Annex A – Local Area SEND Reform Plan

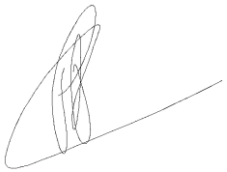
Name of Local Authority: Hampshire County Council

Name of Integrated Care Board: Hampshire and Isle of Wight ICB

Local SEND Reform Plan SRO: Natalie Smith – Assistant Director of Education and Inclusion

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Executive Summary

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

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

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

Hampshire’s SEND reform “change story” (PPR08) describes a clear, evidence-based route from a system under sustained pressure to a more sustainable, inclusive 0–25 model. Outcomes are variable, needs are becoming more complex, and financial pressures remain significant, with EHCP requests expected to continue increasing. The Maturity Assessment identifies the system as “developing”, with strong governance and co-production but uneven operational delivery, workforce capacity and data integration.

Inclusive practice is established but inconsistent across phases and localities. Outcomes, attendance and experience for children and young people with SEND are not yet strong enough, and families report variable confidence in pathways and timeliness. Requests for statutory support continue to rise, alongside reliance on specialist and independent provision, showing the need for whole-system reform that delivers earlier intervention and stronger inclusion.

Over the next three years, Hampshire aims to build a fully integrated 0–25 system where needs are identified and met earlier, mainly within mainstream settings. This means better outcomes, needs being identified and met earlier, stronger parental confidence and improved financial sustainability. Success will be seen through children and young people's needs being better met within their educational settings, leading to improved attendance, attainment and participation, fewer exclusions, a sustainable pattern of EHCP growth as more needs are met without requiring an EHCP, and increased use of local provision, so that more children are educated alongside their peers in their communities.

This reform is structured around four core aims:

- Build an inclusive 0–25 system and stronger partnerships through a consistent Universal Offer, graduated approach, shared governance and co-production.
- Improve workforce capacity and capability by implementing Experts at Hand through multi-disciplinary Local Delivery Teams that bring specialist support earlier.
- Increase confidence among children, families and stakeholders through stronger co-production, transparency, early resolution and clearer pathways.
- Stabilise finances and improve value for money by aligning sufficiency, capital and commissioning to demand, increasing local provision and reducing reliance on high-cost placements.

We will know we are succeeding through both quantitative and qualitative evidence. Quantitatively, we expect improved outcomes, attendance and inclusion, reduced exclusions, moderated EHCP requests and less reliance on independent provision. Qualitatively, children and young people will feel more included and supported, families will experience clearer and more consistent pathways, and practitioners will show greater confidence and capability.

Current and forecast performance shows that, without reform, requests and cost pressures will continue to rise. The reform therefore focuses on earlier intervention and stronger inclusion to shift the balance towards mainstream and local provision while improving experience and outcomes.

Delivery depends on sustained national investment and sufficient workforce capacity. While the strategy makes best use of existing resources through earlier intervention and better use of provision, delivery at the pace and scale required still depends

on continued revenue and capital funding, including multi-year certainty. The partnership will manage these dependencies through risk management, prioritisation and phased implementation, recognising that full impact takes time.
We will know we have achieved our vision when the system shows the characteristics of a maturing partnership: good outcomes for children and young people, consistent inclusive practice, needs met earlier without escalation, strong family confidence, and better alignment between outcomes, experience and financial sustainability (EAH09).

Section 1 – Vision and Goals

1. **What the local area partnership is trying to achieve?**
   Please set out your goals for your local system. These should be clear, aligned to the vision set out in the Schools White Paper, small in number and measurable. These goals should include clear reference to:

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

Hampshire's Local Area Partnership (LAPB) will build on existing strengths to deliver an inclusive 0–25 SEND system where early identification, local support and confident mainstream practice are the default, so children and young people (CYP) achieve better outcomes in education, health, wellbeing and preparation for adulthood.

Progress will be tracked through shared system measures to ensure clarity, alignment and accountability.

Goal 1: Improve outcomes for CYP

- Embed the 0–25 Universal Offer, ordinarily available provision and inclusive practice across all settings.
- Use Experts at Hand and TSEND to provide earlier specialist support and reduce escalation.
- Improve the timeliness, quality and consistency of SEN Support so that needs are met effectively at the earliest opportunity.

Measured by: improved attainment, attendance, fewer suspensions and exclusions, and reduced EHCNAs, particularly in Early Years.

Goal 2: Increase confidence of families and CYP

- Reduce delay, escalation and inconsistency across localities.
- Strengthen co-production through LAPB, Parent Carer and Youth Forums.
- Ensure CYP and families shape decision-making.

Measured by: improved confidence and experience (feedback and co-production evidence).

