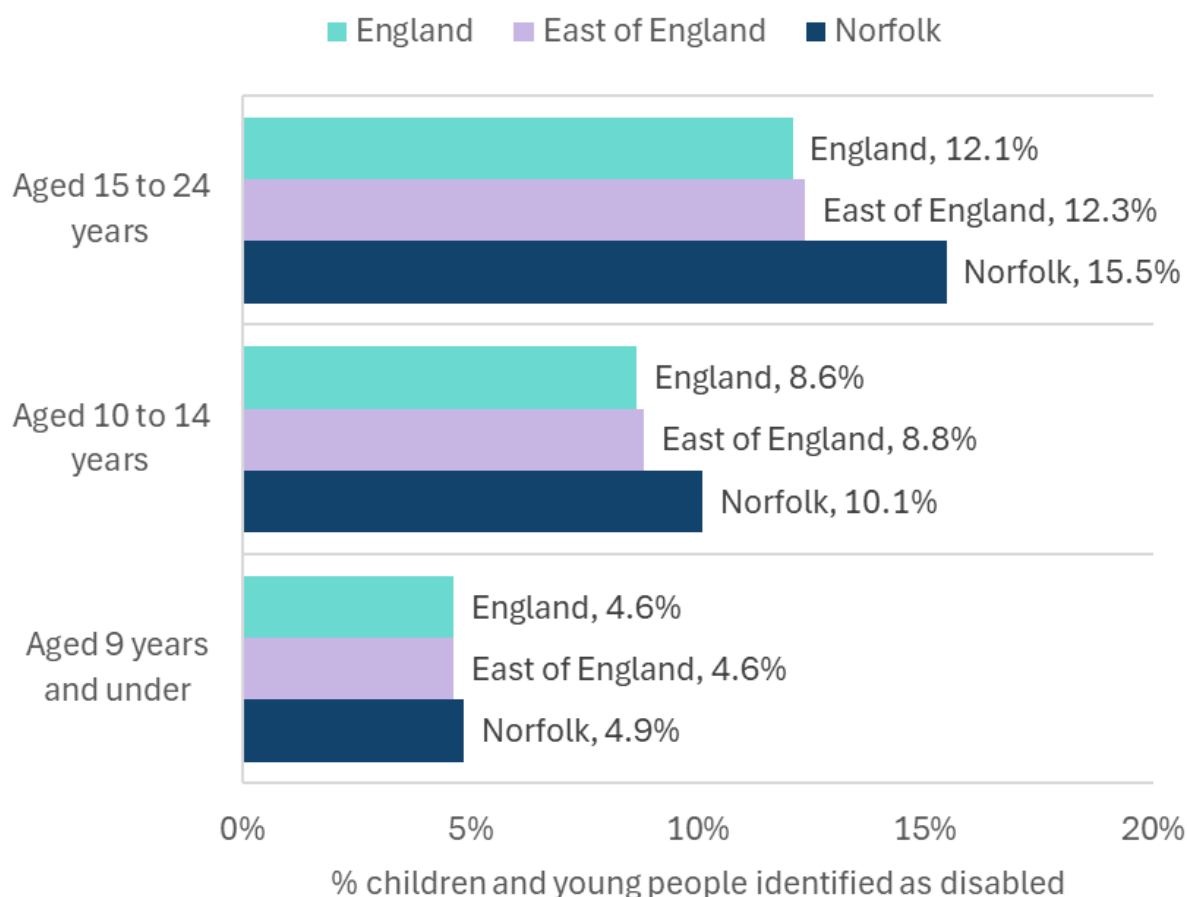
Both graphs show an increase in the percentage children with SEND over time. For both EHCPs and SEN Support, Norfolk's rate is above national and regional averages (albeit that the difference for SEN Support is small). Notably, Norfolk's rate of children with EHCPs increased at a faster rate than comparators from 2021/22 onwards. For SEN Support, the rate increases consistently and in a similar way to national and regional averages.

There is limited data available specifically about SEND other than in the publications used above.

Some data about disability (without reference to educational needs) is available in the ten-yearly national Census that last took place in 2021.

Figure 5 shows the percentage of children and young people identified as disabled under the Equality Act, broken down by age group, and showing Norfolk, East of England and England rates. It is notable that this data, from the Census, is self-reported and so should not be taken as a definitive count of disabled children and young people.

Figure 5: The percentage of children and young people identified as disabled under the Equality Act by age group in 2021



Data from the 2021 Census

This data suggests that Norfolk has a slightly higher proportion of children with an identified disability compared to regional and national averages, and with this difference being more notable in older age groups.

It is not possible to determine whether Norfolk's slightly higher rate of children with an EHCP or SEN Support is driven by the higher rate of recorded disability in other data sets. A higher rate of recorded disability may explain some of Norfolk's higher rate of EHCPs and SEN Support in the long term but is less likely to explain the recent accelerated increase in numbers of children with EHCPs.

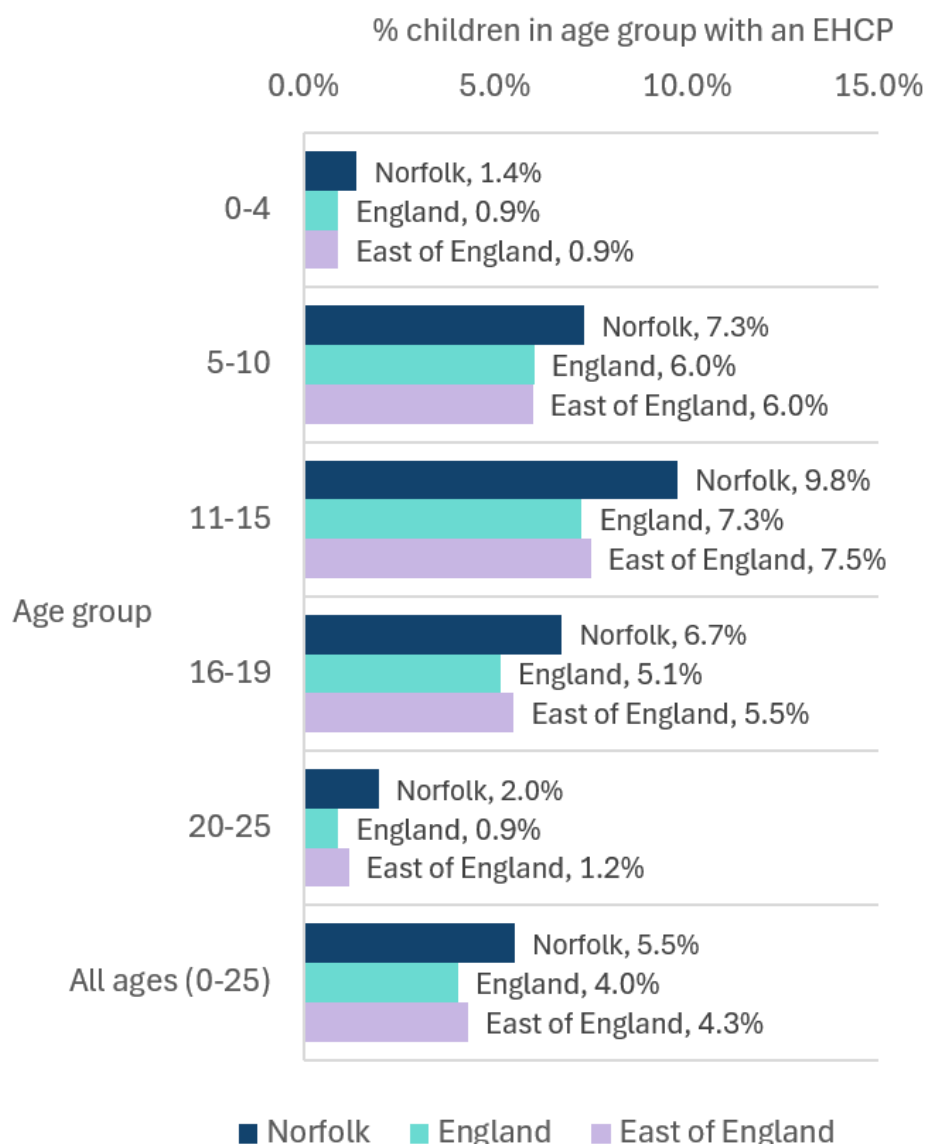
The following section reviews the characteristics of children and young people with SEND, identifying any notable trends and differences, but also continues to look for any potential explanations for the patterns highlighted above.

Characteristics of children and young people with SEND

Age

Figure 6 (right) shows the percentage of children and young people with an EHCP in different age groups for Norfolk, the East of England, and England. This shows that 11–15-year-olds are more likely to have an EHCP than any other age group locally, regionally and nationally. 9.8% of 11–15-year-olds in Norfolk have an EHCP.

Figure 6: The percentage of children and young people with an EHCP by age group for Norfolk and comparator groups

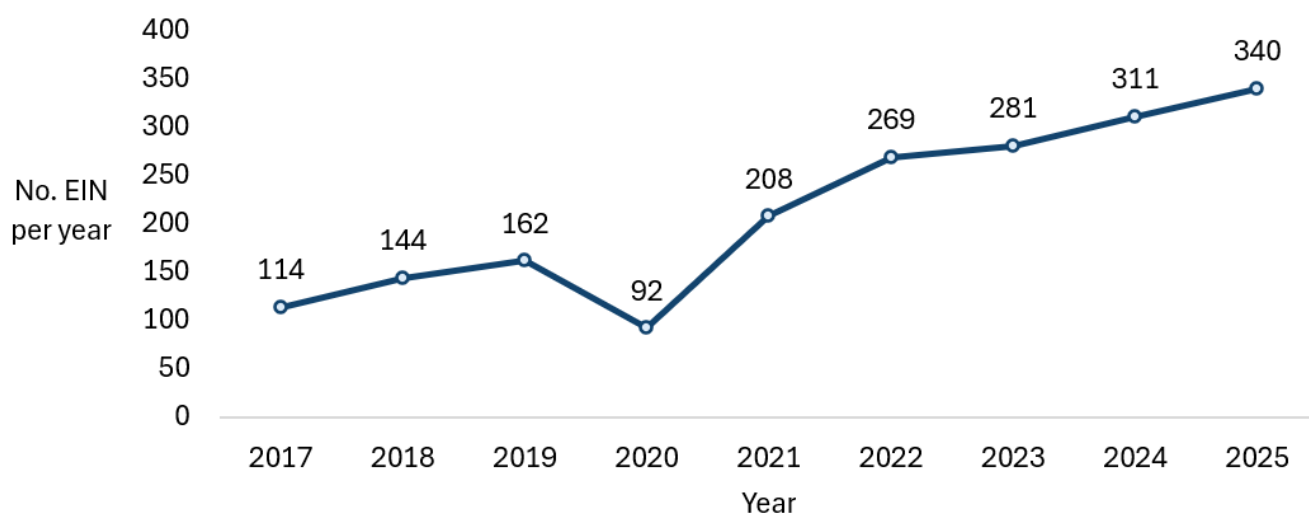


Data from Data from Education, Health and Care Plans publication (2026) and ONS Mid-year Population Estimates (2024)

It is important to recognise that data about children and young people with SEND and their age usually describes children of a particular age whose SEND has been identified, or whose SEND means they are receiving support. This means that the data is not a reliable indicator of prevalence or disability.

Data is also available about numbers of children and young people accessing support by age group over time.

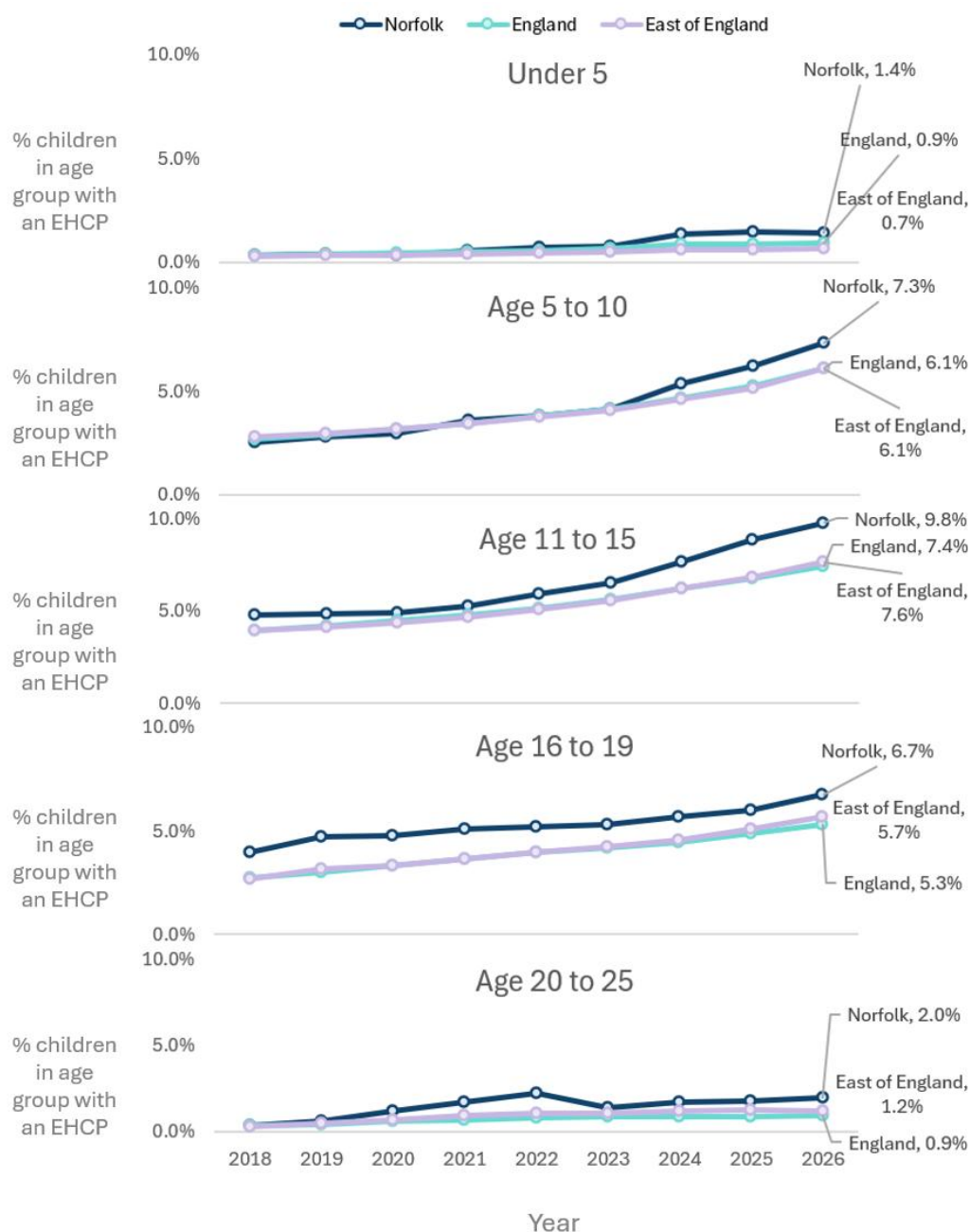
Figure 7: Number of Early Identification of Need notifications received each year in Norfolk



Data from Norfolk County Council systems

When health and other professionals identify that a child of pre-school age is likely to require additional support, they are required to submit an Early Identification of Need (EIN) notification to the relevant local authority. While nationally published data is not available, Figure 7 shows local data from Norfolk County Council's systems over time.

Figure 8: The percentage of children and young people with an EHCP by age group over time in Norfolk with England and East of England averages



Data from Education, Health and Care Plans publication (2026)

As with overall numbers of children with identified SEND, numbers of EINs have grown steadily from 114 received in 2017 to 340 in 2025 (albeit with a dip during the Covid pandemic, with 92 in 2020).

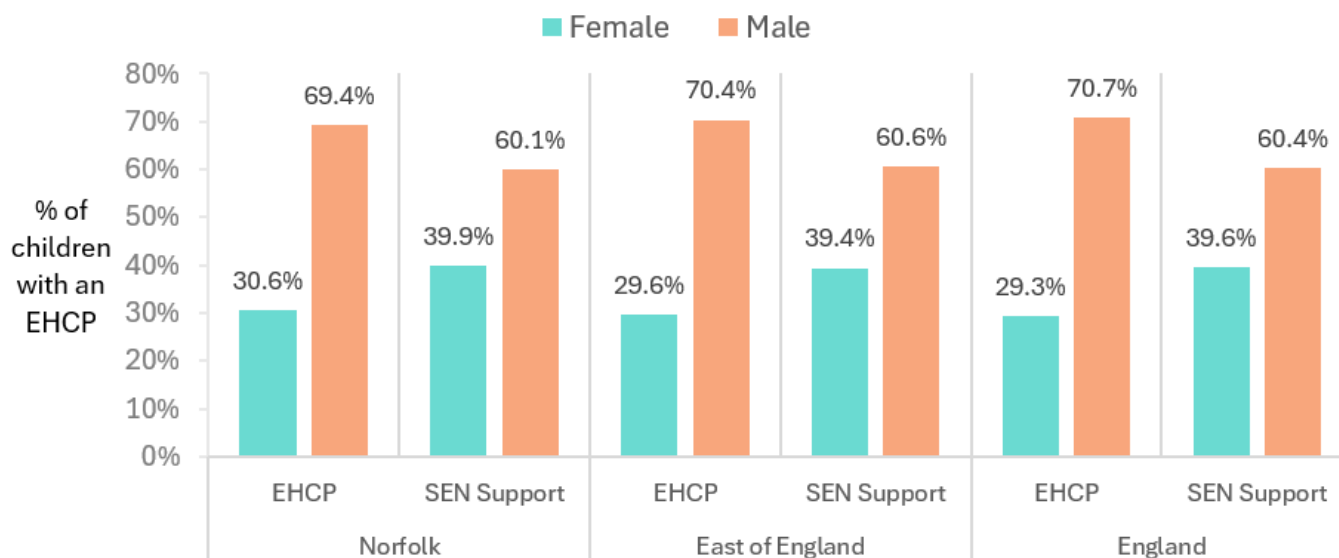
The graphs in Figure 8 show in more detail the percentage of children and young people with an EHCP over time, broken down by age group, and with England and East of England comparators.

This shows that until 2023, rates for 0-4 and 5-to-10-year-olds in Norfolk were in line with the national and regional comparator averages but have shown an 'up-tick' since 2024. Rates for those aged 11 and above have been above national and regional averages for some time.

Sex

The Education, Health and Care Plans publication provides a breakdown of both EHCPs and SEN Support by sex. It only provides a breakdown of 'male' and 'female' and doesn't account for children and young people who describe their gender in another way.

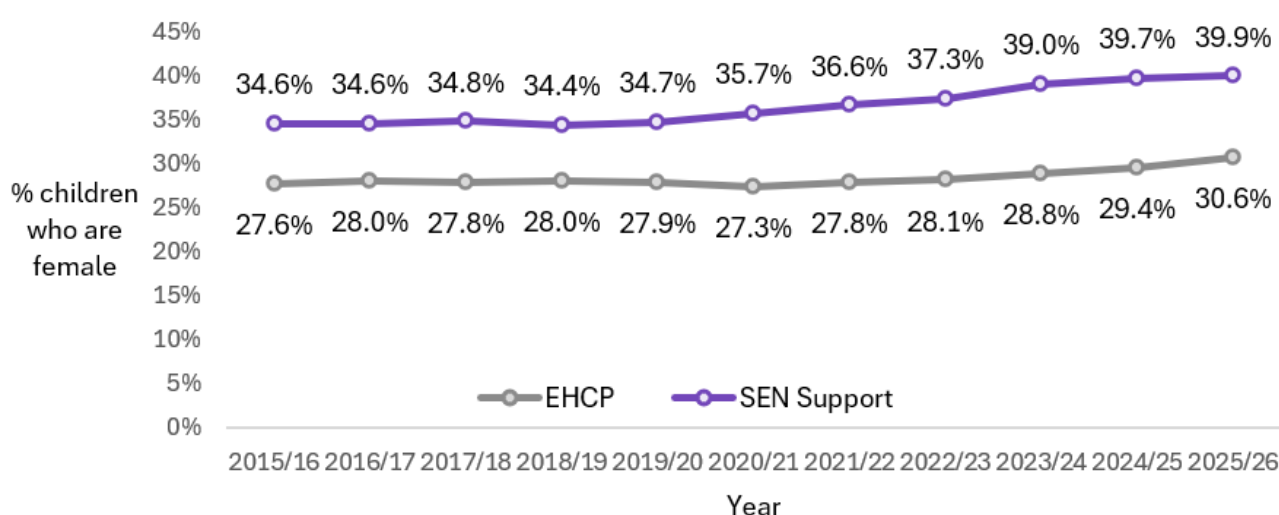
Figure 9: The percentage of school children and young people with an EHCP and with SEN Support by sex, for Norfolk, East of England and England



Data from Special Educational Needs in England, 2026

In Norfolk in 2025/26 around 69% of EHCPs were for males, with around 31% for females. In the same period, around 60% of children and young people receiving SEN Support were males, with around 40% female.

Figure 10: The percentage of school-age children with an EHCP or SEN Support in Norfolk who are female over time



Data from Special Educational Needs in England, 2025

This sex difference is recognised in national data and in wider research. Figure 9 shows Norfolk's rates alongside those for the East of England and England, with no notable differences between comparators.

There is not a single accepted reason for the imbalance between the number of boys and girls with recorded SEND. National analysis of statutory data shows the gender skew is most notable for primary support reasons such as Autistic Spectrum Disorder, Speech, Language and Communication Needs, and Social, Emotional and Mental Health. It also shows that the disparity widens at the higher end of statutory needs, with boys representing a larger majority for EHCPs than for SEN Support (reflected in Figure 9). In considering possible explanations for these differences, research suggest that behavioural bias and the different ways in which boys and girls exhibit symptoms are likely to impact both the diagnosis of SEND and the likelihood of referral for support (a helpful summary of some of the issues in this area can be found on the edpsy.org.uk website⁸).