Goal 3: Secure value for money and financial sustainability

- Shift investment towards early intervention, workforce capability and inclusion.
- Reduce reliance on independent and out-of-area placements through sufficiency planning.
- Use data, unit cost modelling and forecasting to inform decisions.

Measured by: better alignment of need, provision and spend, slower growth in high-cost placements; greater High Needs sustainability.

Collectively, these goals will improve outcomes for CYP, increase local sufficiency and improve value for money through earlier intervention, inclusive practice and better confidence.

Section 2 – Strategy

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

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

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

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

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

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

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

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

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

Local blueprint for the next 3 years	Where we are	Where we will be in the next 3 years

Overarching vision and strategy:
Over the next three years, Hampshire will deliver a coherent, prevention-focused reform strategy that strengthens the Universal Offer, scales multi-disciplinary support through Experts at Hand, and expands local capacity through inclusion bases and targeted capital investment. This is underpinned by clear expectations for inclusive practice across all phases, including post-16 education.

By the end of the three-year period, the Local Area Partnership will operate as a fully integrated, mainstream-first system in which early identification and intervention are the default. The Universal Offer will be consistently embedded across all settings, and Experts at Hand will function as a partnership-wide, locality-based model providing timely access to multi-disciplinary support. Most children and young people will have their needs met within mainstream provision, with specialist and statutory pathways reserved for those with the most complex needs. Families will experience clear, consistent and predictable pathways from Early Years through to post-16 and adulthood, supported by strong co-production, transparent decision-making, timely mediation and earlier resolution of concerns. Increased local capacity and the full implementation of Experts at Hand will ensure that more children and young people have their needs met within their local communities.

This will result in clearer and more consistent pathways for support, improved practitioner confidence in inclusive practice, and earlier access to advice and intervention for children and young people with SEND across all settings.

Delivery is enabled through strengthened partnership governance, workforce development and enhanced data and digital capability. Together, these reforms will support earlier identification and intervention, increase access to targeted and multi-disciplinary support, reduce escalation to statutory processes and specialist placements, and improve outcomes and financial sustainability.

This strategy sets out a clear trajectory from current baseline performance to the three-year targets, with phased improvements driven through strengthening universal provision, scaling Experts at Hand and increasing local capacity.

Overall, this approach ensures delivery across inclusion, early intervention, partnership working and sufficiency.

Overarching Building Blocks

Building Block 1. Strengthening inclusion across education settings – establishing a clear, high-quality Universal Offer across all schools and early years providers and post-16 providers via universal and targeted pathways.
With shared expectations of inclusive practice, underpinned by the Hampshire Approach to Inclusion framework and supported through system-wide workforce development guidance and quality assurance. This is aligned with Hampshire's Best Start in Life programme, delivered through a network of Best Start Family Hubs that support early identification, inclusive practice and coordinated family support. The Best Start Inclusion Practitioner role sits

within Services for Young Children's Education and Inclusion Team, enabling a consistent, joined-up approach for families and settings while avoiding duplication across services.

Building Block 2. Access to specialist support and local placements as early as possible - implementing the Experts at Hand (EAH) offer – covering educational psychology, therapies, specialist teacher advisory services, and behaviour and inclusion services – to enable earlier intervention and reduce escalation, alongside expanding specialist and support inclusion bases as part of a continuum of support to reduce reliance on out-of-area and independent placements alongside targeted outreach and behaviour support services. Best Start Inclusion Practitioners will complement this offer by identifying and responding to emerging SEND needs at the earliest opportunity, supporting families and settings to implement inclusive strategies, facilitating timely referrals to specialist services where required, and providing ongoing support while families await access to specialist intervention.

Building Block 3. System leadership, partnership collaboration and co-production – establishing strong system leadership through shared accountability and effective multi-agency working at all levels. Children, young people and families are fully involved in shaping, delivering and improving services. Co-production is embedded as a core principle across design, delivery and evaluation, with structured partnership arrangements in place with the Parent Carer Forum and children and young people, alongside locality-based engagement. These approaches are supported by consistent feedback loops and the systematic use of insight to inform service improvement and drive continuous improvement across the Local Area Partnership.

Building Block 4. Encouraging inclusive culture and behaviours – promoting a positive culture of early intervention, evidence-based practice and data-driven decision-making across the workforce and organisations supported by workforce development, specialist training and communities of practice.

Overarching Enablers

Enabler 1. Capital & Sufficiency - with strategic use of capital funding and place planning to ensure sufficient local provision (mainstream, inclusion bases, special/AP) accessible in each area of the county. There is a clear focus on specialist inclusion bases (currently RPs), support inclusion bases, and mainstream adaptations to reduce reliance on independent/out-of-area placements, though delivery is dependent on capital allocations and project pipeline delivery.