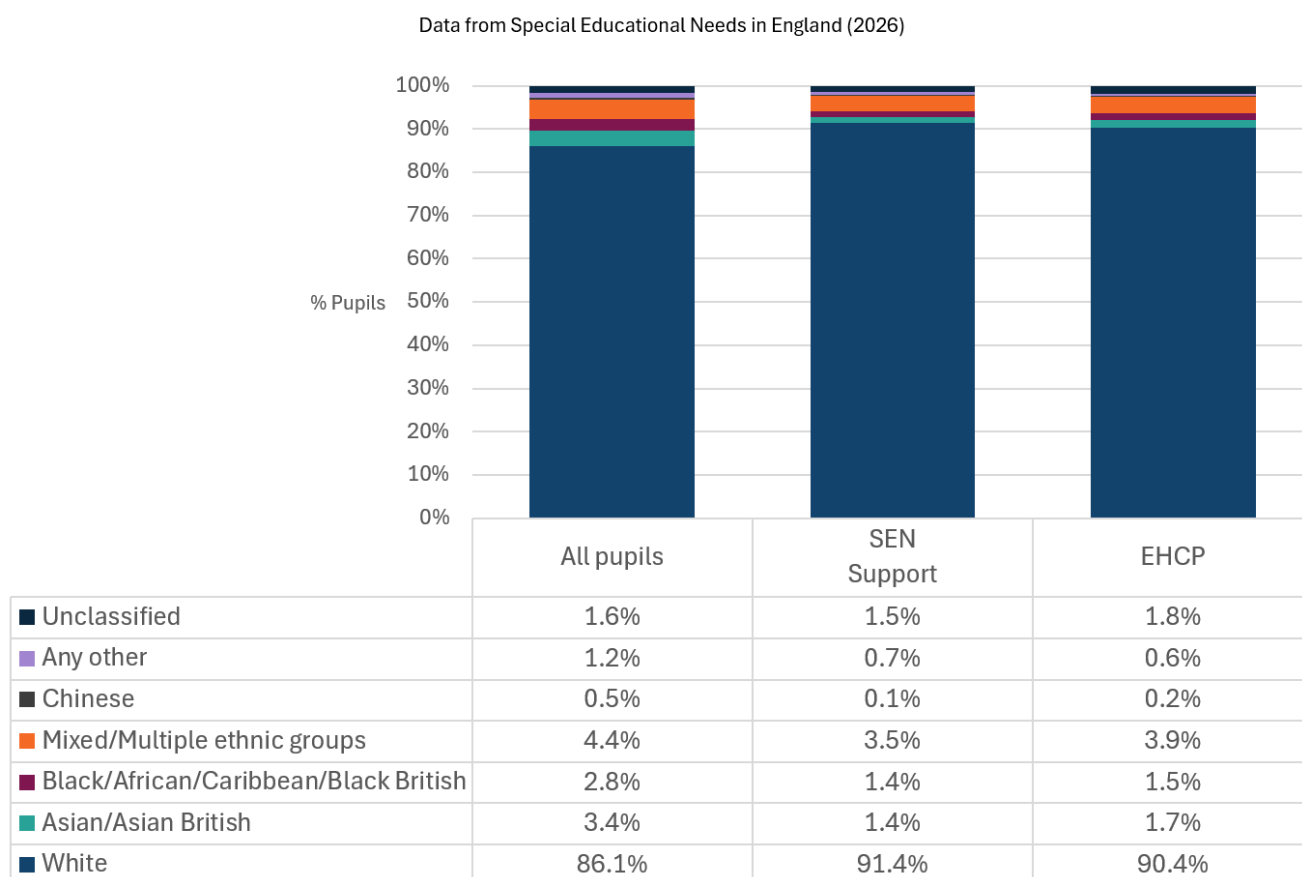
Within the context of this, there remain some concerns nationally about the under-diagnosis of SEND for girls, with local, national and regional data showing a slight increase in the proportion of girls with EHCPs and SEN support in recent years.

Figure 10 shows the percentage of children with an EHCP or SEN Support in Norfolk who are female over time. This shows a slight increase over time for EHCPs, and a more notable increase for SEN Support.

Ethnicity

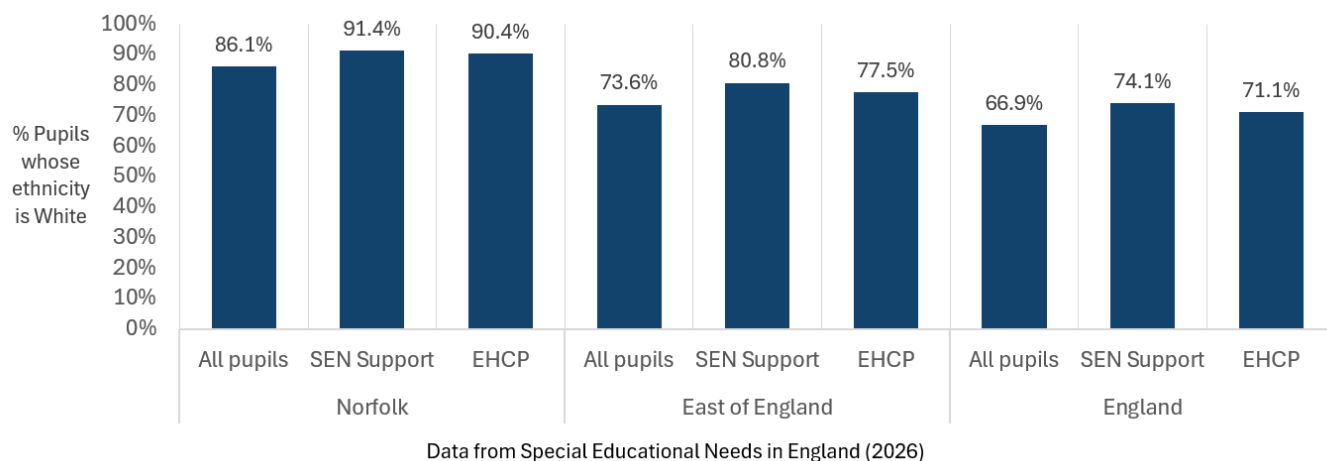
There are a higher proportion of children whose ethnicity is white within EHCP and SEN Support cohorts compared to the pupil population as a whole; as shown in Figure 11, with proportionally lower proportions of other ethnicities. For Black/African/Caribbean/ Black British, Asian/Asian British and Chinese ethnicities the proportion with a recorded SEND are around half of that in the 'all pupils' cohort.

Figure 11: The ethnicity of school-age children in Norfolk: all pupils, pupils with an EHCP, and pupils with SEN Support



The 'over-representation' of white children in EHCP and SEN Support cohorts is reflected in regional and national data. Figure 12 shows the proportion of 'All pupils', SEN Support and EHCP school-age cohorts who are white. The difference between Norfolk, the East of England and England (with Norfolk having the highest proportion of white pupils) reflects the variation in overall ethnic makeup between these areas.

Figure 12: The percentage of EHCP, SEN Support and 'all' pupils who are of white ethnicity, in Norfolk, East of England and England

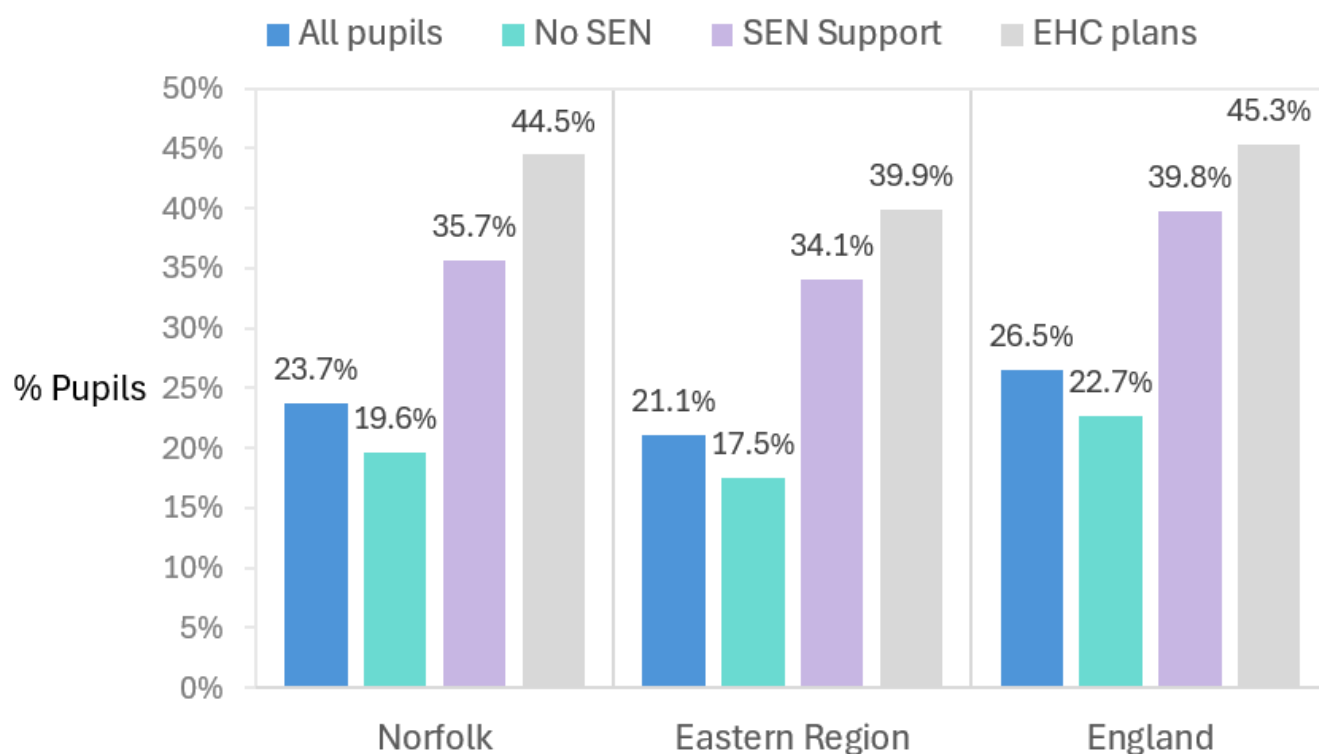


Research has sought to understand the reason behind the under-representation of ethnic minority groups in SEND cohorts, showing complex differences between ethnicities in terms of support needs⁹, but also raising concerns about access to support for families.

Socioeconomic circumstances

Understanding the socio-economic circumstances of children, young people and their families help partners understand their needs and how these might best be met. There is also an association between deprivation and higher needs for a several groups of children and young people who require support from services. One of the main ways we can measure deprivation for children with SEND is through their eligibility for Free School Meals (FSM). Being eligible for FSM means the child is living in a household eligible for defined benefits relating to income, and as such is the best available indicator of socio-economic circumstances.

Figure 13: The percentage of pupils eligible for Free School Meals by SEN status

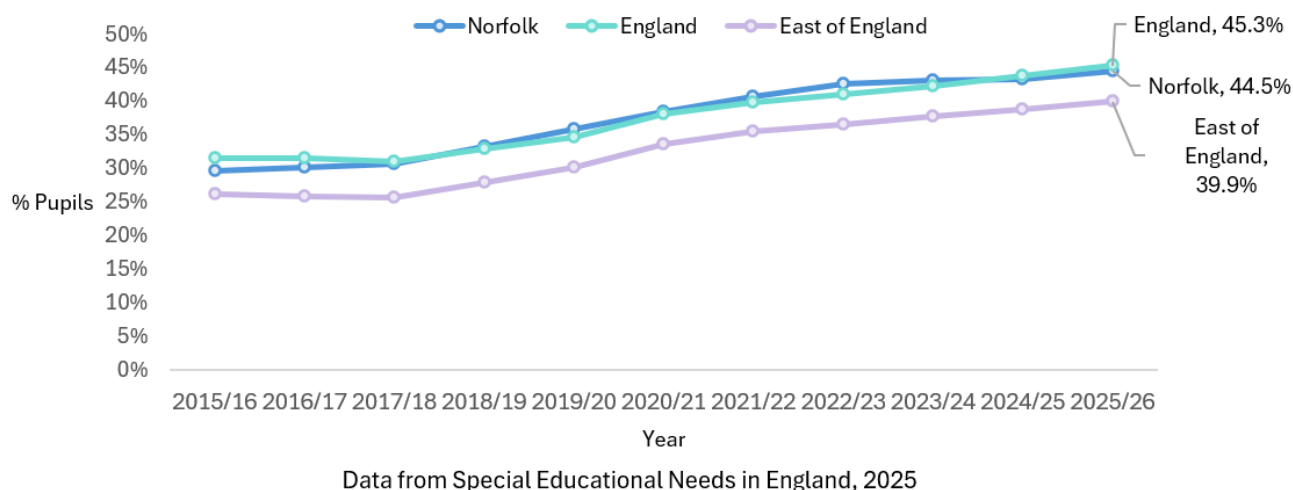


Data from Special Educational Needs in England, 2026

In Norfolk, regionally and nationally the proportion of children with an EHCP or who are receiving SEN Support and who are eligible for FSM is significantly higher than for children without a recorded SEND (see Figure 13). In Norfolk, children with an EHCP are twice as likely as the 'No SEN' cohort to be eligible for FSM. Children receiving SEN Support are also more likely to be eligible for FSM than those without a recorded SEND, though the rate is less than for children with EHCP. This suggests that those with more complex needs are more likely to experience worse economic circumstances.

This reflects national research about the association between families with a child with SEND and challenging economic circumstances. Research suggests that families with a child with SEND must spend significantly more money to achieve comparable standard of living, compared to a family without a child with SEND¹⁰.

Figure 14: The percentage of children with EHCPs eligible for Free School Meals over time



Numbers of children eligible for FSM has risen since 2017/18 reflecting a combination of challenging economic circumstances, and some changes in the way eligibility is determined (see Figure 14). Norfolk's rates of FSM are notably higher than the regional average, reflecting Norfolk's economic outcomes more broadly as shown within other indicators (most notably the percentage of children in low-income families, which is the third highest in the region, and the highest of the Eastern Region's county councils).

Support needs for children with Special Educational Needs and/or Disabilities

How SEND is classified in data

Data is gathered about the nature and support needs of children with Special Educational Needs and/or Disabilities as part of statutory data collections. However, there are some challenges when using this, most notably:

- That, as highlighted in the introduction in the section about terminology and language, the classifications of needs used may not reflect the specific needs of a child.
- Nationally these classifications appear to be subject to local interpretation and recording practices.
- The most used data relates to 'primary support reasons' (PSR), which describe the main reason a child requires support. As such, this overlooks other needs where they are present. For example, a child with multiple needs may only have the one most important to their educational needs recorded in structured data. This means that PSR is not a good measure of the prevalence of specific needs.

As a result of these challenges, Norfolk has implemented an 'Identification of Needs Descriptors in Educational Settings (INDES) framework. Instead of using the notion of 'primary need' this collects scores based on seven headings. These are:

- Social communication and interaction (SCI)
- Learning and cognition difficulties (LC)
- Speech and language (SL)
- Social, emotional and mental health (SEMH)
- Physical disability (PD)
- Deafness
- Visual impairment

Professionals in educational settings select descriptors in the above categories that best describe the presentation of need. This results in a numerical score for each need presenting with increasing complexity scored 1-7. This framework has only recently been implemented, meaning that data over time is not available.

The analysis presented below reviews Primary Support Needs for children identified through Early Identification of Need (EIN) notifications and then through the EHCP process. It then reviews initial findings from an analysis of INDES data.

Needs in Early Years: data from Early Identification of Need (EIN) notifications

As described in the earlier section about age and SEND, when health and other professionals identify that a child of pre-school age is likely to require additional support, they are required to submit an Early Identification of Need (EIN) notification to the relevant local authority. Numbers of EINs have grown steadily in Norfolk with 340 received in 2025 compared to 114 in 2017.

As described in the earlier section about age and SEND, when health and other professionals identify that a child of pre-school age is likely to require additional support, they are required to submit an Early Identification of Need (EIN) notification to the relevant local authority. Numbers of EINs have grown steadily in Norfolk with 340 received in 2025 compared to 114 in 2017.

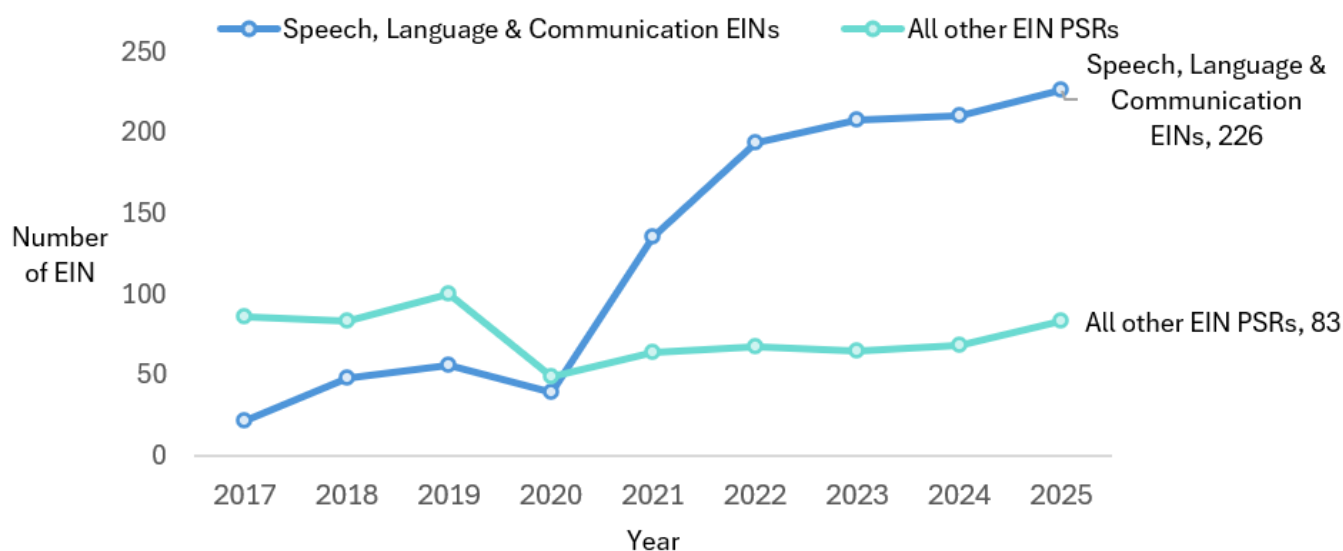
Table 1. The number of EIN in 2025 broken down by Primary Support Reason (PSR)

Primary Support Reason	Number of EIN (2025)	% of EIN with a PSR (2025)
Down Syndrome	Fewer than 7	-
Profound & Multiple Learning Difficulty	Fewer than 7	-
Hearing Impairment	Fewer than 7	-
Severe Learning Difficulty	Fewer than 7	-
Moderate Learning Difficulty	Fewer than 7	-
Multi-Sensory Impairment	Fewer than 7	-
Physical Disability	Fewer than 7	-
Specific Learning Difficulty	Fewer than 7	-
Autistic Spectrum Disorder	33	10.7%
Vision Impairment	12	3.9%
Social, Emotional and Mental Health	23	7.4%
Speech, Language and Communication Needs	226	73.1%

Data from the most recent calendar year of EIN (see Table 1) shows that a significant majority of notifications cite a PSR of 'Speech, Language and Communication Needs' (73.1% of EIN with a PSR recorded). Note that most PSRs have their figures suppressed ('Fewer than 7') because of very low numbers, and to avoid identifying individuals within the data.

Whilst 'Speech, Language and Communication Needs' has been one of the most cited PSRs within EINs since 2016, it has grown significantly since 2019. Figure 15 shows numbers of 'Speech, Language and Communication' EINs over time compared to all other EINs.

Figure 15: Speech, Language and Communication EINs compared to all other EIN primary support reasons (PSR) over time (EIN without a recorded PSR not shown)



Data from local systems, Norfolk County Council

Whilst the data does not on its own explain this increase in Speech, Language and Communication EINs, it is likely to have been prompted by the impact of the Covid-19 pandemic from 2020. Before 2020, Autism was the most frequently recorded primary support need. Since 2020, most other primary support reasons have reduced, although this probably reflects that Speech, Language and Communication was the primary need, rather than because other needs were not evident.

The impact of Covid on speech and language development in young children is explored extensively in research (see for example 'Social communication skill attainment in babies born during the COVID-19 pandemic: a birth cohort study'¹¹). As the cohort who were directly affected by the pandemic move through school, it may be that demand for speech and language support changes.

An analysis in 2025 of the longer-term outcomes of children who had been subject to an EIN in 2017 showed that:

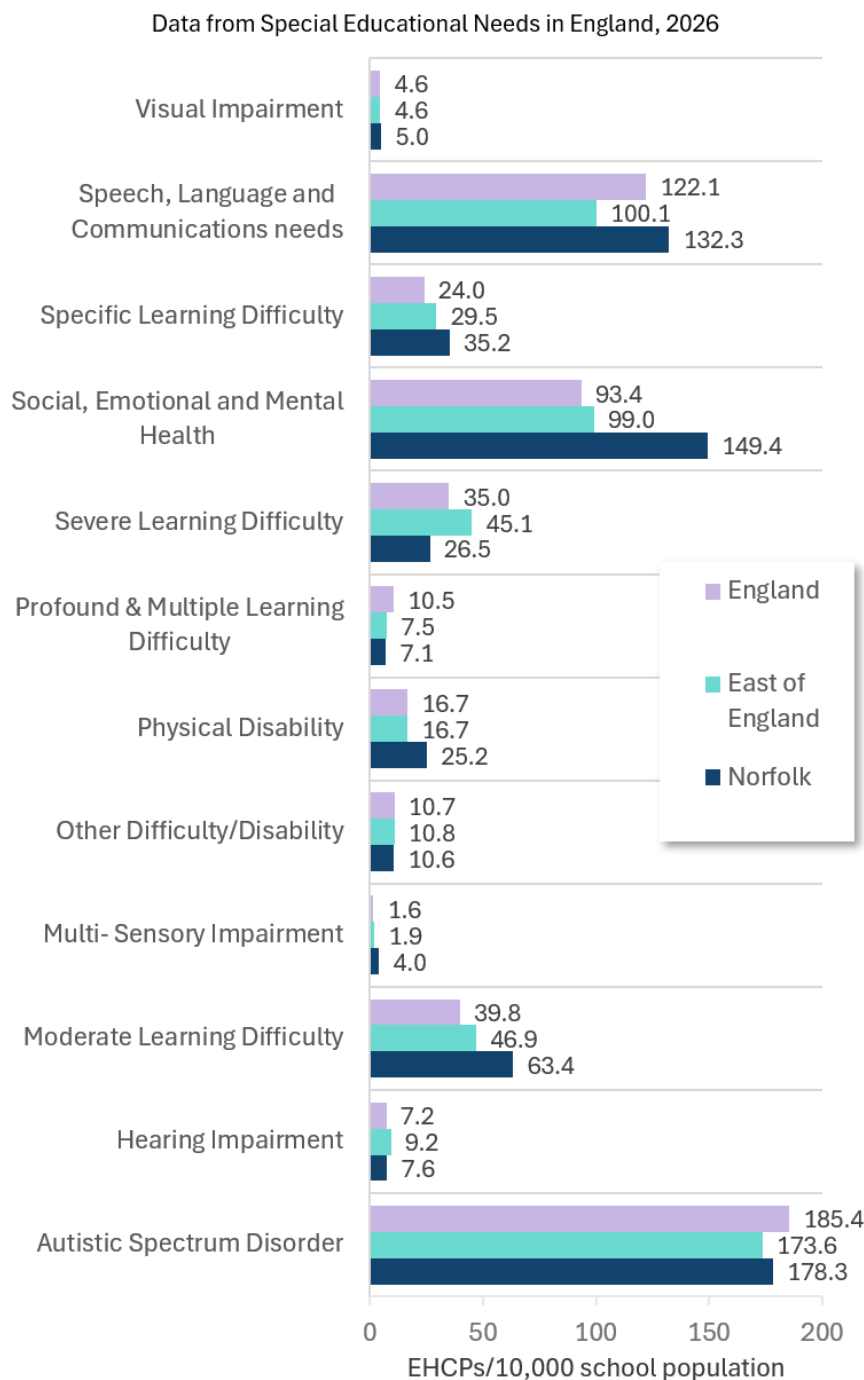
- Two thirds now have an EHCP or are in the process of being assessed for an EHCP.
- Over 50% (of those subject to an EIN between 2017 and 2020) are attending a special school.
- Children who had an EIN are more likely to be persistently or severely absent from school.

Primary support needs for children and young people with an Education, Health and Care Plan or in receipt of SEN Support

As with EINs, EHCPs and SEN Support classifications record a primary support reason that describes the main reason that the child requires additional support.

Figure 16 shows the rate of children with an EHCP of each primary support need per 10,000 of the school population, for Norfolk, the East of England and England.

Figure 16: School-age children with an EHCP per 10,000 school population broken down by Primary Support Need (2026)



As with EINs, EHCPs and SEN Support classifications record a primary support reason that describes the main reason that the child requires additional support.

Figure 16 shows the rate of children with an EHCP of each primary support need per 10,000 of the school population, for Norfolk, the East of England and England.

For Norfolk, the three most frequently cited primary support needs are, in order: Autistic Spectrum Disorder (ASD), Social, Emotional and Mental Health (SEMH), and Speech, Language and Communication Needs (SLC).

For ASD, Norfolk's rates are slightly above the regional average, and below the national average.

For SLC Norfolk's rates are above both regional and national averages.

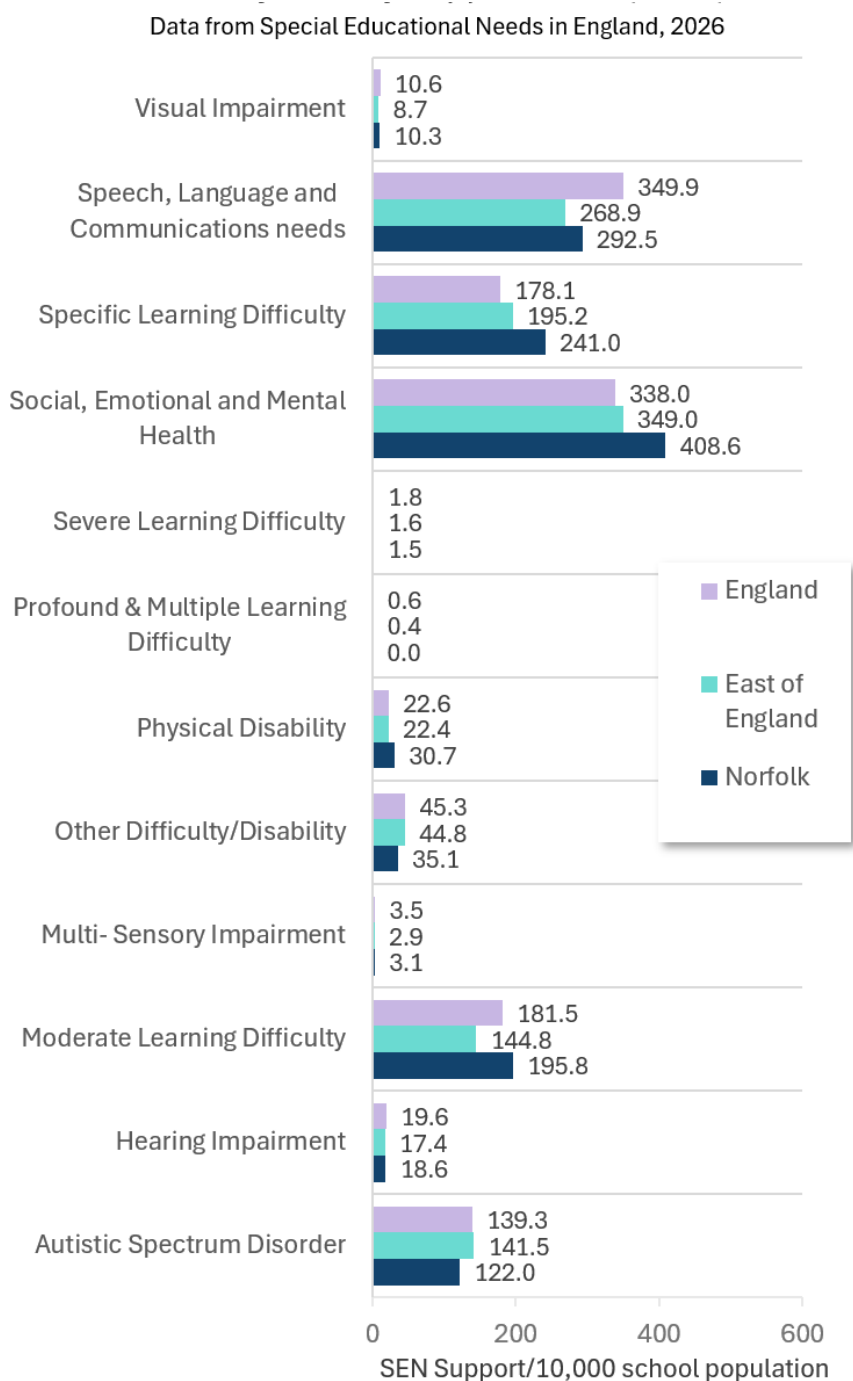
Norfolk has a significantly higher rate of children SEMH EHCPs – Norfolk's 2025 rate per 10,000 school population is 60% above the national average.

There are also some notable differences in other PSRs.

Norfolk has a higher rate of children with PSRs of Specific Learning Difficulty and of Moderate Learning Difficulty; but also has a lower rate of children with a PSR of Severe Learning Difficulty and of Profound and Multiple Learning Difficulty. Whilst the data cannot evidence it, these PSRs may be subject to some variations in recording practice between PSRs. When summed, the rate of children with PSRs relating to a learning difficulty in 2026 is similar in Norfolk (132 per 10,000 school population) to the Eastern Region average (129 per 10,000 school population).

A review of rates of children receiving SEN Support shows some similar trends to these PSRs, but also some additional notable findings (see Figure 17).

Figure 17: School-age children receiving SEN Support per 10,000 school population broken down by Primary Support Need (2026)



SEMH is also the most cited PSR for those receiving SEN Support in Norfolk – however, the difference in the Norfolk rate compared to the geographic comparators is not as great as for EHCPs.

As for EHCPs, SLC is the second most cited PSR for children receiving SEN Support in Norfolk – however, the rate is below the national rate unlike for EHCPs.

A lower rate of children receiving SEN Support have a PSR of ASD when compared to national and regional averages.

In addition, Specific Learning Difficulty accounts for a higher proportion of children and young people with SEN Support compared to those with EHCPs. Norfolk's rate is higher than geographical comparators for this PSR for both SEN Support and EHCPs.

As with EHCPs, data about PSRs for children with SEN Support does not on its own help explain variations between PSRs or between Norfolk and the geographic comparators. However, some observations stand out:

- Higher rates of children with an SEMH PSR, particularly for EHCPs, but also for SEN Support.
- The notably higher rates of children receiving SEN Support with a PSR of Specific Learning Difficulty compared to those with EHCPs.
- Notably lower rates of ASD at SEN Support compared to geographical averages.

Data about support needs from Norfolk's 'Identification of Needs Descriptors in Educational Settings' (INDES) framework

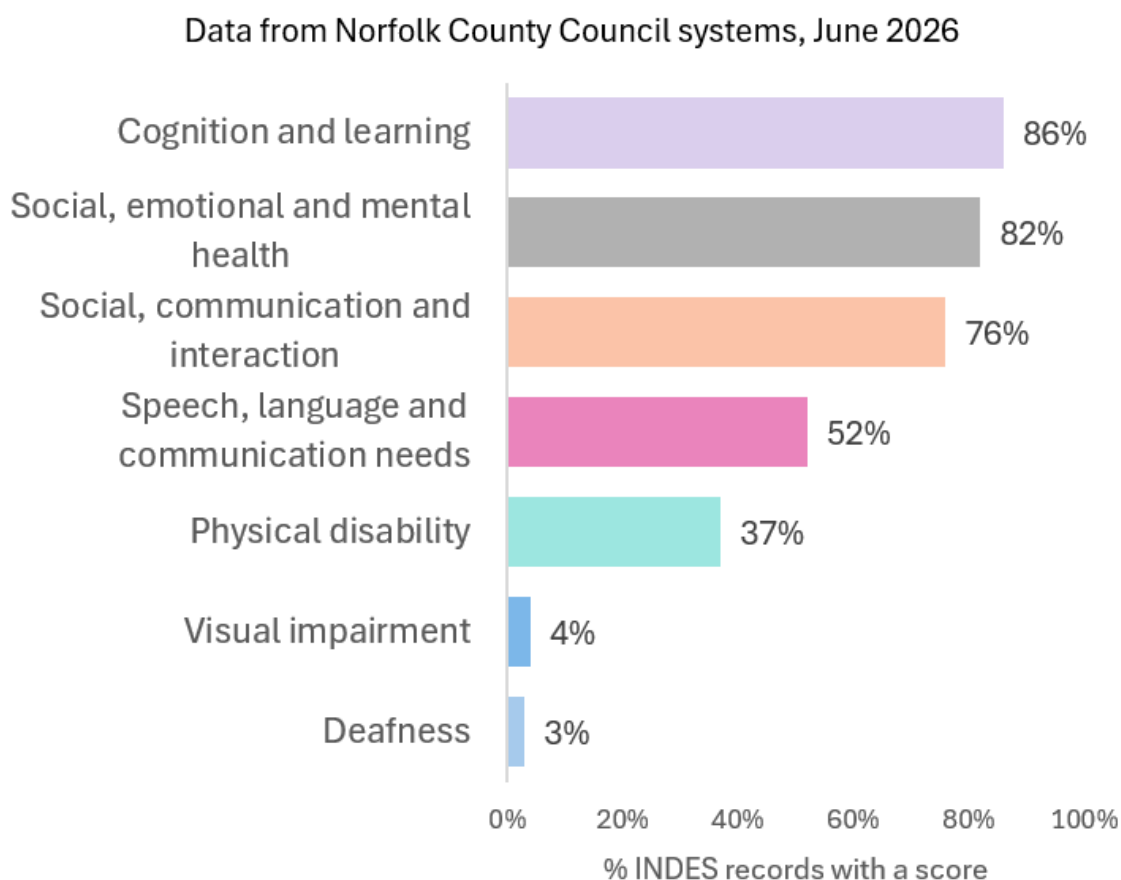
To better understand the nature of the needs of children and young people with SEND, Norfolk introduced a 'Identification of Needs Descriptors in Educational Settings (INDES) index. Rather than ascribing a single primary support need, this index uses a score from 1-7 to describe the complexity of the presentation of need against a common set of need descriptors:

- Speech, language and communication needs
- Social, communication and interaction
- Cognition and learning
- Social, emotional and mental health
- Deafness
- Visual impairment
- Physical disability

The INDES index was introduced in 2022, with over 39,000 submissions made since, meaning that over 97% of children with an EHCP, and around 90% of children receiving SEN Support, having an INDES record.

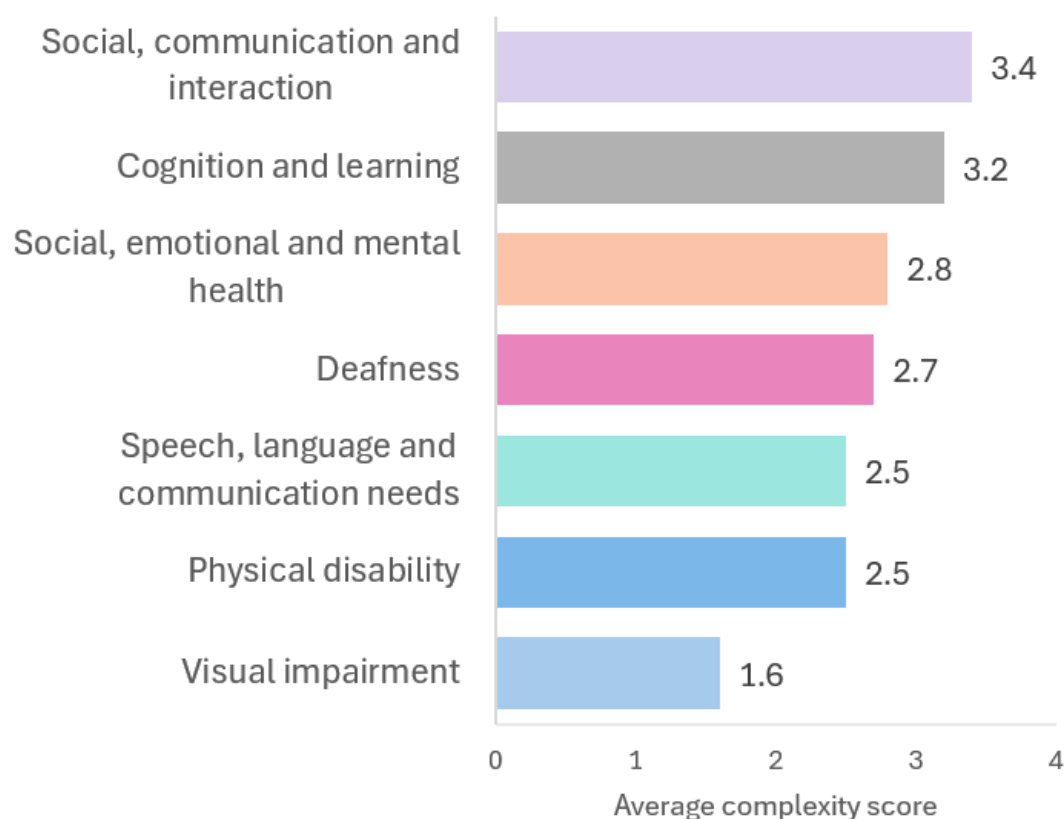
Figure 18 shows the prevalence of each needs descriptor. Not every child will have a score for each descriptor, and this graph shows the percentage of all children with an INDES record that have a score in each of the categories.

Figure 18: Percentage of INDES records registering a score for each needs descriptor



From this analysis, 'Cognition and learning' has the greatest prevalence, followed in order by 'social, emotional and mental health', 'social, communication and interaction', and 'speech, language and communication needs'.

Figure 19: Average complexity score for each INDES needs descriptor



It is not helpful to compare these prevalence rates to the rate of Primary Support Needs described in the previous section. INDES focuses on notions of complexity, and the ability to record multiple scores against different needs is fundamentally different to ascribing a single primary need. In addition, many of the needs descriptors are different. Nevertheless, both approaches recognise the prevalence of social, emotional and mental health needs, which are the second most often ascribed need for each approach.

A strength of the INDES approach is that it describes the complexity of needs. Figure 19 shows the average score for each descriptor (omitting null scores). Where present, 'social, communication and interaction' has the highest average score, followed by 'cognition and learning' and then 'social, emotional and mental health'.

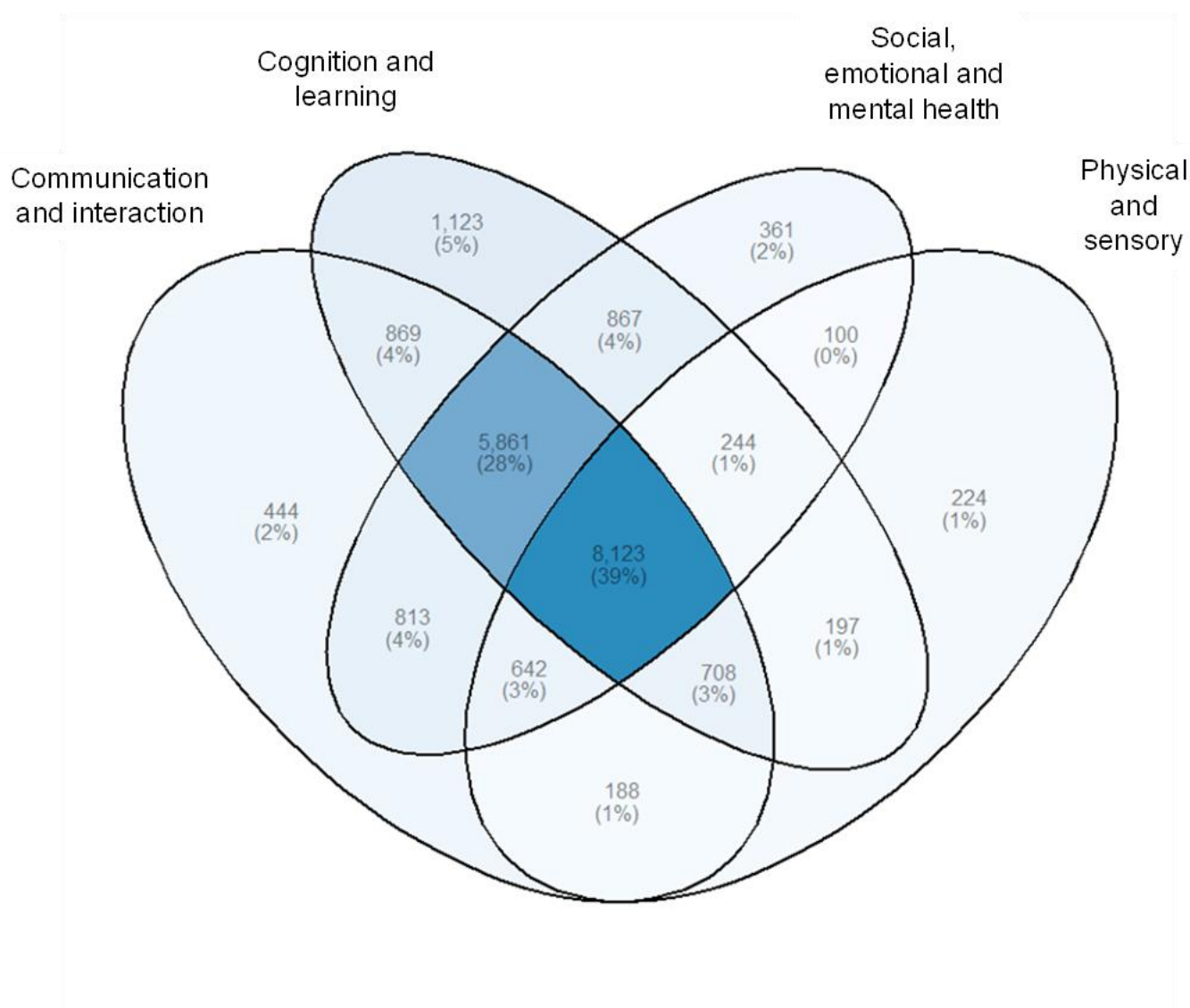
Another strength of the INDES approach is that it allows an understanding of the association between needs – where one need more or less often associates with another.

The INDES framework groups the needs descriptors into four broader areas of need as follows:

- Communication and interaction (comprising 'Speech, language and communication' and 'Social, communication and interaction').
- Cognition and learning (containing just that descriptor).
- Social, emotional and mental health (containing just that descriptor).
- Physical and sensory (comprising 'Physical disability', 'Hearing impairment' and 'Visual impairment').

Figure 20 shows the percentage of INDES assessments containing scores in each of these broader areas of need.

Figure 20: Venn diagram showing the percentage of needs descriptors that associate with each other in INDES assessments.



This analysis shows that:

- Around one third (39%) of INDES describe some level of need in all four areas.
- The most common 'group' of associations involving 28% of INDES is between 'Communication and interaction', 'Cognition and learning' and 'Social, emotional and mental health'.
- The next most frequent 'segment' is for 'learning and cognition' with no other presentations of need, accounting for 4% of INDES.

A further, more detailed analysis of the INDES that score highly (a score of 5 or over) for each need descriptor shows that:

- INDES with high scores for 'Speech, language and communication' also score on average highly for 'Social, communication and interaction' and 'Cognition and learning'.
- High scores for 'Social, communication and interaction', 'Cognition and learning' and 'Social, emotional and mental health' often coincide.

What Primary Support Needs and INDES assessments tell us about needs overall

Statutory Primary Support Needs and the INDES frameworks record needs from different perspectives, and within this there is scope for uncertainty about the prevalence of different needs in Norfolk. More analysis is required to understand the interaction between both frameworks (for example the INDES scores for children and young people with particular recorded primary support needs) and this will be included in future Joint Strategic Needs Assessments.

Nevertheless, it is possible to use both to provide a richer view of need than previously available. Looking at the results from both frameworks together, we can say the following:

- Looking at defined need types, the four most prevalent special educational needs and/or disabilities are, in order: autistic spectrum disorders; social, emotional and mental health needs; learning difficulties; and speech, language and communication needs.
- Of these, three – autistic spectrum disorders, social, emotional and mental health needs, and speech, language and communication needs – have increased notably in recent years and account for a large proportion of Norfolk's rise in EHCPs.
- Whilst the notion of primary support needs helps partners assess what might be driving changes in numbers of children with SEND, in reality most children have multiple needs.
- In particular, cognition and learning needs, communication and interaction needs, and social, emotional and mental health problems are present to some extent for over 6-in-10 children and young people subject to an EHCP or receiving SEN Support.
- These needs are also more likely to be complex, with multiple drivers and impacts across coinciding needs.

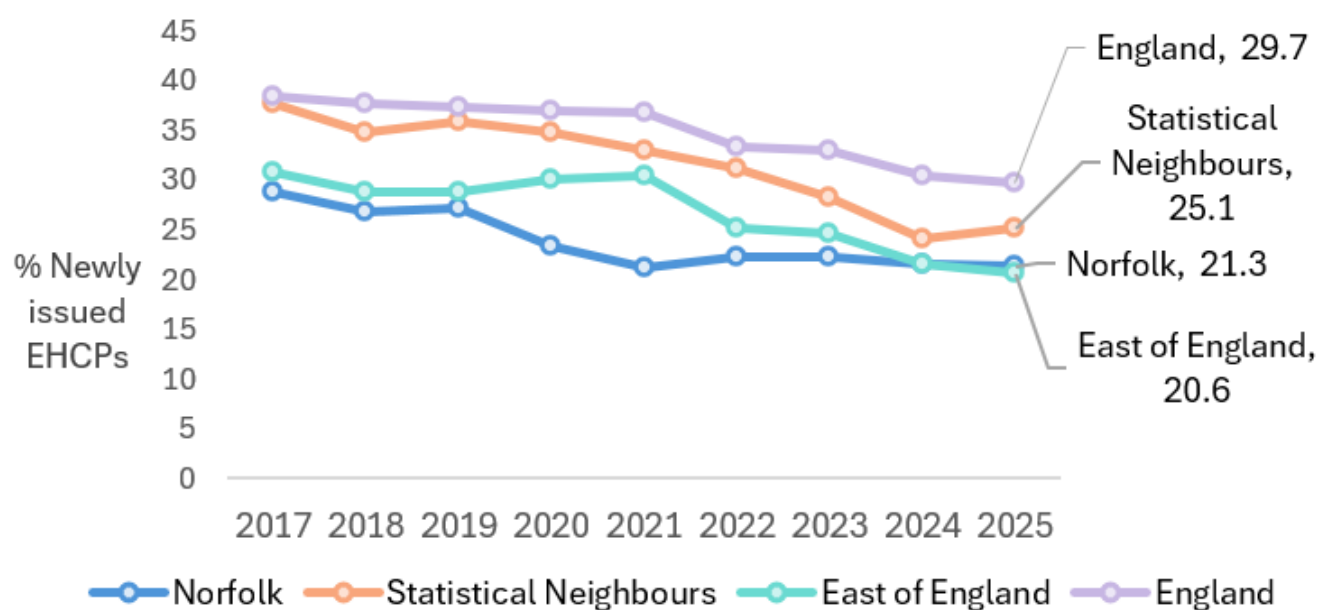
As such, whilst Norfolk's higher rate of EHCPs appears to be primarily driven by children and young people with 'social, emotional and mental health' needs, detailed data suggest a more complicated picture. In reality, there is a growing number of children and young people with a mixture of complex learning, communication, social and/or mental health needs. Within this context, there is evidence of growing rates of recorded autism, growing rates of speech and language needs particularly amongst younger children, and a notable cohort of children with physical and sensory disabilities that are complicated by other support needs.

Education provision and outcomes for children with SEND

School settings for children and young people with SEND

Regionally and locally the proportion of children with new EHCPs (or statements) in Local Authority maintained mainstream schools has fallen since 2016. Norfolk's percentage of new EHCPs issued to children in mainstream schools has remained somewhat stable since 2021 (see Figure 21).

Figure 21: Percentage of newly issued EHCPs in Local Authority maintained mainstream schools

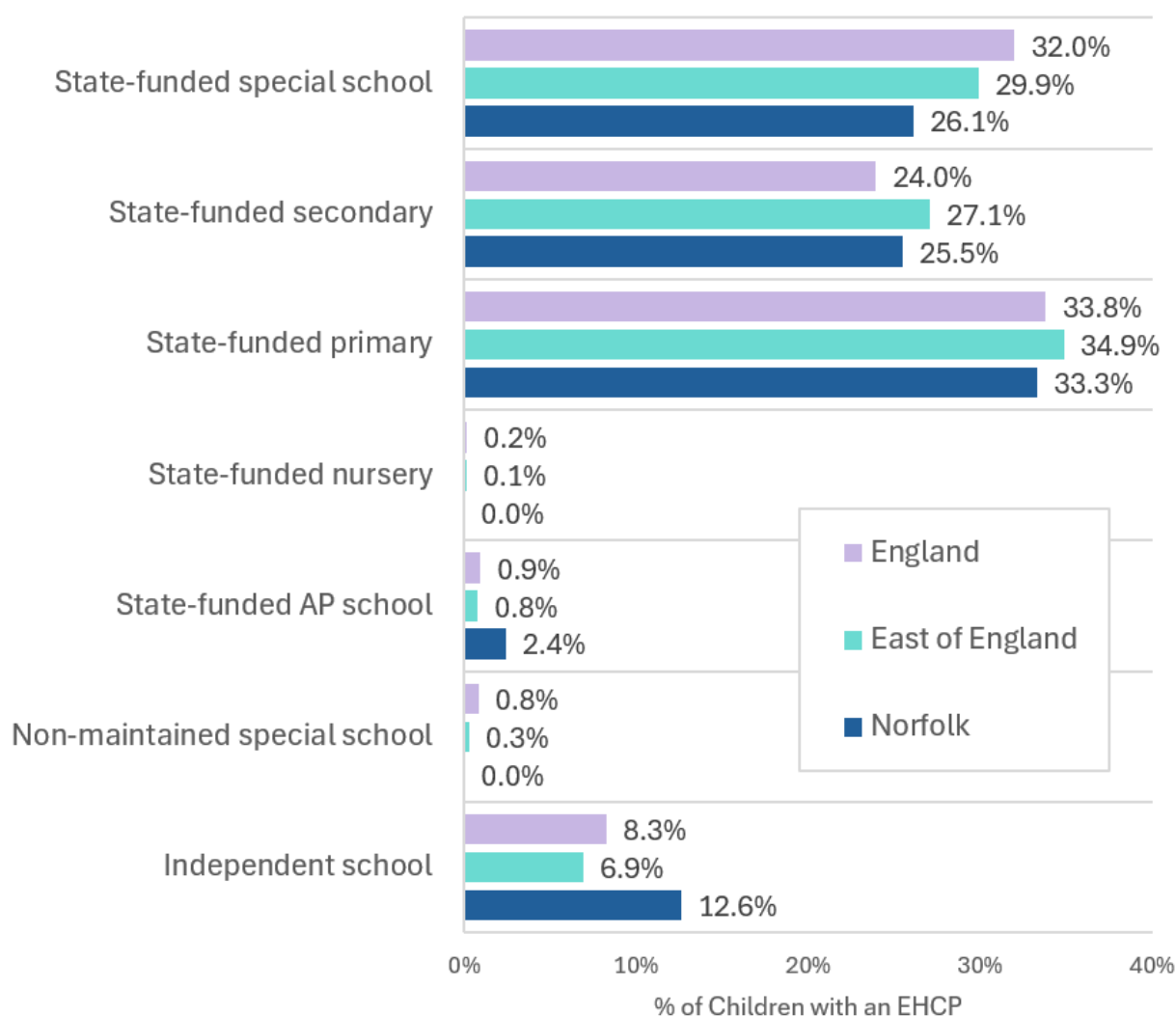


Data from Education, Health and Care Plans publication 2026

Compared to the England and its statistical neighbours, Norfolk has a lower percentage of new EHCPs issued for children in Local Authority maintained mainstream schools (21.3% in Norfolk, compared to 25.1% for the statistical neighbour average and 29.7% for the England average, in 2025). The East of England average was also historically above Norfolk's but has reduced and for 2025 was at 20.6% (slightly below Norfolk's rate).

Norfolk's rate of new EHCPs in LA maintained mainstream schools appears to reflect its mix of schools. Figure 22 shows the percentage of school-age children and young people with an EHCP in each school phase type group. This shows that a slightly smaller percentage of children with an EHCP go to state-funded special schools compared to regional and national averages, but a larger proportion in Norfolk attending state-funded AP (Alternative Provision) schools and Independent Schools.

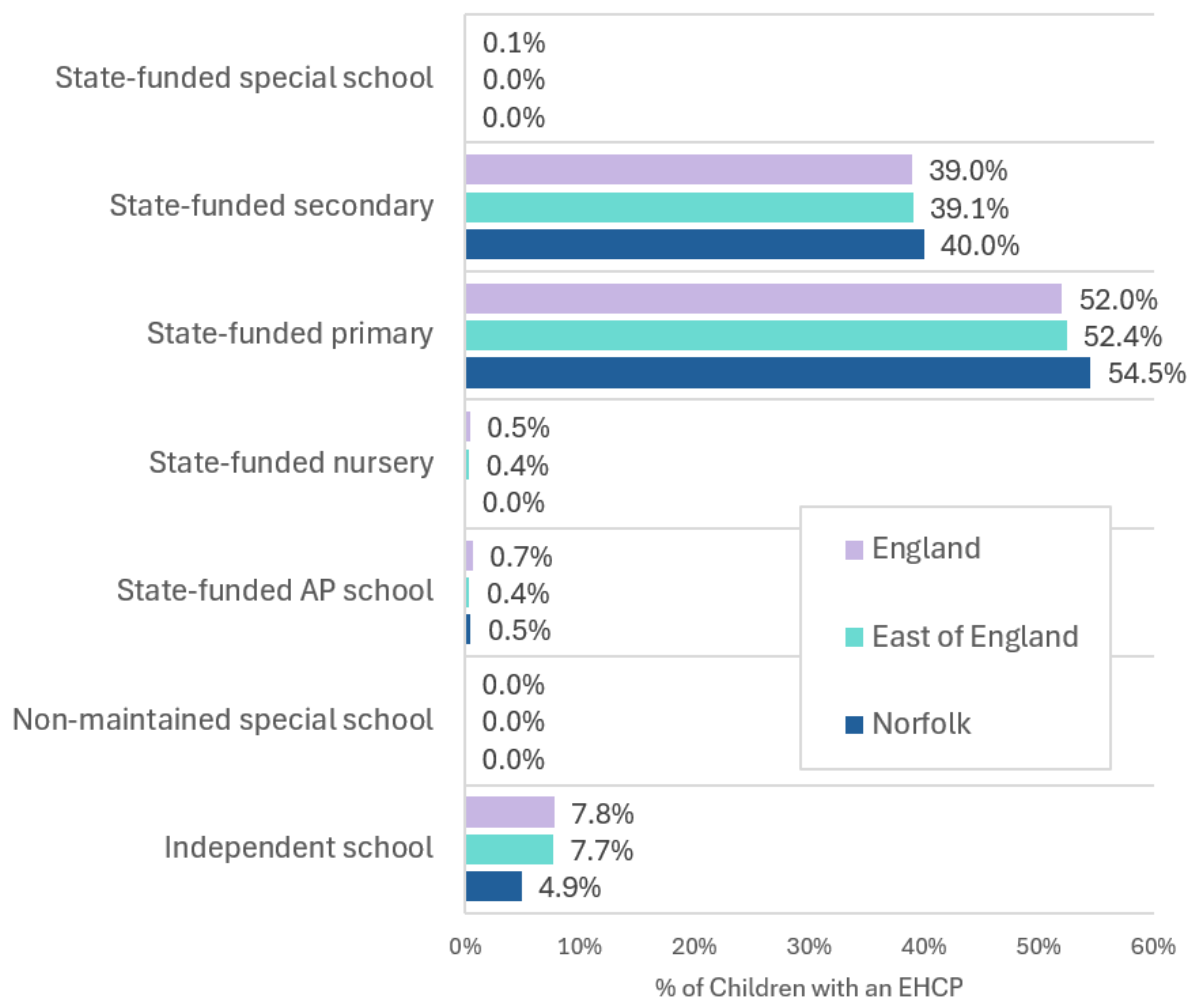
Figure 22: The percentage of children with an EHCP in different school phase type groups



Data from Special Educational Needs in England 2026

Figure 23 shows the equivalent proportions for children in receipt of SEN Support. This shows that for the SEN Support cohort in Norfolk, a smaller proportion go to independent schools than regionally or nationally.

Figure 23: The percentage of children with SEN Support in different school phase type groups



Data from Special Educational Needs in England 2026

Reviewing data about the types of school that pupils go to suggests that the key trends for EHCP and SEN Support cohorts are in line with the broad availability of places in different school types in Norfolk. Specifically:

- Norfolk has a similar proportion of pupils in state-funded special schools overall compared to national and regional averages.
- Norfolk has a higher proportion of pupils in state-funded alternative provision schools.
- Norfolk has a lower proportion of independent schools overall (potentially explaining the lower proportion of those with SEN Support in those settings), but a higher proportion of those independent schools are independent special schools (potentially explaining the higher proportion of the EHCP cohort in independent schools).

Reviewing educational outcomes for children with SEND

Children with SEND on average achieve lower attainment results than children without SEND. For example, in the Foundation Stage in 2024 68.3% of all children at that age in Norfolk achieved a 'good' level of development, compared to 25.2% of children in receipt of SEN Support, and 5.4% of children with an EHCP. This overall difference is not widely explored within this document, which instead focuses on Norfolk's average attainment rates for key groups compared to the East of England and England benchmarks, providing a review of areas where Norfolk is stronger in and where it requires improvement.

In addition to England and East of England benchmarks, this analysis of Norfolk's education data also reviews Norfolk's 'statistical neighbour' average benchmark. Norfolk's statistical neighbours are a group of areas with similar demographic and geographic characteristics.

Where data is missing because of non-returns during the Covid pandemic, this is denoted by a straight dashed line between the two available data points.

In general, educational attainment for SEND cohorts in Norfolk reflect two over-arching findings:

- That comparative educational attainment for SEND cohorts reflects Norfolk's overall educational performance in key stages with attainment at Foundation Stage in line with or above comparators; lower attainment than comparators for Norfolk at Key Stage 2; performance at Key Stage 4 in line with comparators; and mixed post-16 outcomes in Norfolk.
- That attainment for children with an EHCP in Norfolk is comparatively strong in most areas, suggesting that this cohort achieves good educational outcomes compared to benchmarks. Attainment for children receiving SEN Support is mixed compared to key benchmarks, with comparatively strong results in some areas (Key Stage 4), less strong performance in others (Key Stage 2), and a number results that are similar to comparators.

The following section looks at each phase/key stage in turn, reviewing outcomes for children and young people with an EHCP, those with SEN Support, and then either those with no recorded SEND or 'all children' (depending on which is available).

Educational outcomes in the Foundation Stage for children with SEND

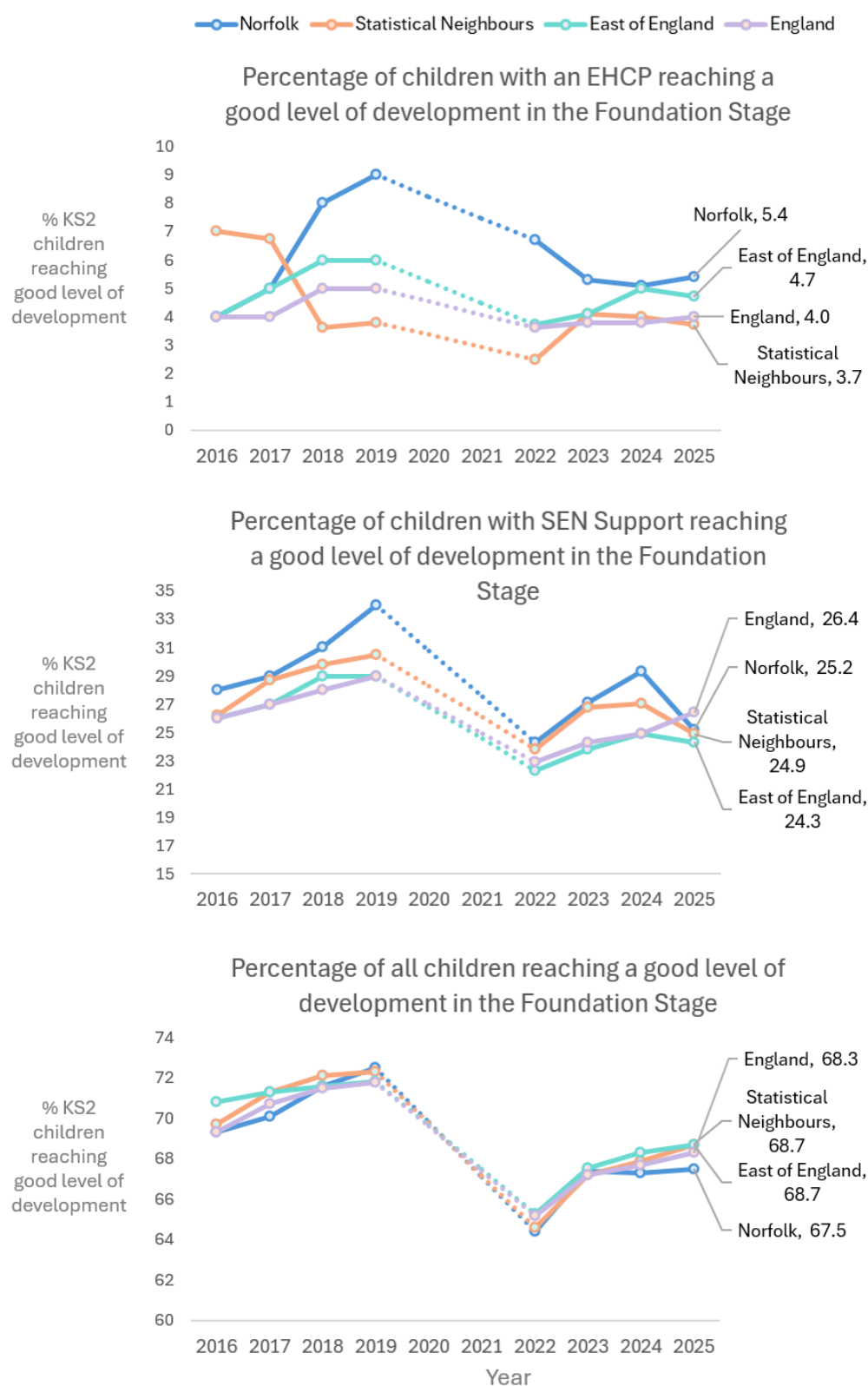
Some of the earliest data available about educational outcomes for children with SEND is at Foundation Stage.

Data about educational outcomes for children with SEND in the Foundation Stage comes from The Early Years Foundation Stage Profile (EYFSP). This is a teacher assessment of a child's development at the end of the early years foundation stage (EYFS), specifically the end of the academic year in which a child turns 5. This is typically the summer term of reception year. The assessment framework, or EYFS Profile, consists of 17 early learning goals (ELGs) across 7 areas of learning¹².

The percentage of children achieving a good level of development at the Foundation Stage, for children with an EHCP, children receiving SEN support, and for all children are shown in the graphs (Figure 24). In Norfolk 5.4% of children with an EHCP, 25.2% of those receiving SEN Support, and 67.5% of all pupils achieve a good level of development at the Foundation Stage.

Figure 24: Children reaching a good level of development in the Foundation Stage

Note: the left/Y-axes are not standardised on the below graphs



Data from Early years foundation stage profile results (2025)

For both EHCP and SEN Support cohorts, Norfolk's latest results are slightly above most comparator rates, continuing a longer-term trend in both measures with Norfolk exceeding national, regional and statistical neighbour averages since 2018.

However, the proportion of children with an EHCP achieving a good level of development has fallen since 2022, and there has been a dip for those with SEN Support in the last year.

These results are within the context of similar results across the comparators when looking at all children – with Norfolk and all the comparator groups reporting between 67.5% and 68.3% of Foundation Stage children achieving a good level of development in 2025.

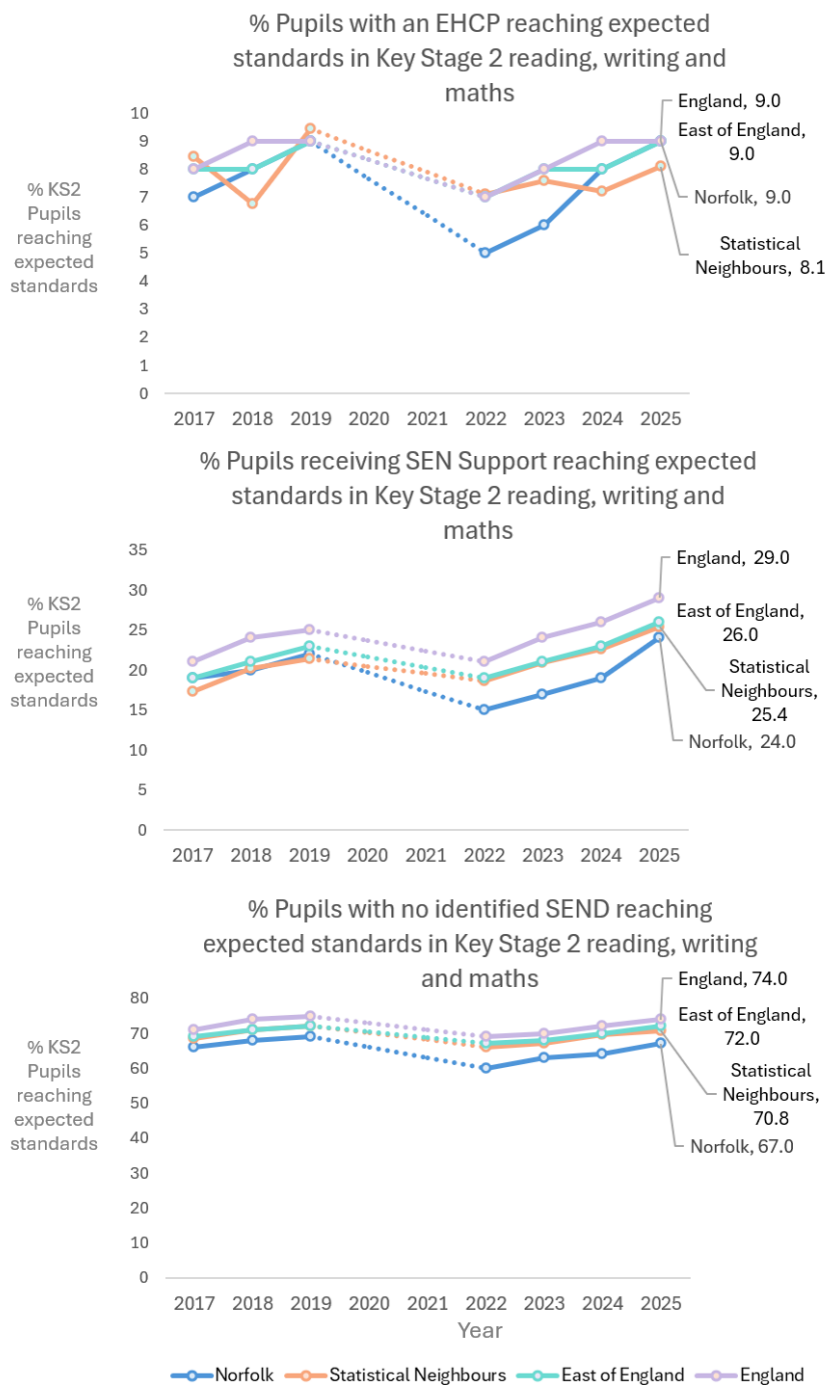
Educational outcomes at Key Stage 2 for children with SEND

Key Stage 2 covers school years 3 to 6 in primary school, and tests are undertaken at the end of this period when pupils are usually aged 10 or 11¹³.

The percentage of children reaching expected standards in Key Stage 2 reading, writing and maths for children with an EHCP, children receiving SEN support, and for all children are shown in Figure 25. In Norfolk 9.0% of children with an EHCP, 24.0% of those receiving SEN Support, and 67.0% of all pupils reach expected standards.

Figure 25: Children reaching expected standards in Key Stage 2

Note: the left/Y-axes are not standardised on the below graphs



Data from Key stage 2 attainment publication (2024/25)

Norfolk's overall Key Stage 2 results are below comparator averages, for pupils with no identified SEND and those receiving SEN Support. For both, the most recent results are below all comparators.

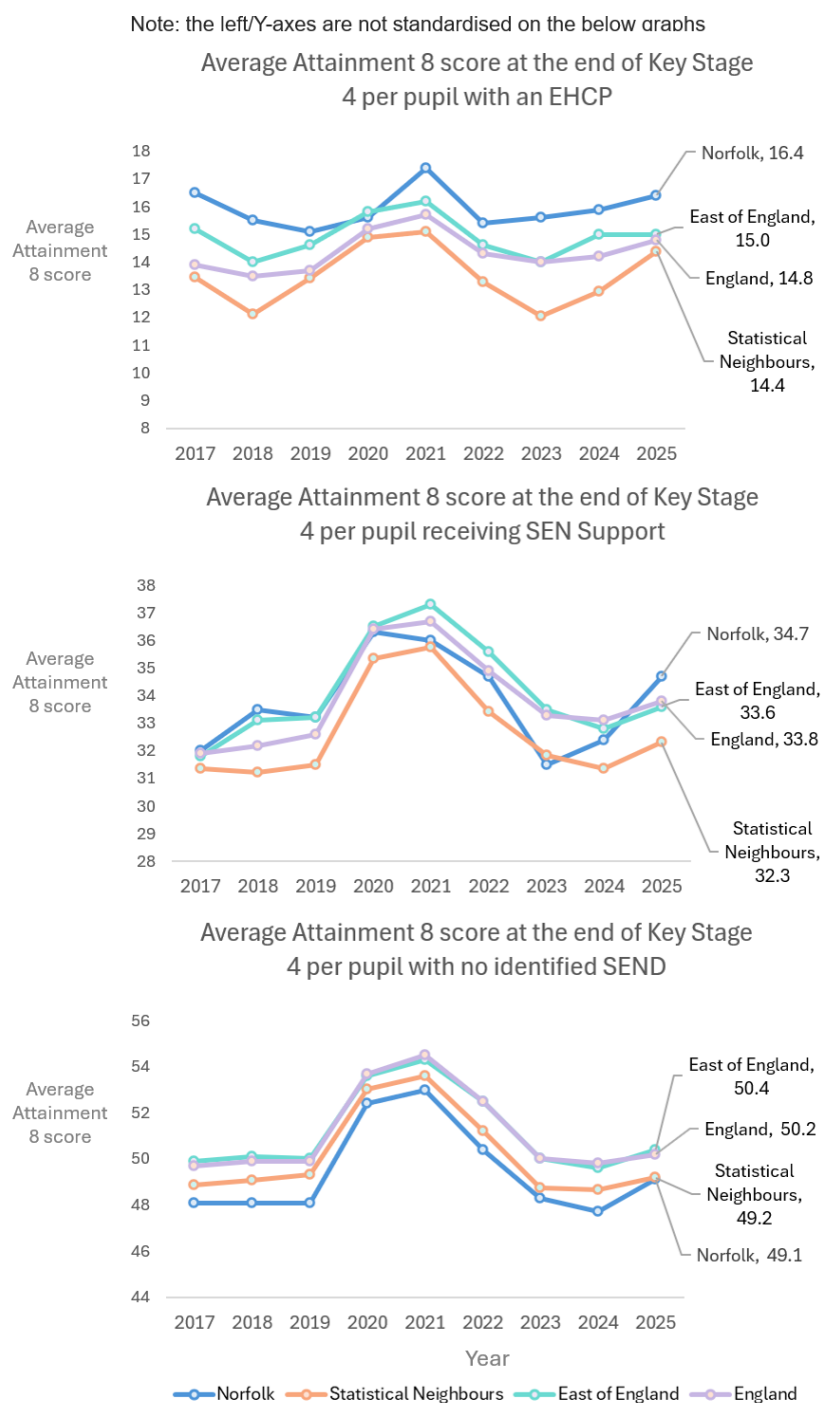
In contrast, the proportion of Norfolk's EHCP cohort reaching expected standards is in line with the East of England and England averages and is higher than for statistical neighbours. This continues the pattern of Norfolk's EHCP cohort doing comparatively well.

Educational outcomes at Key Stage 4 for children with SEND

Attainment at the end of Key Stage 4 is measured through GCSE examinations. Attainment 8 measures the average achievement of pupils in up to 8 qualifications. This includes English language; English literature (double weighted providing both English language and English literature are taken); maths (double weighted); three further qualifications that count in the English Baccalaureate (EBacc); and three further qualifications that can be GCSE qualifications (including EBacc subjects) or any other non-GCSE qualifications on the DfE approved list¹⁴.

Average Attainment 8 scores for children with an EHCP, children receiving SEN support, and for children with no identified SEND are shown in Figure 26. In Norfolk the average score for children with an EHCP is 16.4, for those with SEN Support it's 34.7, and for pupils with no identified SEND it's 49.1.

Figure 26: Average Attainment 8 scores



Data from Key stage 4 attainment publication (2024/25)

The average scores for pupils with no identified SEND are slightly below comparator averages, but the difference is small.

For pupils with SEN Support, average scores for Norfolk have increased notably and are above geographical comparators, but again the difference is small.

For pupils with an EHCP, average scores for Norfolk are above comparator groups, suggesting that comparatively good performance for this group in prior key stages translates into relatively good attainment in GCSEs.

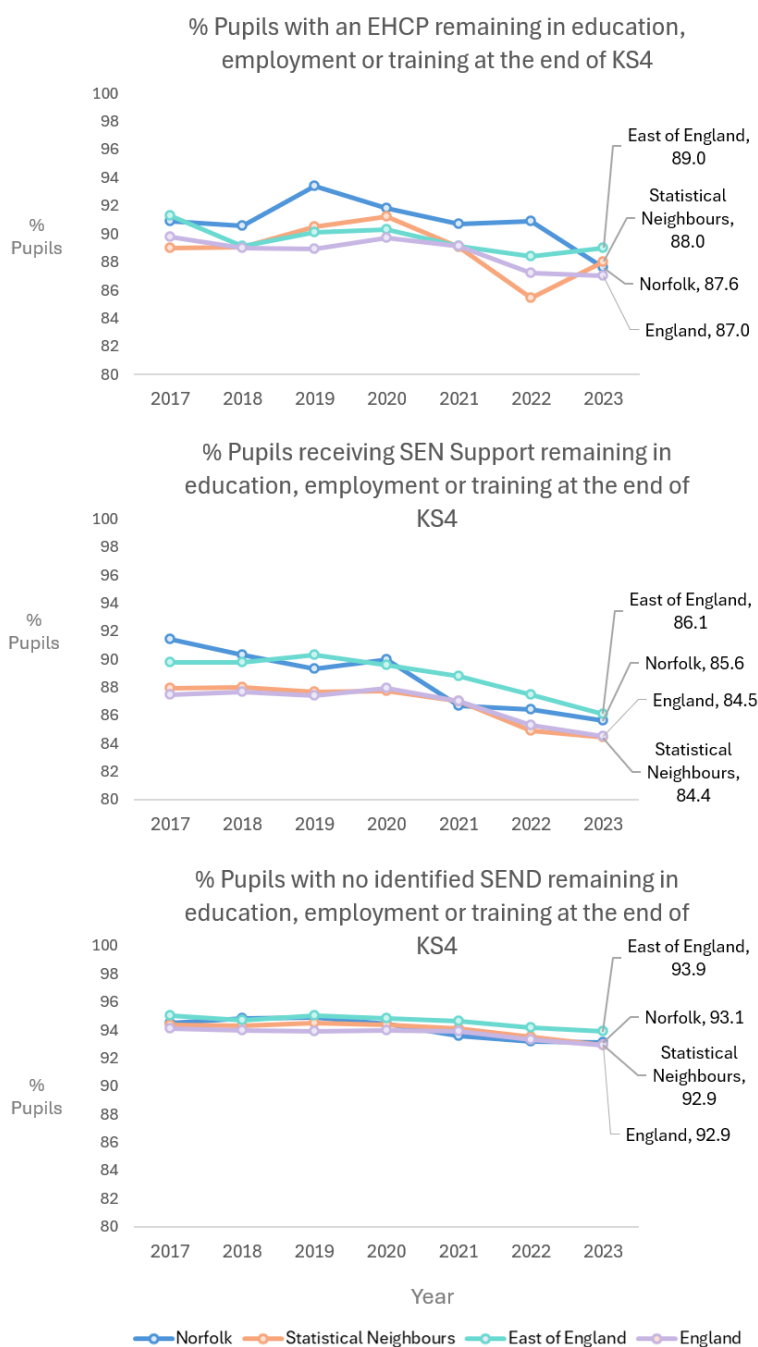
For all cohorts, Norfolk's scores increased in 2025.

Young people with SEND remaining in education, training and/or employment after Key Stage 4

A sustained education, apprenticeship or employment destination after Key Stage 4 means that a pupil stays in that destination for at least two terms. Because of the requirement to track these outcomes, data for measures around young people remaining in education tend to be released later, and the most recent data for this measure at the time of publication is 2023.

The percentage of young people going to, or remaining in, education, employment and training (including special schools) for those with an EHCP, SEN Support, and 'no identified SEND' cohorts are shown in Figure 27 (note – the data has changed since previous publications due to changes in national methodology for calculating destinations).

Figure 27: Percentage of pupils remaining in education, employment or training at the end of Key Stage 4



Data from Key stage 4 Destination Measures (2022/23)

The percentage of young people with an EHCP remaining in education, employment and/or training in Norfolk stayed above comparator averages for several years but dipped slightly in 2023. The current rate of 87.6% means that the rate of the EHCP cohort in education, employment and/or training is similar to geographical comparators.

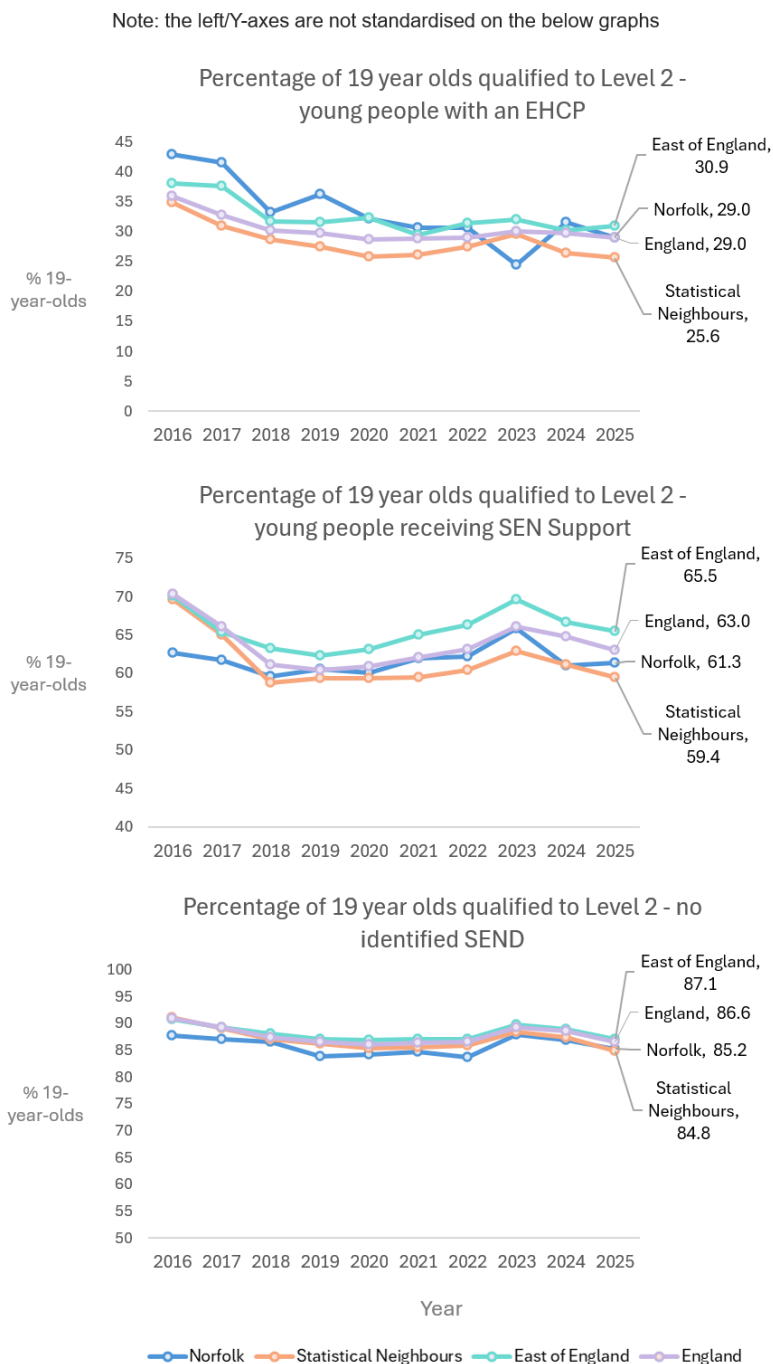
For young people receiving SEN Support in Norfolk, the percentage remaining in employment, education and/or training is below both the EHCP and 'no identified SEND' cohorts at 85.6%. This is similar to the England and Statistical Neighbour averages.

Similarly, the rate of young people with no identified SEND remaining in education, employment and/or training in Norfolk (93.2%) is similar to Statistical Neighbour and England averages (both 92.9%), and the East of England average (93.9%).

Qualifications of 19-year-olds with SEND

The qualification levels of 19-year-olds are measured to understand the overall skill-level achieved by young people at the end of the compulsory education age. Attainment of Level 2 equates to achievement of 5 or more GCSEs (grade 9-4 or equivalent) or a Level 2 vocational qualification of equivalent size. Results are shown Figure 28.

Figure 28: Percentage of 19-year-olds qualified to Level 2



Data from Level 2 and 3 attainment age 16-25 publication (2024/25)

Norfolk's rate of young people with an EHCP qualified to Level 2 at 19 years of age (29.0%) is above the statistical neighbour average (25.6%), the same as the England average, and below the East of England average (30.9%). However, this is within the context of notable year-on-year variation which saw Norfolk's rate dip below comparators in 2023.

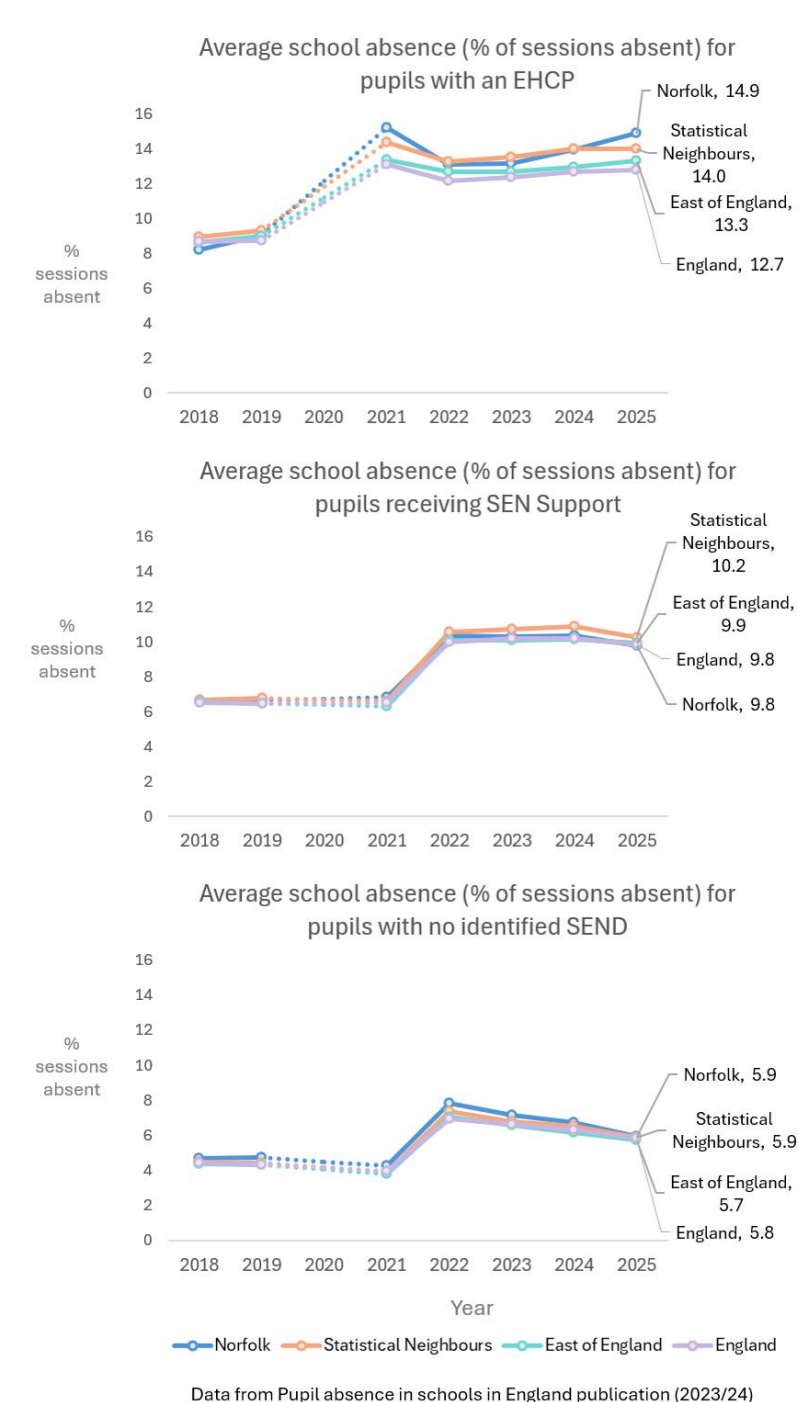
Norfolk's rate for 19-year-olds receiving SEN Support is in line with the Statistical Neighbour average and below England and East of England averages.

For 19-year-olds with no identified special educational need, Norfolk's rate of Level 2 qualifications has been consistently slightly below comparator averages over time, although for 2025 Norfolk's rate of 85.2% is slightly above the Statistical Neighbour average (84.8%).

School absence for children and young people with SEND

Headline absence results references data from all age groups, settings and absence types (e.g. authorised, unauthorised) to determine the percentage of school sessions missed by pupils within the academic year. Results are shown in Figure 29.

Figure 29: Average school absence



The absence rate for pupils with an EHCP is higher than that for pupils receiving SEN Support, which in turn is above that for pupils with no identified SEND. This suggests that as special educational needs and disabilities become more complex, pupils are more likely to have episodes of absence. Rates for children with no identified SEND have also reduced year-on-year since 2022, whereas rates for children with SEN Support have remained somewhat stable, and rates for children with an EHCP have generally risen locally, regionally and nationally.

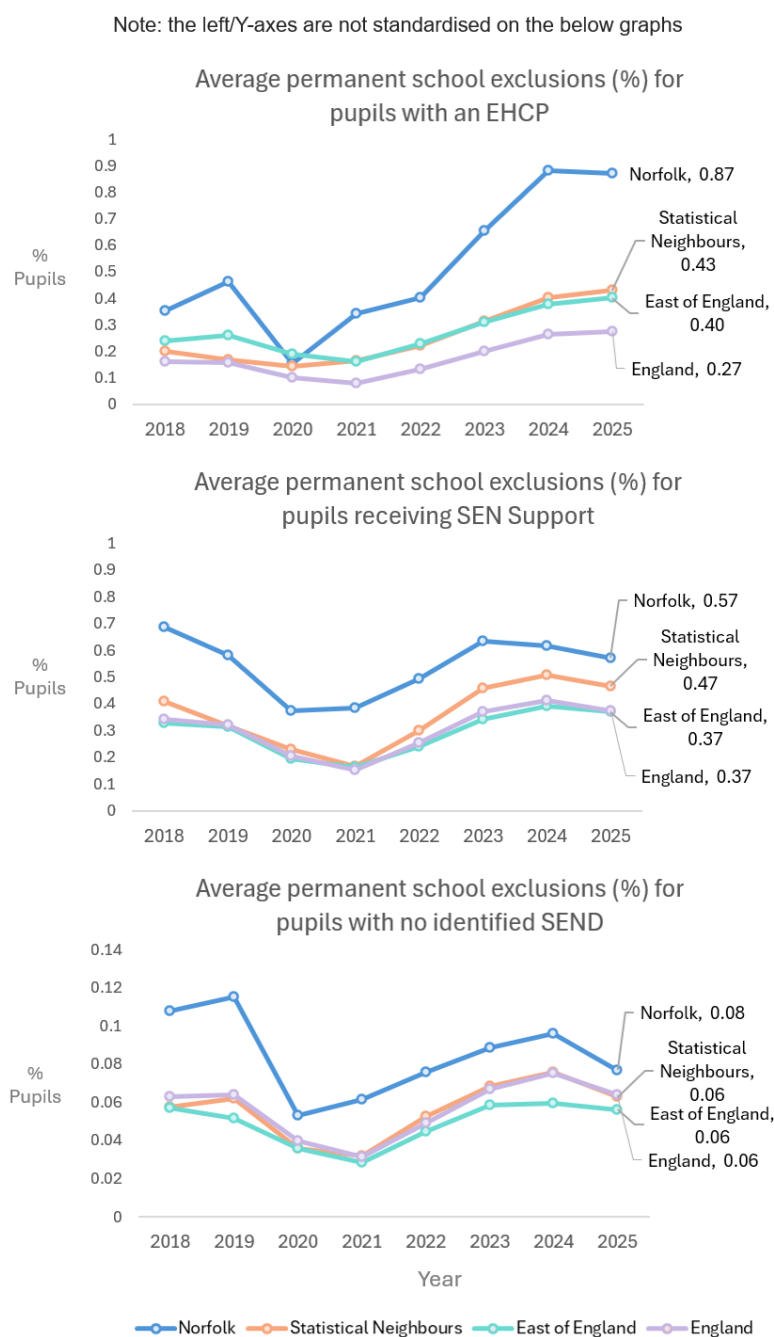
Norfolk's absence rate for children and young people with an EHCP above geographical comparators, although the difference between Norfolk's rate and the Statistical Neighbour average over time is minimal.

Norfolk's absence rates for children with SEN Support, and for pupils with no identified SEND, are similar to the geographic comparators.

School exclusions for children and young people with SEND

Permanent exclusions refer to pupils who are excluded from a school and are not expected to return. The percentage of permanent exclusions presents the number of permanent exclusions recorded in a time period as a percentage of registered pupils on a school roll. Figure 30 shows the percentage of pupils permanently excluded from school for those with an EHCP, receiving SEN Support, and with no identified SEND.

Figure 30: Average permanent school exclusions



Data from Suspensions and permanent exclusions in England (2023/24)

Norfolk's rate for those with SEN Support, and with no identified SEND, have consistently been slightly above those of comparator groups. For both measures, rates dipped during the pandemic, rose between 2021 and 2024, and have dipped slightly for 2025.

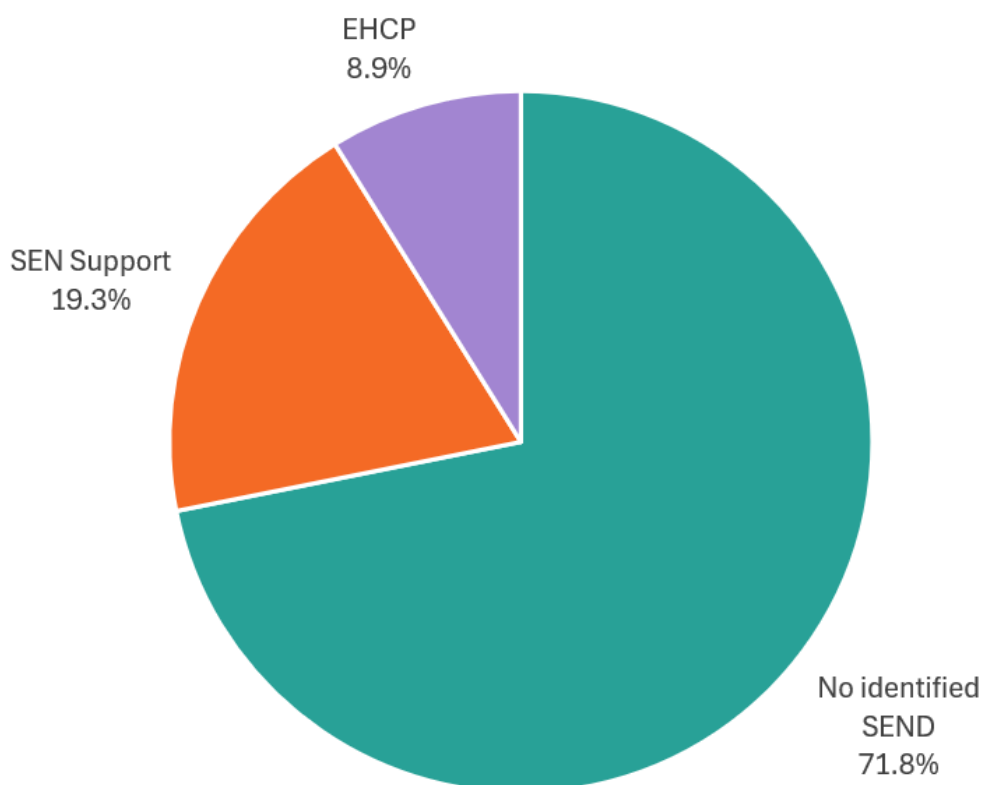
Norfolk's rates of permanent exclusions for those with EHCPs are notably different to those elsewhere. Whereas for comparator groups the average rate of exclusions for those with EHCPs is slightly below that for SEN support, and have risen steadily since the pandemic, Norfolk's is above that for those with SEN Support and has risen steeply particularly in 2023 and 2024. There is no clear explanation for this within the data.

Outcomes for children and young people with SEND who are not in school

Children on the 'Children Missing Education' register with SEND

Children who are of school age who are not registered at a school and who are not receiving suitable education are statutorily referred to as 'children missing education' and are recorded termly on local authorities' Children Missing Education' (CME) register. The CME register does not include children who are Electively Home Educated (EHE). The Government recognises that "Children missing education are at significant risk of underachieving, being victims of harm, exploitation or radicalisation, and becoming NEET (not in education, employment or training) later in life"¹⁵.

Figure 31: The percentage of children on the Children Missing Education register with an identified special educational need and/or disability (SEND)



Data from Summer Term 2025/26 Norfolk County Council CME Submission

Comparator data is not available about the proportion of children who are CME who have SEND. The 'snapshot' taken in Autumn Term 2025/26 shows that around 0.5% of the school-age population in Norfolk are CME – a similar proportion to the England average (0.4%), and slightly above that for the East of England (0.4%).

A detailed breakdown of the CME register from Summer Term 2025 shows that around 8.9% of CME have an EHCP, with around 19.3% receiving SEN Support (see Figure 31). The rate of CME with an EHCP is slightly higher than the average for all pupils (7.4%). The rate of CME with SEN Support is also slightly above the average for all pupils (15.4%).

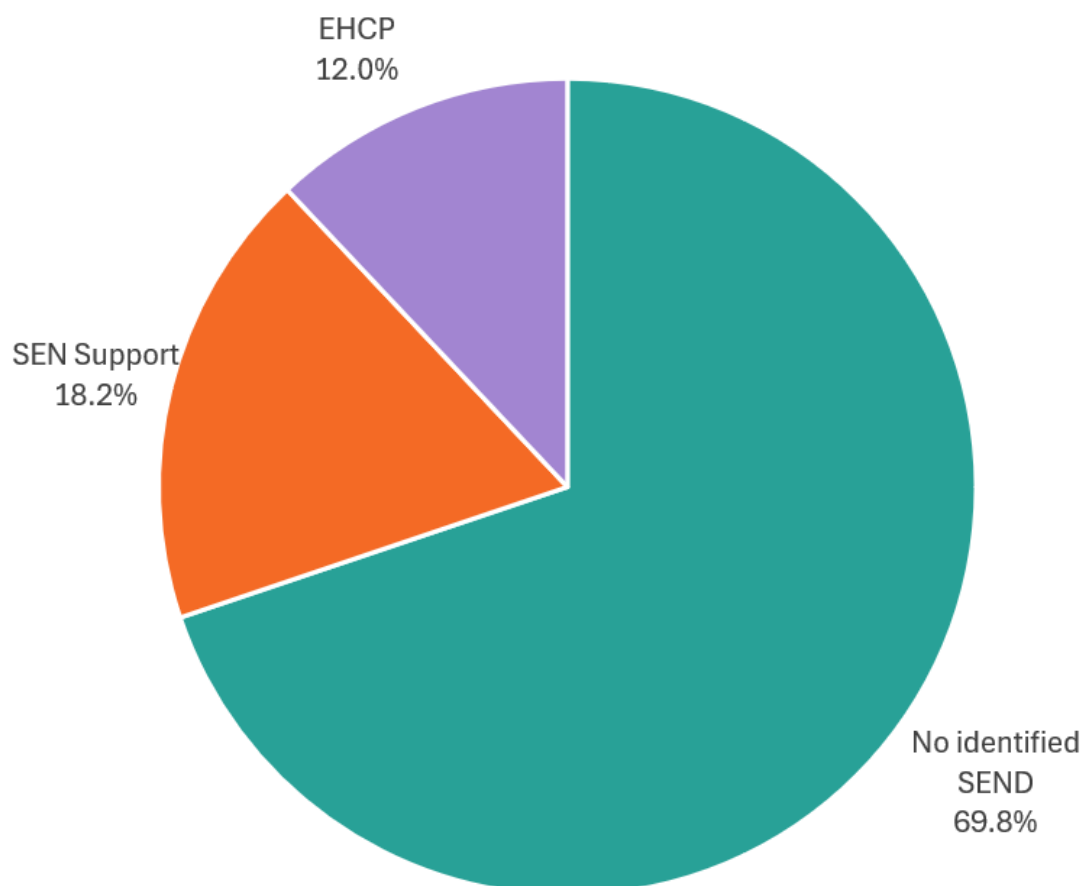
An analysis of local data about CME referral reasons from 2025 suggests that the proportion of CME with and without SEND are similar for most referral reasons. However, a notably larger proportion of referrals for children with SEND were because of a permanent exclusion (around 21% of referrals for children with SEND, compared to around 8% for those with no recorded SEND). This may corroborate the findings in the previous section around attendance and exclusions, that shows that children with SEND are more likely to be subject to an exclusion.

Children on the ‘Elective Home Education’ register with SEND

Children who are electively home educated (EHE) are those whose parents decide to provide education to their children at home instead of sending them to school full-time. As with CME, EHE data is collected by local authorities termly¹⁶.

Comparator data is not available about the proportion of children who are EHE who have SEND. The ‘snapshot’ taken in Autumn Term 2025/26 shows that around 2.1% of the school-age population in Norfolk are EHE – slightly above both the England average (1.5%), and East of England average (1.6%).

Figure 32: The percentage of children on the Elective Home Education register with an identified special educational need and/or disability (SEND)



Data from Summer Term 2025/26 Norfolk County Council EHE Submission

A detailed breakdown of the most recent (Summer Term 2024/25) EHE register shows that 12.0% have an EHCP, with 18.2% receiving SEN Support (see Figure 32). This rate of EHE children with an EHCP is higher than the average for all pupils (7.4%). The rate of EHE children with SEN Support is also slightly above the average for all pupils (15.4%). This suggests that children and young people with SEN may be slightly over-represented in the EHE cohort.

An analysis of local data about the reasons a child is EHE undertaken in 2025 suggests that the proportion of children with and without SEND are similar for most EHE reasons. Where there are

differences between SEND and 'no SEND' cohorts, the numbers of children with recorded reasons are usually so small that it is not possible to be confident that the differences are significant. Within this context, there is some suggestion that children with SEND might be more likely to be EHE because of dissatisfaction with their school, or because of the risk of school exclusion.

Safeguarding outcomes for children and young people with SEND

Children and young people with SEND in statutory safeguarding pathways

Research suggests that children and young people with SEND are more likely than those without a recognised SEND to be in formal safeguarding pathways¹⁷.

Limited benchmarking data is available to evidence this, with only the % of Looked After Children with an EHCP or with SEN Support available from statutory data collections. However, data has recently become available for Norfolk which collates details from both Education and Social Care systems about children with SEND.

A snapshot of data taken in 2026 from Norfolk County Council's systems show that:

- Children and young people with an EHCP are much more likely to be Looked After. Around 2.2% of the EHCP cohort are looked after, compared to around 0.6% of the 0-17 population in Norfolk overall. This suggests that children and young people with an EHCP are over three times more likely to be looked after than the population overall.
- Children and young people with an EHCP are more likely to be subject to a Child Protection Plan (CPP). Around 0.8% of the EHCP cohort are subject to a CPP, compared to around 0.3% of the 0-17 population overall – suggesting those with an EHCP are over twice as likely to have a CPP than the population overall.

The available data about the percentage of Looked After Children who have an EHCP, and who receive SEN Support, is presented in Figure 33 and Figure 34.

Figure 33: Percentage of Looked After Children with an EHCP

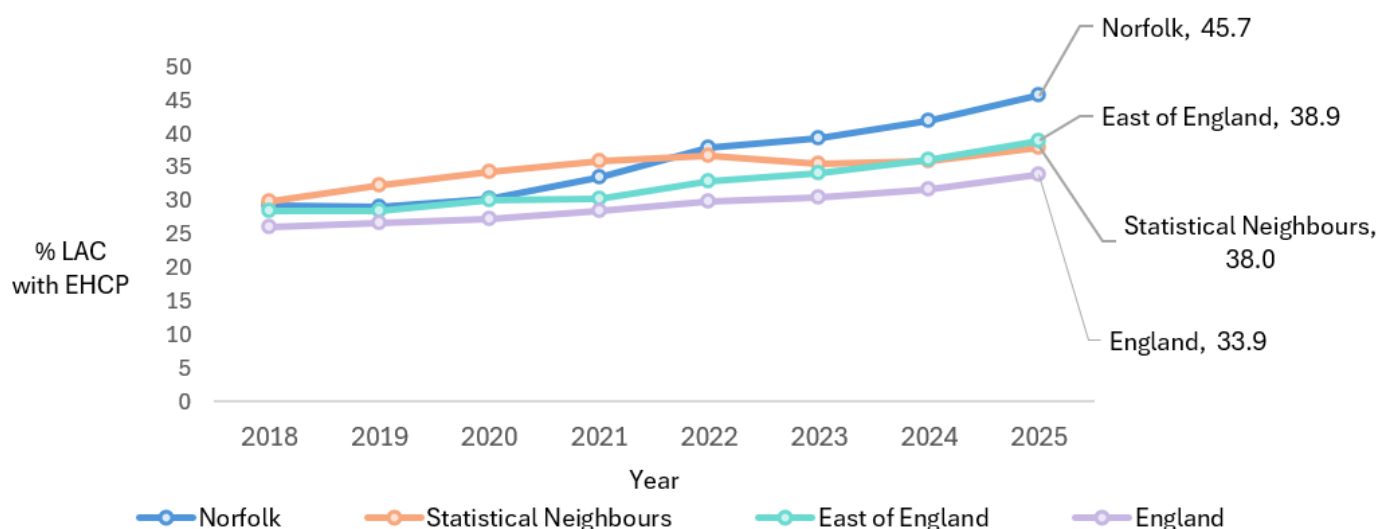
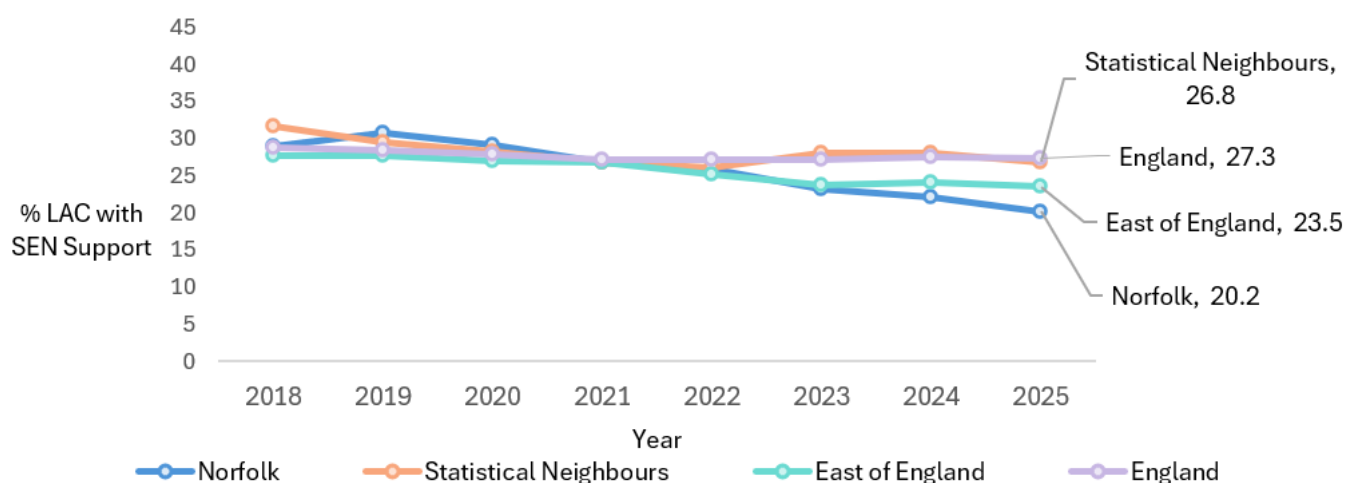


Figure 34: Percentage of Looked After Children receiving SEN Support



Data from Outcomes for Children in need, including children looked after by local authorities in England, 2025

In 2025 45.7% of Looked After Children in Norfolk had an EHCP, a higher rate than all comparator groups, and over 10 percentage points above the England average. This contrasts with the percentage of Looked After Children receiving SEN Support, with Norfolk's rate of 20.2% lower than the comparator geographies. The data on its own does not explain these contrasting patterns, though it suggests a greater proportion of LAC with SEND are receiving the more intensive support expected through an EHCP in Norfolk.

Children and young people with SEND being supported by Youth Justice services

Children and young people with SEND are also over-represented in the cohort being supported by Youth Justice Services (YJS). National and comparator data is not available in this area, but analysis of 'joined up' data between Youth Justice and Education systems taken as a snapshot in August 2026 showed that:

- 42% of the children and young people being supported by Norfolk's YJS had an EHCP.
- Of those with an EHCP, over 80% had an EHCP with a primary support need of 'Social, Emotional and Mental Health'.
- 18% of the children and young people being supported by Norfolk's YJS had received SEN Support.

This suggests that many of the children and young people being supported by the Youth Justice Service have complex social, emotional and mental health needs – but also infers that children experiencing complex safeguarding risks alongside social, emotional and mental health needs may have a higher risk of entering the youth justice system.

Data about key processes and stages for children and young people with SEND and their families

Reviewing key processes in children and young people's SEND journey

Whilst this document focuses primarily on needs, there are a number of statutorily defined processes that are important to the outcomes of children and young people with SEND. This section reviews these processes in turn.

Initial requests for an EHCP

Parents of, and professionals working with, a child can request an Education, Health and Care needs assessment when they feel the child may need extra support.

Between April 2024 and March 2025, 62.4% of requests for an assessment originated from schools, with 36.6% coming from parents, and 1.0% coming from other professionals, children and young people themselves, or other sources. Within this context, some Primary Support Reasons (PSR) are more likely than average to come from particular referral routes. As shown in Table 2, Initial Requests with a PSR of Speech, Language and Communication or Moderate Learning Difficulty are more likely to originate from schools. Parents are more likely than for other PSRs to request an assessment for Physical Disability.

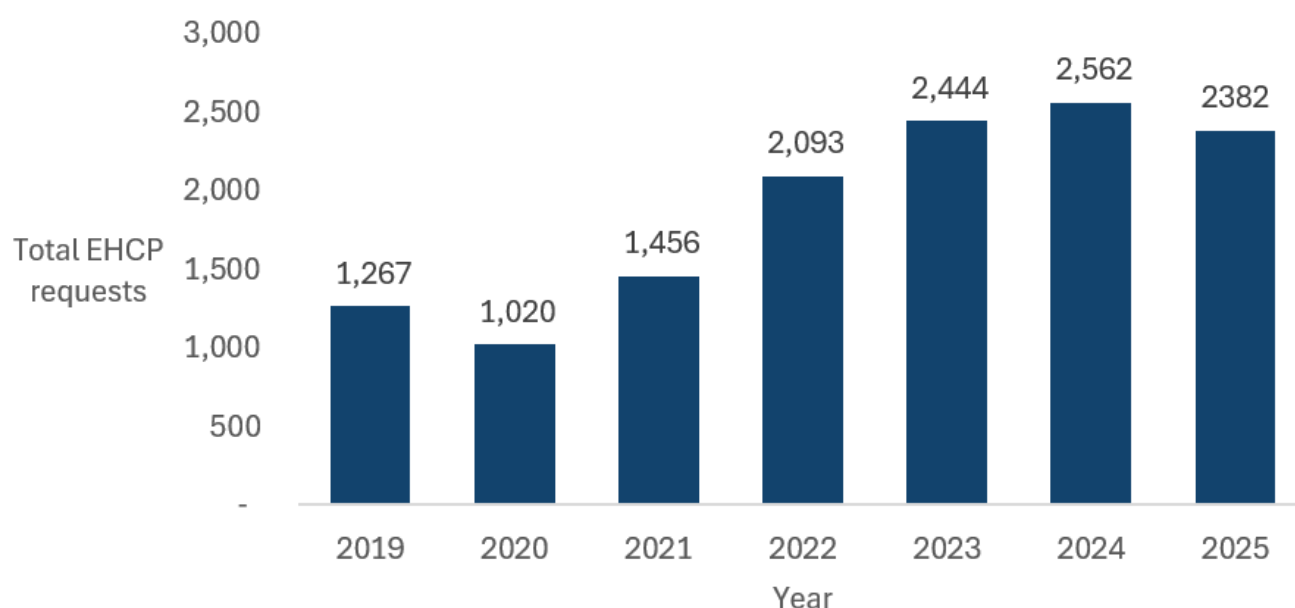
Note that the table only separates out the most common PSRs (with remaining requests recorded under 'other primary support reason'); and 'Other' referrer is used to describe those requests made by other professionals, the young person themselves, or someone else. In both cases these classifications are aggregated (because of small numbers in individual categories to ensure comparisons are reliable and data potentially identifying individuals is not reported).

Table 2: The percentage of Initial Requests coming from schools, parents and other sources, broken down by Primary Support Reason

(Requests made from 1 April 2025 – 31 March 2026. Table is sorted by the percentage of requests from school, with the highest at the top. 'All Primary Support Reason' is the total breakdown for all requests, included as a comparator. 'Total requests' is included for scale)

	School	Parent	Other	Total requests
Speech, language and communication	74.4%	24.8%	0.8%	660
Moderate Learning Difficulty	72.9%	26.5%	0.6%	170
Specific Learning Disability	67.0%	32.2%	0.9%	115
All primary support reasons	62.4%	36.6%	1.0%	2435
Social, emotional and mental health	58.8%	40.2%	1.0%	789
Autistic Spectrum Disorder	55.2%	43.8%	1.0%	496
Physical disability	50.7%	49.3%	0.0%	67
Other primary support reason (including no PSR recorded)	40.6%	56.5%	2.9%	138

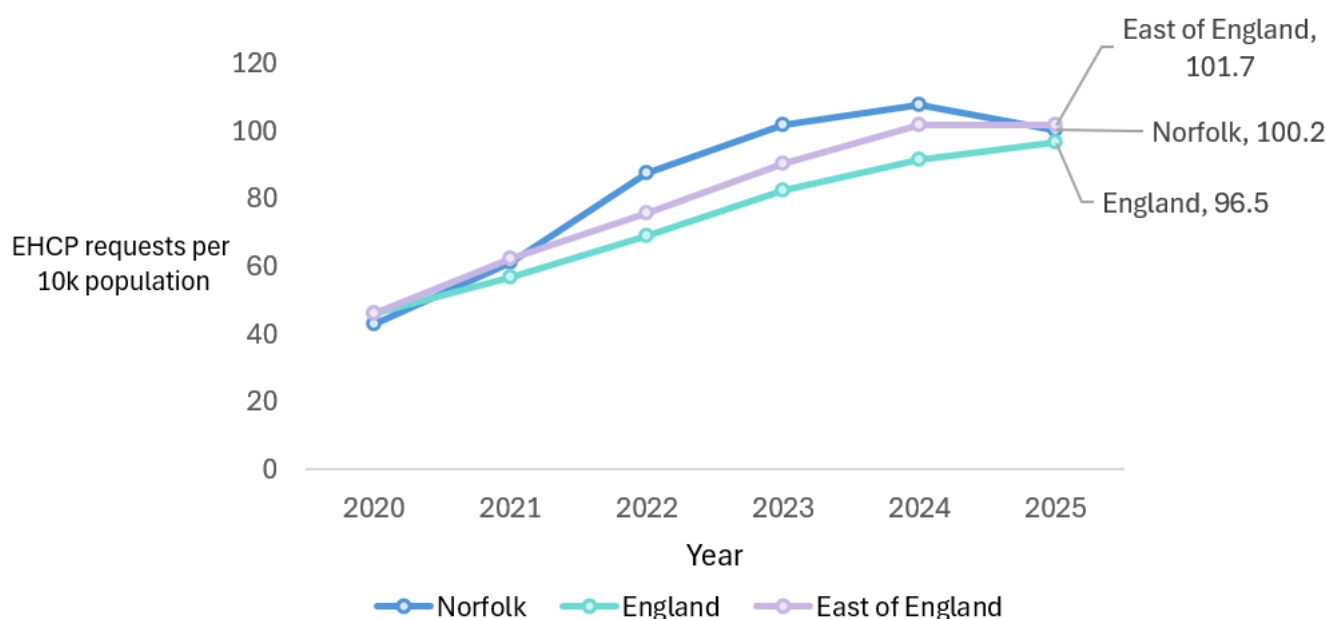
Figure 35: Total EHCP requests in year in Norfolk



Data about initial requests can be helpful in identifying changing needs, as it measures ‘new’ cases, and as such can provide an earlier view of new trends than by reviewing total numbers of current EHCPs (which will include plans that started several years previously). It also provides helpful details that help understand the nature of children’s needs, including the age at which children are referred.

National data from the Education, Health and Care Plans annual statistical release, is available from 2019. Norfolk’s request numbers are presented in Figure 35 showing a dip around the Covid pandemic, a steep increase in 2021 and 2022, then a slightly less steep increase in 2023 and 2024, and finally a slight reduction in 2025.

Figure 36: Total EHCP requests in year per 10,000 population aged 0-25

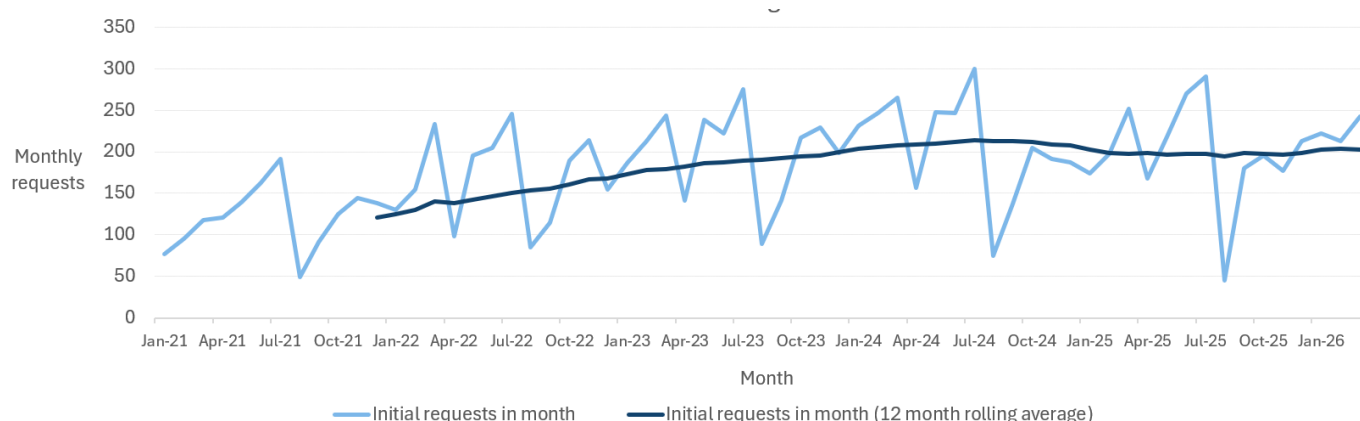


This trend is then shown as a rate per 10,000 population, with regional and national comparators, in Figure 36. Norfolk’s rates are higher than the England and East of England between 2022 and

2024, but with a reduction in 2025 that means Norfolk's rates are similar to the East of England average.

More up to date data is available from local, monthly reports, shown in Figure 37. This shows both significant month-on-month variation, but also (through the use of a 12-month rolling average) the slowing increase through 2024, then a slight reduction in the first months of 2025, and somewhat stable monthly numbers since. Given the inherent variation within this data set, no firm conclusions can be made from this slight reduction in recent periods. However, it seems likely that numbers of requests have stopped increasing and may have either stabilised or begun to reduce. Further data is required to assess whether this reduction is sustained.

Figure 37: Monthly initial EHCP requests for assessment in Norfolk: monthly total and rolling 12-month average

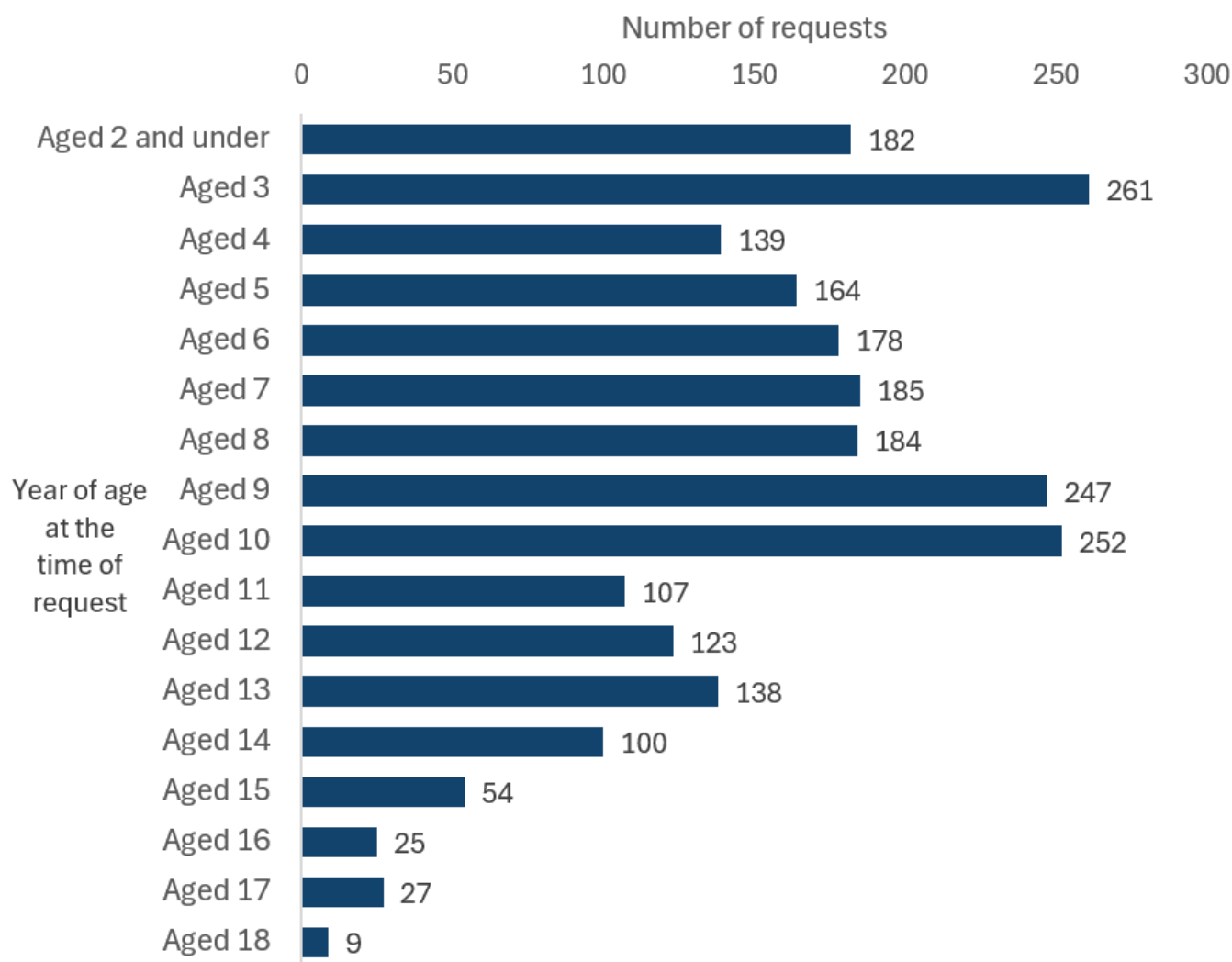


Requests are made for children and young people of different ages, and requests can be made at any time before a young person's 25th birthday.

Figure 38 shows the number of requests made in 2024 by the age of the child or young person at the date of the request. Categories 'Aged 19' and 'Aged 20+' are omitted because they present values of fewer than 7 children and young people, so are suppressed for data protection reasons.

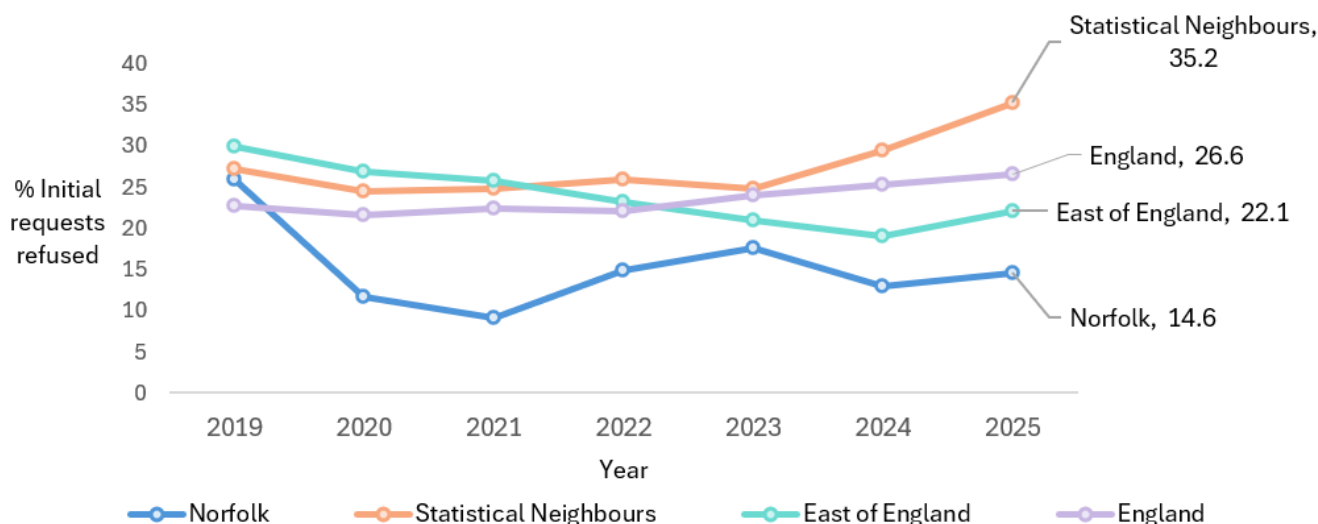
The graph shows two notable 'peaks' in the age of requests, with one at age 3, and another at age 10. The data on its own does not explain these peaks, although they coincide with the 'school year' (or equivalent) for most children before they move to either primary school or secondary school. This suggests that EHCPs may be requested ahead of moves to a new school, perhaps to ensure that the right support is in place.

Figure 38: The number of requests for EHCP assessments in 2025 in Norfolk, by age at time of request



Requests for an EHCP Assessment can be refused by the council if it determines that an assessment is not necessary. In 2025, 14.6% of requests in Norfolk were refused, below England, East of England and Statistical Neighbour averages. Norfolk's rate has been below comparator rates since 2020, and has notably differed from the statistical neighbour average, which has risen in 2024 and 2025 (see Figure 39).

Figure 39: Percentage of initial requests for an EHCP refused each year

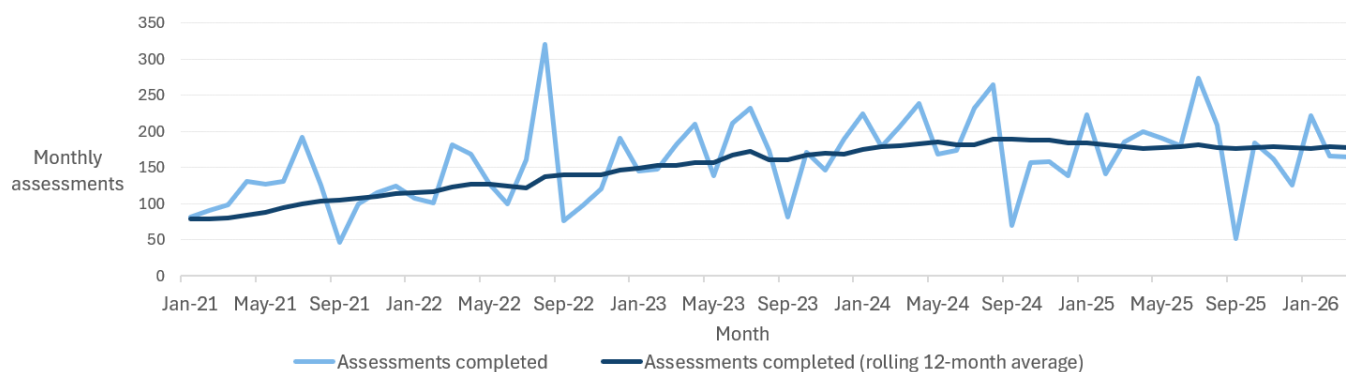


Local data from Norfolk's systems and processes suggests that in 2023 and 2024 around 30% of those requests that were refused then re-enter the system with a further request for a plan.

Needs assessments

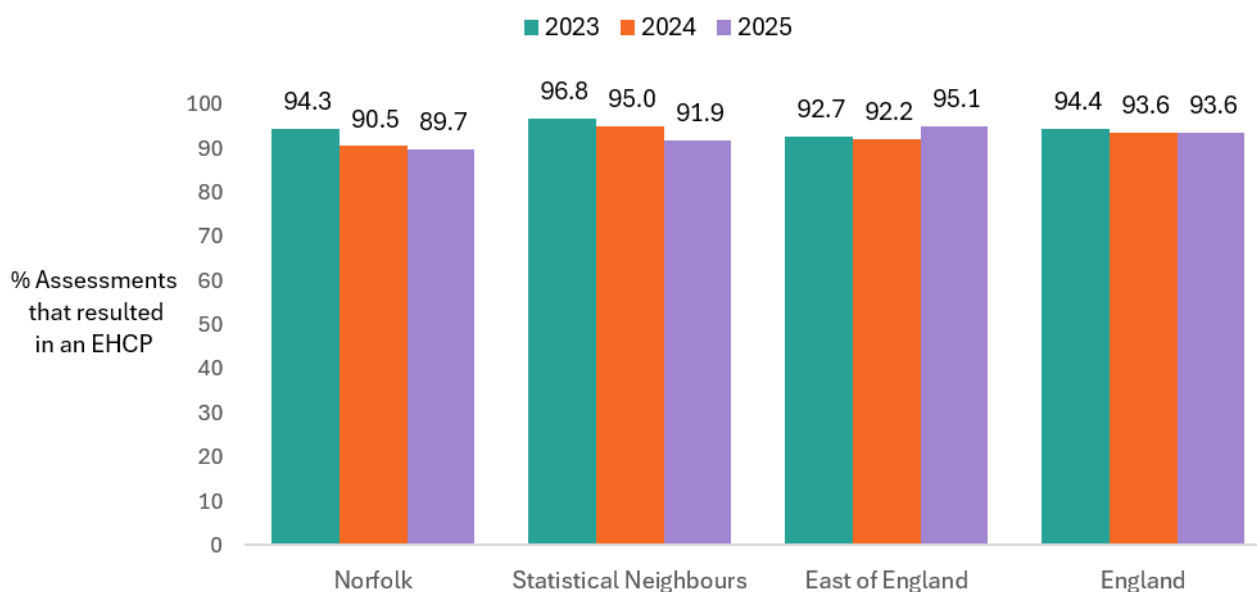
On average, between April 2025 and March 2026, 177 assessments were completed each month. Actual monthly assessments, with a 12-month rolling average, are presented in Figure 40. This shows that, within the context of notable month-on-month variations, numbers of assessments climbed steadily from 2020 through until mid-2024 but have stabilised since.

Figure 40: Monthly EHCP assessments in Norfolk: monthly total and rolling 12-month average



Most assessments go onto a plan. Figure 41 shows the percentage of assessments that result in an EHCP for the three years 2023-25, for Norfolk, England, the East of England, and Norfolk's Statistical Neighbours. This suggests that for 2025, Norfolk's rate of assessments resulting in a plan was below comparators, within the context of slight reductions each year.

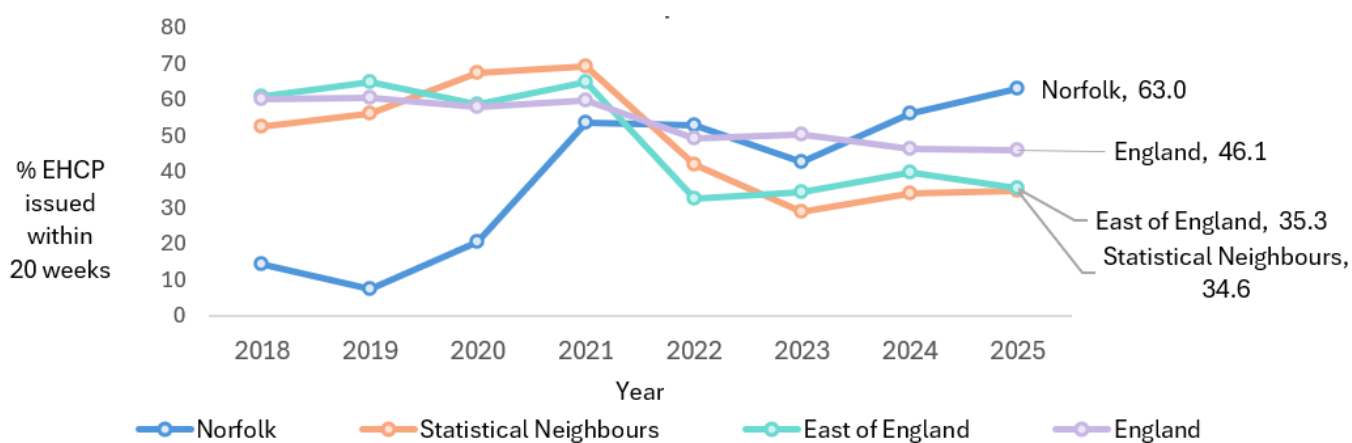
Figure 41: Percentage of assessments that result in an EHCP over time



Issuing of EHCPs

Where a request leads to an issuing of an EHCP, the EHCP should be issued within 20 weeks from the date of the request. There are a limited number of exceptions to this time limit, including when the child or young person is absent from the area for a period of time, when there are exceptional personal circumstances affecting the child, or if the relevant education institution is closed for at least four weeks.

Figure 42: Percentage of EHCPs issued within 20 weeks excluding exceptions



Data from Education, Health and Care Plans, 2026 and local systems

Figure 42 shows the percentage of EHCPs issued within 20 weeks, excluding those with exceptions (note: the 2025 figure for Norfolk is from local systems). This shows, following historically low performance prior to 2021, Norfolk's performance was in-line with comparators up to 2024 when Norfolk's performance exceeded comparator averages, where it remains. The picture is similar for data about EHCPs issued within 20 weeks including exceptions, albeit with

each data point being slightly below that for the ‘excluding exceptions’ (for example Norfolk’s most recent ‘including exceptions’ is 63.0% compared to 59.0% for ‘excluding exceptions’.

Based on local data for the 2025 calendar year, on average each month there are around 407 EHCPs in the process of being written, with around 178 issued each month. The amount of ‘in progress’ and issued plans varies within each year with peaks and troughs (for example in 2025 the actual monthly rate of issued plans varied between 131 and 204).

Reviews of EHCPs

Children with an EHCP should receive an annual review. Coordinated by the relevant school, and involving the child, parents/carers and relevant professionals, the review should focus on the child’s progress towards the outcomes outlined in the EHCP and determine if those outcomes remain relevant or need to be updated.

A new data return was established in 2024 to capture the percentage of expected reviews that were recorded. As the Department for Education acknowledges, the data for this is subject to likely error due to its newness. Results for 2024 suggest that Norfolk recorded 93.2% of expected reviews, above the England (73.6%), East of England (76.5%) and Statistical Neighbour (78.2%) averages.

Local data from Norfolk County Council’s systems shows that between 1 April 2025 and 31 March 2026, around 9,800 children received around 10,500 reviews (the number of reviews exceeds the number of children because some children received more than one review). Of those children reviewed, around 31% of reviews decided to change the EHCP, around 61% decided to maintain the EHCP, and around 8% decided to cease the EHCP.

EHCP Ceases

EHCPs can cease for a number of reasons, including when the child becomes too old, leaves education, or when education, health or care needs can be met without a plan.

In 2025, data from the Education, Health and Care Plans publication shows that in Norfolk 612 EHCPs ceased during the calendar year, a slight decrease from 665 in 2024.

Table 3: The percentage of ceased EHCPs broken down by cease reason in 2025

Cease reason	% Ceases 2025
Transferred to another LA	29.8%
Young person no longer wishes to engage in education	29.5%
Moved on to paid employment, excluding apprenticeships	12.1%
Ongoing educational or training needs being met without an EHC plan	9.5%
Moved on to higher education	9.5%
Reached maximum age	9.3%
Other	0.3%

The Table 3 shows the percentage of EHCP ceases in 2025 with different cease reasons. The most frequently cited reason (29.8%) was that the young person ‘transferred to another LA’ (local authority), with the second most cited reason (29.5%) being the ‘young person no longer wishes to engage in education’.

Appeals and tribunals relating to decisions made about children with SEND

Several of the decisions described in the sections above can be appealed, including decisions:

- Not to assess a child,
- Not to issue an EHCP
- To cease an EHCP, or
- About the contents of an EHCP.

National, regional and local data showed a notable increase in the percentage of appealable decisions – those relating to the decisions listed above – that resulted in an appeal between 2017 and 2023. In 2024, the way the data for appeals and tribunals was calculated was changed in published data, and only two years of results are available.

Figure 43: Percentage of appealable decisions that resulted in a tribunal appeal

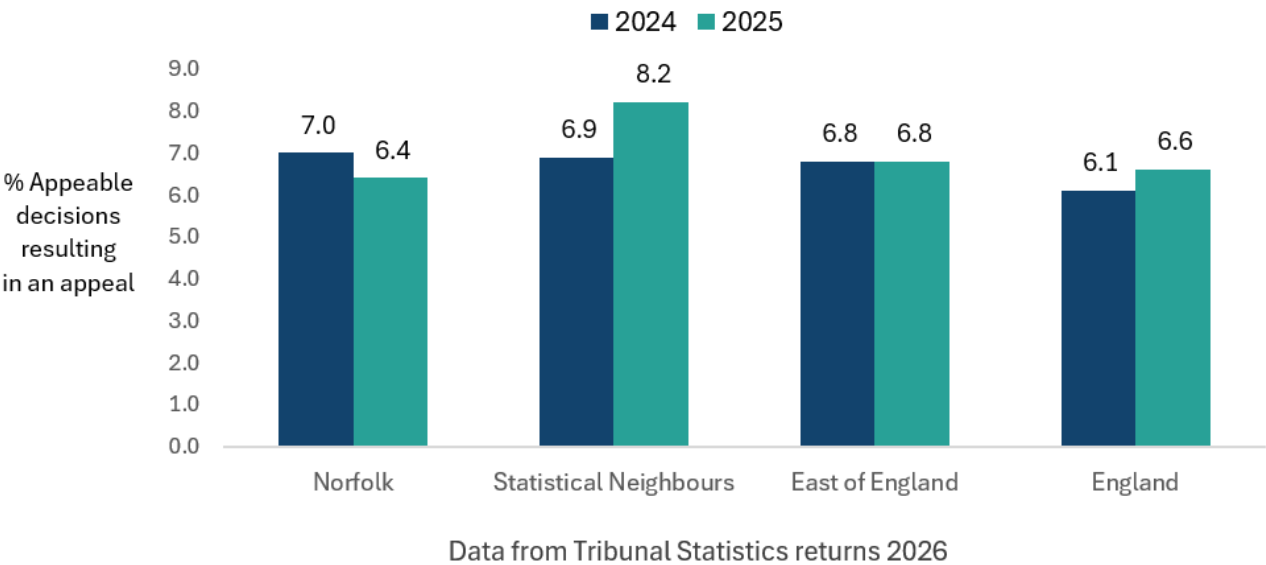


Figure 43 shows this data for 2024 and 2025. Norfolk’s percentage is below England, East of England and statistical neighbour averages, although the differences are small. This is different to trends observed through published data using the previous methodology which showed Norfolk slightly above comparators between 2021 and 2023. However, given the changes in methodology, it is difficult to confidently conclude that Norfolk’s trajectory has changed, and more years’ data is required to understand changes over time.

Experiences of children and young people with SEND, their families, and those working to support them

The views and experiences of children and young people, their families, and those working with them are regularly captured through surveys and qualitative data gathering.

Every two years, a SEND Survey takes place – separately capturing the views and experiences of children and young people, parents and carers, and professionals working with children and young people with SEND.

In 2024, the Flourish Survey took place. Commissioned by Public Health alongside the Children and Young People Strategic Alliance (CYP SA) this captured views and experiences of children within the context of eight domains that consultation showed were important to them and that form the framework for the Flourish Strategy (see diagram – right). The 2024 survey follows similar surveys in 2015 and 2017, with plans to repeat the survey in future years to allow progress to be tracked in key areas. Whilst the Flourish Survey is not specifically aimed at children with SEND, it allows views, experiences and outcomes to be compared for those who state they have SEND and those who do not.

Flourish Strategy Domains



In addition to the overall Flourish Survey, a Special Schools Flourish Survey was completed by children in special schools. This survey prompted far fewer responses, with 174 responses in total. As such, the Flourish Special School Survey is not regarded as particularly representative of all special school pupils, however there are some notable findings.

This section reviews the findings of the Flourish Surveys, and the 2025 SEND Surveys, in turn.

Experiences of children and young people with SEND in mainstream schools: findings from the Flourish Survey 2024

9,437 children completed the Flourish Survey in Spring 2024, with 2,519 from primary schools and 6,827 (with 1 where school year was not recorded). In broad terms, the characteristics of the respondents were similar to the overall school population in Norfolk in terms of gender and ethnicity. In terms of age, there was some variation in the number of respondents from each school year group, with Years 7, 8 and 9 contributing the highest number of responses.

22.3% of all respondents stated that they have a special educational need or disability. In Norfolk, 21.1% of pupils have either an EHCP or receive SEN Support. Whilst these two figures are not directly comparable, this suggests that the proportion of respondents to the Flourish Survey who report having SEND is similar to that in schools overall.

The main survey asked over 80 questions about different aspects of children's lives and took around an hour to complete.

The over-arching findings from the Flourish Survey – considering both pupils with and without SEND – are covered in detail in a separate report and a series of briefings on Norfolk's Joint Strategic Needs Assessment website, as part of Norfolk Insight¹⁸. Some strong or repeating themes include:

- Improving feelings of inclusivity and involvement in school, and a sense that achievements are recognised.
- Increasing online safety risks.
- Increased vaping prevalence.
- An overall sense that the proportion of pupils with poor mental health has increased – with changes between 2017 and 2024 in line with those seen in national surveys.
- Evidence of the complexity of circumstances facing children with challenging outcomes. For example, children who state they are young carers, who are eligible for free school meals, or who state they have SEND, are more likely to report poor outcomes in a range of other areas.

Overall, the survey analysis concludes that, whilst most responses suggest that children and young people experience good outcomes in most thematic areas most of the time, the often-small proportion of respondents which report poor or very poor outcomes has grown since 2017.

The survey also enables a more detailed analysis of responses comparing those who state they have SEND with those who do not. In reviewing these differences, it is important to acknowledge some of the particular features of the Flourish Survey, in particular:

- For the main survey, respondents are in mainstream schools (with other data showing that only around 1-in-5 new EHCPs are for pupils in mainstream schools) so may not capture the views of pupils with the most complex needs.
- All responses are self-reported – with both SEND status and question responses reflecting the respondent's interpretation of the survey's wording, rather than a definitive or officially diagnosed picture.
- There may be complex relationships between respondents' SEND status and their responses for some questions that require careful consideration. For example, children with SEND are more likely to experience a recognised mental health condition and so might on average be more likely to report low mental wellbeing. In reviewing this we should recognise this rather than, for example, inferring from those results conclusions about the drivers of mental wellbeing, or the performance of support services.

- In reviewing the differences between SEND and non-SEND responses, we are reporting associations between factors, and do not claim that having SEND is the cause of the observed differences.
- When considering the meaning of the results, this document refers to the likelihood of respondents having specific experiences. Using the previous example, whilst children with SEND are more likely to report low mental wellbeing, having SEND does not mean that every child with SEND has poor mental health. Within this context, there are children with SEND with good mental wellbeing, and children without SEND with low mental wellbeing. Any interpretation of the data must recognise these nuances.

All of this considered, the main areas where there are differences in responses that are statistically significant between those who state they have SEND, and those who state they do not have SEND, are reported below. Results are broken down by the relevant Flourish domain. Some questions were only asked of children in appropriate year groups (for example, questions about drinking or relationships were not asked of very young children). For each statement, the percentage of responses from pupils stating they have SEND are included first, followed by (“compared to”) the percentage of responses for children who do not state they have SEND.

Family & Friends

Children who state they have SEND are:

- More likely to report that they “never” find it easy to make friends (26.6%, compared to 11.8% of respondents without a stated SEND).
- More likely to report that they do not have a trusted adult to turn to when worried or upset (16.0%, compared to 9.1% of respondents without a stated SEND).
- More likely to report that they have been concerned about the drug use of a family member at some point (14.6%, compared to 5.8% of respondents without a stated SEND).

Learning

Children who state they have SEND are:

- More likely to report that they have missed school at some point in the 12 months prior to the survey (34.4%, compared to 10.5% of respondents without a stated SEND).
- More likely to report that they worry quite a lot or a lot about schoolwork problems, exams and tests (51.6%, compared to 37.5% of respondents without a stated SEND).
- More likely to report that they do not feel it’s important to go to school regularly (13.8%, compared to 7.5% of respondents without a stated SEND).

Opportunity

Children who state they have SEND are:

- More likely to report that they have not engaged in any sort of physical activity outside of school in the past four weeks (19.9%, compared to 14.5% of respondents without a stated SEND).

Understood

Children who state they have SEND are:

- More likely to report that they never like to talk about their feelings (49.2%, compared to 39.8% of respondents without a stated SEND).

Resilience

Children who state they have SEND are:

- More likely to report that they have missed school at some point in the 12 months before the survey due to their mental health (34.4%, compared to 10.5% of respondents without a stated SEND).
- More likely to report that they rarely or never dealt with problems well in the two weeks before the survey (45.2%, compared to 27.2% of respondents without a stated SEND).

Individual

Children who state they have SEND are:

- More likely to report being bullied a little or a lot for having a disability or learning difficulty in the 12 months before the survey (25.5% of those with an SEND who report being bullied a little or a lot stated they were bullied because of a disability or learning difficulty, compared to 2.9% of respondents who were bullied a little or a lot without a stated SEND).

Safe and Secure

Children who state they have SEND are:

- More likely to rate their safety at home as “OK”, “poor” or “very poor” (17.6%, compared to 8.8% of respondents without a stated SEND).
- More likely to report being bullied a lot in the 12 months before the survey (18.8%, compared to 6.9% of respondents without a stated SEND).
- More likely to report being asked to look after or carry drugs (6.6%, compared to 2.8% of respondents without a stated SEND).

Healthy

Children who state they have SEND are:

- More likely to report that they drink alcohol at least once a month (17.0%, compared to 11.6% for those without a stated SEND).
- More likely to report that they have smoked at least once (17.8%, compared to 11.3% of respondents without a stated SEND).
- More likely to report that they would like to lose weight (54.1%, compared to 41.9% for respondents without a stated SEND).

This analysis provides a more detailed picture of some of the additional risks and complexities experienced by some children and young people who have SEND. Whilst most children with a stated SEND have good outcomes in most thematic areas, they also are more likely than those without SEND to report specific risks, experiences and issues around their safety, health (including their mental health), learning and family life.

Experiences of children and young people in Special Schools: findings from the Flourish Special Schools Survey 2024

As suggested in the introduction to this section, the small number of respondents to the Flourish Special Schools Survey means that it is not possible to be confident about whether the results are representative of children and young people in special schools overall. In addition, some of the methodological requirements of the Special Schools Survey (for example the use of symbols instead of words, and the use of different question wording) means that the results are not comparable with those from the main survey.

Within this context, notably findings from the survey are presented below, again by Flourish domain:

Family & Friends

- Respondents were most likely to state 'My family' (78.9%) when asked who they would speak to if they were worried. 'My friends', 'My teaching assistant' and 'My teacher' were each cited by 56%-60% of respondents.

Learning

- 7.7% respondents answered "no" to the question 'do you think it's important to go to school?', with 18.5% responding "not sure".

Opportunity

- 8.3% of respondents answered "no", and 21.2% answered "not sure", to whether their school prepares them for when they leave school.
- 70.2% of respondents report 'gaming on a computer/console' outside of school (with 15.5% doing it sometimes), with the next most often cited activities being 'creative things e.g. music, art, craft or drama' (45.2% do this, with 19.0% sometimes), 'sport or other exercise but not at a club' (36.5% do this, with 21.6% doing it sometimes), and 'going to the park' (28.4% do this, with 37.9% doing it sometimes).
- When asked what stops pupils doing the things they want to, the most cited reason (50.3%) is 'I don't know what to do'. A number of other reasons (not having enough time, things costing too much money, activities being too difficult to get to, being shy, and not wanting to do anything) were cited by between 32%-37% of respondents, however the small number of respondents means that it's not possible to be confident about which obstacles were more or less likely to stop children from doing what they want to.

Understood

- Pupils were asked about whether they were asked for their ideas about different things. 18.5% said "no" to being asked for ideas about making things better at school (with 22.0% unsure). 40.5% said "no" to being asked for ideas about making things better in the area where they live (with 31.5% unsure).

Resilient

- Pupils were asked about whether they worried about different things. 'Family problems' was the most commonly cited issue (44.2% responded "yes"), followed by 'Problems with friends' (40.7%). A number of other issues ('schoolwork and tests', 'being ill', 'feeling sad') were cited by between 30%-37% of respondents. However, the small sample size means it is not possible to be confident in determining the things children in special schools worry about most often.

[Note: there were not any notable results directly relevant to the domain 'individual'].

Safe and secure

- 30.4% of respondents said they had been bullied in the year before the survey, with 16.1% not sure.
- Pupils were asked about their safety in different situations. 17.3% said they felt 'not safe' in the park, with 15.4% feeling 'not safe' online. 7.1% felt 'not safe at school, and 3.0% felt 'not safe' at home.

Healthy

- 3.6% of respondents smoke "often", with 9.0% vaping "often".
- 8.4% of respondents reported having an alcoholic drink in the 7 days before the survey.
- Over 56% of respondents eat fruit and vegetables "most days", "every day" or "more than once a day", with nearly 11% reporting "never/hardly ever"
- Just over 50% of respondents reported that they had not been to the dentist in the year before the survey (with just over 11% "not sure").

Experiences of young people with SEND: findings from the SEND Children and Young People's Survey 2025

Norfolk's third SEND Survey opened in January 2025, closing six weeks later.

The 'Children and young people's' (CYP) survey was available in a variety of formats (plain language, Easy-read, 'Widget', group and braille versions), and was promoted through places of learning, teams working with CYP, and in online publications.

538 CYP fully or partially completed the survey in 2025, an increase from 381 when the survey last took place in 2023.

Respondents were asked to answer both structured questions (for example those with 'yes/no' answers, scores, or multiple-choice answers) and 'open-ended' questions that let CYP answer with 'free text' using their own words. In reporting the results, this report reflects on both numeric and free-text data. For numeric data, percentages are based on the number of responses to each question; for free-text responses, the report notes the number of comments provided.

The full SEND Children and Young People's Survey 2025 Report is available online at <https://www.norfolk.gov.uk/article/40969/Norfolk-SEND-survey-2025>.

Summarised highlight results are presented in the main thematic areas below.

Learning

- 83.3% of respondents said that they are happy with the help they get to learn.
- The thing that helped most respondents learn was learning "things that interest me" (around 62% of respondents). Other important factors include a "quiet area" (53%), "people understanding how I learn" (53%), "Simple instructions" (53%), and "Technology" (52%).
- Within free text responses, most comments suggested that the support CYP get is helpful. It also suggests that CYP want more flexibility and choice about the help they receive. The importance of learning aids and specialist resources was also highlighted by some respondents.

Free time

- As reflected in the Flourish survey (both for children who stated they had SEND, and those who did not), gaming was the activity that the highest proportion of respondents said they like (74%). Other activities that prompted similar rates of response include "watching film, television and programmes" (71%), "spending time with families" (69%), "listening to music" (69%) and "spending time with friends" (67%).
- Around 62% of respondents said that they get to do activities with other CYP in their own time, with 24% responding "sometimes".
- The 'top 4' reasons that stop CYP with SEND from doing activities with other CYP are "I like to do activities by myself" (33%), "It's difficult to join in" (30%), "It's difficult to get there" (30%), and "They cost too much money" (25%). These were also the top 4 reasons given by CYP in 2023.
- 31 free text responses provided detail to some of these issues, with nearly a third of these highlighting that the child likes to be alone or are not interested in taking part in activities.
- Other comments described how respondents find it difficult to mix in groups, and how their disabilities and anxieties make it harder for them to participate in activities.

Choices

- 77.6% of respondents answered “Yes” or “Sometimes” to the question “Do I get to make choices about the help I get with learning?” – an increase from 71% in 2023.
- 95.3% of respondents answered “Yes” or “Sometimes” to the question “Do I get to make choices about what I do in my free time?”.
- 93% of respondents answered “Yes” or “Sometimes” to the question “Do I get to make choices about what I want to do in the future?” – an increase from 86% in 2023.

Giving views and receiving information

- Most respondents (68%) said that they like to share their views by talking, with a smaller proportion liking sharing their views by drawing/using pictures (40%), writing (35%) and voting/a show of hands (32%).
- 58% of respondents liked to receive their information verbally, with a similar proportion liking receiving information digitally (55%) and through videos (55%). A smaller proportion (40%) liked receiving information on paper in books or leaflets.

Health

- The proportion of respondents who said that they had received help from a talking health service (e.g. Children and Adolescent Mental Health Services, a counsellor, or the ‘Supporting smiles’ service) increased from 28% in 2023 to 38% in 2025.

Safety

- 89% of respondents said that they could tell someone if they were being bullied – an increase from 79% in 2023. The people who respondents were most likely to tell were, in order: family or carers (77%), teachers or tutors (68%), teaching assistants (51%), and friends (47%).

Getting ready for adult life

- Respondents were asked about useful skills for adult life, and identified those which they can do, which they can do with help, and which they wanted to learn.
- The skills that respondents were most often able to do were cleaning their own teeth, getting themselves up and dressed, keeping safe at home, keeping themselves clean and tidy, and getting themselves ready for bed.
- Skills that respondents would most like to learn include applying for jobs, living alone, filling in forms, understanding money and bills, using public transport, and walking or cycling to school on their own.

Making life better

Nearly 160 comments were received to the question “What would make my life better?”, with respondents providing details in free text. From this some themes emerged, where multiple respondents mentioned similar things. These included:

- Support services to help with their mental health, overall health and learning.
- Having friends and having independent time with friends.
- Feeling safe in their community and having the skills to be independent and safe in their community.
- Having a place or learning or a job with peers and adults who understand their needs.
- Having opportunities to explore and pursue their own interests.
- Having more money as a family, and less money worries.

Experiences of parents and carers of children and young people with SEND: findings from the SEND Parents and Carers Survey 2025

Norfolk's third SEND Survey opened in January 2025, closing six weeks later.

The 'Parent and Carers' survey was promoted to parents and carers who have a child with SEND via known social media sites, existing SEND bulletins, in places of learning, and through staff working across the local partnership.

1,105 parents and carers fully or partially completed the survey, compared to 523 in 2023 and 759 in 2022.

Parents and carers were asked about their child or young person's place of learning with 35% stating mainstream primary school, 18% stating mainstream secondary school, 14% stating state-funded special/complex needs school, and around 5% stating each of 'home educated', 'independent school' and 'mainstream early years provision'.

Around 56% of respondents' child had an Education, Health and Care Plan (EHCP).

The full SEND Parent and Carer Survey 2025 Report is available online at <https://www.norfolk.gov.uk/article/40969/Norfolk-SEND-survey-2025>.

Summarised highlight results are presented in the main thematic areas below.

Discussing children's needs

- Participants were asked whether their child's place of learning met to talk about their needs, with 33% stating "yes", 42% stating "sometimes" and 17.5% stating "no".
- 46.3% of respondents felt that, when talking about their child's SEN, their views and wishes were listened to. 35% felt their views and wishes were not listened to.
- Participants were asked whether they were happy with how often their child's place of learning met with them to talk about their needs. 35% responded "yes" and 45% responded "no". The proportion stating "yes" was similar in 2023, but the proportion stating "no" has decreased from 57% in 2023.

Understanding and meeting children's needs

- 64% of respondents felt their child's place of learning made reasonable adjustments to include their child – an increase from 48% in 2023.
- 42% of respondents felt their child has special educational needs that have not been identified.
- Around 5% of respondents stated their child was home educated, with a further 4% not in education. Of these, around 7-in-10 responded "no" to the question "...are you getting the help you need?" Free-text comments alongside this question suggested that many respondents aren't electively home educating but are waiting for a suitable school placement. Others reported that they are not receiving support for services.

Education, Health and Care Plans (EHCPs)

- 53% of respondents felt their child's EHCP had made a positive difference – similar to 2023 and 2022. 29% said “no”, with 18% stating “not sure”.
- For those who felt their child's EHCP had made a positive difference, over 7-in-10 felt that ‘everyone is clear about my child's needs’, and over 6-in-10 felt their child is ‘making good progress’.
- For those who felt their child's EHCP had not made a positive difference, over 9-in-10 felt that their child's needs were not all being met, with around 6-in-10 reporting that their child ‘does not receive the support described in their plan’, and a similar proportion stating ‘not all of my child's needs have provisions to meet them’.
- 145 free text comments were received about EHCPs and associated arrangements. Many commented on processes taking too long with waits around needs assessments and plans, and communications not being timely. A number of respondents highlighted that they have to request for annual reviews to happen and that plans can take too long to be updated.

Transport

- Just over 1-in-5 respondents reported their child receives Norfolk County Council Home to School Transport. Feedback from this element of the survey was mainly through free-text comments, with over 200 comments received.
- When asked ‘what works well?’, respondents highlighted consistent and friendly drivers and personal assistants, that services were usually reliable, that communication was good, and that children enjoy the social aspect of transport and feel safe.
- When asked ‘what could be improved?’, respondents emphasised the importance of consistent pick-up times, drivers and personal assistants; long journey times; and communications, particularly at the start of the school year.

Preparing for adult life

- 37.5% of respondents (279 respondents) said their child was aged 12 or above – only this group was asked about preparing for adult life.
- Respondents were asked about which tasks their child needed support with. The most cited tasks, that over 80% of respondents stated their child needs support with, were: filling in forms; washing and putting away clothes; getting ready and being on time; understanding money, bills and budgeting; and making and keeping friends.
- 27% of respondents said their young person knew how to get ready for their next steps, with 31% unsure, and 42% stating “no”.
- When asked about which aspects of their child's future they were confident about, 53% stated their child's physical health, 32% stated their child's independence skills, 31% stated their education and training, and 26% stated their child's friends and relationships.

Information

- Participants were asked whether they were happy with the level of information they received about SEND services and support. 31% said “yes”, 19% did not know, and 50% said “no”.

- 31% of respondents said that they find information about SEND services and support easy to understand, with 32% stating “sometimes”, and 37% stating they do not find it easy to understand.

What is working well

390 free-text comments reflected on what was working well, with some consistent themes.

- That positive experiences in mainstream education were characterise by regular communication with parents, and involving and listening to parents, and the implementation of reasonable adjustments.
- Particularly positive responses from those respondents whose child receives specialist provision.
- Positive feedback about health services, and about early help and social care support.

Areas for improvement

433 free-text comments reflected on areas for improvement, with some consistent themes.

- Around two thirds of respondents mentioned areas for improvement around education and learning, highlighting the need for increased provision and choice, for teachers with experience and understanding, and for more capacity and time for SEND Coordinators in schools.
- Communication issues were mentioned about many services and experiences.
- Nearly one third of comments mentioned concerns about their child’s wellbeing, with their mental health frequently mentioned in relation to school experiences. Responses suggested increased availability of mental health support for children, and also improved social opportunities, activities and health checks.

Experiences of professionals working with children and young people with SEND: findings from the SEND Professionals Survey 2025

Norfolk's third SEND Survey opened in January 2025, closing six weeks later.

The 'Professionals' survey was promoted to people working to support children with SEND via briefings, staff updates, meeting, social media, networks and newsletters.

743 professionals fully or partially completed the survey, compared to 331 in 2023 and 382 in 2022.

63% of respondents said they worked for a place of learning. 17% said they worked for a local authority, and 9% said they worked for a health service or organisation. 6% said they worked for a charity or voluntary organisation, 3% said they worked for a private sector organisation, and remainder worked for other organisations.

90% of respondents stated that they work directly with children and young people. 48% stated that they had ever made a requests for an Education, Health and Care (EHC) needs assessment.

The full SEND Professionals Survey 2025 Report is available online at <https://www.norfolk.gov.uk/article/40969/Norfolk-SEND-survey-2025>.

Summarised highlight results are presented in the main thematic areas below.

Knowing and understanding the available support

- 70% of respondents said that they understood the range of SEN Support services available, and when to use it;
- 75% of respondents said they understand what is required from their service/organisation around EHC assessments and EHCPs.
- Participants were asked whether they ever feel unclear about where to turn for help to support a child with SEND. 58% responded "yes", with 42% responding "no".
- When asked what the main challenges around SEN Support are, 21% of respondents said "knowledge and understanding of how to meet needs".
- Comments were received from participants about their confidence about understanding what is required from their organisation in giving advice for EHC needs assessments and annual reviews. A number of these cited a need for better training and guidance about giving this advice.

Resources and capacity

- Participants were asked if they felt places of learning have access to the resources they need to implement SEN Support. 8% said "yes", 60% said "sometimes", 29% said "no" and 3% did not know.
- When asked what the main challenges around SEN Support are, 71% of respondents said "funding and/or budget management", 59% said "staffing levels and recruitment", and 46% said "time".
- When asked "What one thing would improve SEN Support?", nearly half of the 233 comments suggested that school funding is insufficient.
- 189 comments were received about implementing the provisions within EHCPs. 6-in-10 comments referred to having insufficient resources to implement provisions; nearly half of

comments also commented that the provisions within EHCPs don't reflect the reality of school funding, leading to arguments and increased tension between parents and carers, schools and the local authority.

Experiences of key processes, including around Education, Health and Care Plans (EHCPs)

- Most respondents who had requested an EHC needs assessment cited “the identification of need” as one of their ‘top 3’ reasons (82% of respondents placed this in their top 3 reasons). Being “unable to meet need at SEN Support” was also cited as a ‘top 3’ reason by 73% of those who had requested an EHC needs assessment.

The effectiveness of support

- Participants were asked whether it is usually possible to implement the provision in EHCPs. 36% said “yes”, 22% said they didn’t know, and 43% said “no”.
- Participants were asked whether they thought EHCPs enable CYP with SEND to get the appropriate support in education and training. 12% said “yes”, 70% said “sometimes” and 13% said “no” (with the remainder not knowing).
- Participants were asked whether the provisions within EHCPs make a positive difference. 25% said “yes”, 65% said “sometimes”, and 5% said “no” (with the remainder not knowing).

Information

- Questions were asked about professionals’ use of various information sources. Whilst a number of resources were used by most respondents, comments highlighted some frustration with the breadth of different resources, and not having time to understand and use all of them.
- When asked what would improve information sharing, a number of respondents suggested more targeted information sent directly to SEND Coordinators, SEND-specific sections within wider information sources, and a way of consolidating various information sources.

Working together

- Participants were asked what should happen to make transitions between phases of education successful. Several comments highlighted the need for parents to be fully involved in planning, the need for pupils to be better prepared around the expectations of their new setting, and the lack of flexibility within secondary education around reasonable adjustments for pupils with SEND.
- Improvements for transitions were suggested around earlier decisions being made (not just in the summer holidays before the transition), a greater understanding and support of children’s emotional needs through transition, and transition meetings involving current and new settings.
- When asked about what would help to improved working together, several comments recommended multi-agency planning and review meetings. A number of comments also suggested that non-school agencies do not understand the challenges faced by mainstream places of learning.

Developing our evidence base for the future

This Joint Strategic Needs Assessment presents the current evidence being used across partnerships in Norfolk to plan and commission support for children.

Throughout this document identifies where our data and analysis does not allow partners to be conclusive about the drivers of trends, or the relationship between factors. In addition, by aspiring to tell a broader story about SEND in Norfolk, it acknowledges that the story will change over time. In response, this document will need to be both updated and further developed over time.

There are some notable areas for further analysis, prompted by the findings of this JSNA:

- More detailed analysis of the support needs and circumstances of children and young people with Primary Support Reasons of Social, Emotional and Mental Health; Speech, Language and Communication; and Autistic Spectrum Disorder. This will include looking at contextual factors (for example the age at the start of an EHCP and at the end; referral routes; educational outcomes) to see whether there is anything further we can learn about what support might be need, and when, to improve outcomes. The purpose of this analysis will be to understand more fully the reasons behind, and practical implications of, Norfolk's higher/lower rates of EHCPs with these support needs.
- A comparison of the INDES scores for children with different statutorily-defined Primary Support Reasons – with a particular focus on better understanding Norfolk's high rate of EHCP with Social, Emotional and Mental Health PSRs. This analysis will seek to understand Norfolk's higher rates of Social, Emotional and Mental Health EHCPs.
- An analysis of where children with SEND live geographically – to assess where specific needs are more likely to coincide with other contextual factors (e.g. deprivation), to support the better targeting of preventative and early-help support.
- More detailed analysis of the circumstances around children and young people who require home-to-school transport, and of accessibility more generally, to better understand the challenges of accessing support.
- An analysis of post-16 destinations for young people with SEND, to better understand long-term outcomes.

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