Enabler 2. Internal workforce - developing a skilled, data-literate workforce across education, health and social care, with capacity reinforced by co-delivery models (EaH) and enhancing training in inclusive practice. This includes building on the existing, highly regarded (LA) in-house SaLT team.

Enabler 3. Harnessing data, digital systems and insight for forecasting, performance monitoring, and evaluating reform - developing better systems and use of data to ensure performance can be accurately monitored and evaluated. Building of improved contact systems to support resolution including digital optimisation of parent facing journeys across partners.

Enabler 4. Sustainable Funding and Investment - delivery of SEND reform across the Local Area Partnership is supported by sustained revenue and capital investment across the system, enabling transformation of provision, workforce and support pathways. This includes local prioritisation and

alignment of existing resources alongside national funding programmes. However, delivery at the scale and pace set out in this plan remains dependent on continued and sufficient national funding, representing a key system dependency.

System-level success measures (used to assess progress toward the 3-year future state):

1. **Improved educational outcomes for children and young people with SEND** (aligned to Goal 1)
2. **Improved attendance for children and young people with SEND** (aligned to Goal 1)
3. **Reduced suspensions and exclusions of children and young people with SEND** (aligned to Goal 1)
4. **Increased parent, carer and young person confidence in the SEND system** (aligned to Goal 2)
5. **Reduced demand pressures and improved financial sustainability of the SEND system through effective demand management and increased local provision** (aligned to Goal 3)

Universal Offer (0-25)	**Strengths**	**The Universal Offer and inclusion model**
Core minimum requirements alignment The Universal Offer demonstrates alignment with the following core minimum requirements, setting out a consistent, co-produced, and inclusive 0–25 framework that strengthens early intervention, supports clear pathways across phases, and reduces escalation across the local system: • CMR20 – Partnership-wide Universal Offer agreement • CMR21 – Engagement of MATs and Parent Carer Forum (PCF) • CMR22 – Strengthening early intervention • CMR23 – Meeting common areas of need • CMR24 – Reducing escalation into higher-cost provision • CMR26 – Early years identification and intervention • CMR27 – Early years to primary transition • CMR28 – Post-16 pathways	The Universal Offer in Hampshire provides a strong foundation, with Ordinarily Available Provision (OAP), a graduated approach in place, and inclusive practice established and working well in parts of the system. Significant progress has been made through targeted initiatives, including the Neurodiversity Multi-Disciplinary Team, which is strengthening early intervention and support for children and young people with neurodiverse needs, and the Team Around the School model, which has delivered improvements in attendance, inclusion and support for children with speech, language and communication needs, autism and social, emotional and mental health needs. There are also strong foundations in early years transition practice through the Transforming SEND Transition to School Early Years workstream, which has led to improved outcomes for children moving from early years into primary settings. This demonstrates the	A consistent 0–25 Universal Offer and graduated approach are embedded across early years, schools and post-16 provision, underpinned by clear expectations of OAP at each stage. This provides a shared framework for inclusive practice, ensuring that children and young people can have their needs identified and supported at the earliest stage within mainstream settings. This is further strengthened by the Hampshire Approach to Inclusion which maps out the six pillars of inclusive practice which training, advice and support can be structured around. The Universal Offer is designed to support the most common and emerging areas of need, including speech, language and communication needs, autism and social, emotional and mental health needs, ensuring that support is needs-led, consistent and accessible across the system. This includes a fully embedded model of OAP from early years through to post-16, ensuring continuity of inclusive practice and a consistent baseline of support

• CMR29 – Pathways into and out of post-16 provision	impact of coordinated early identification, information sharing and targeted support, and provides a strong basis for further strengthening transition practice across the system (UO05). These operate alongside established services, including the Inclusion Support Service and the Primary Behaviour Service, which supports children at risk of suspension or exclusion. The outreach offer is strong (EAH02), and changes to Alternative Provision and Education Centre service arrangements have aligned delivery more closely with a graduated, three-tier model (EAH05, EAH08). The current training and support available to education settings, to ensure consistent universal approaches have been mapped across the LA. This works across every phase and service and maps availability to the principles of inclusion. This mapping reviews how the training and workforce development align with the principles of inclusion, as well as developmental opportunities already in place that can be built upon. The Local Offer is central to information sharing and signposting for families, with improvements to user experience and successful Local Offer discovery events supporting increased parental confidence and access to support. In Post 16, most young people with SEND are successfully engaged in education,	for all children and young people across the 0–25 age range. Hampshire will have a coherent and inclusive post-16 system where young people with SEND access consistent support, clear pathways and improved outcomes, regardless of provider or location. Progress will be monitored through participation, retention, progression into supported internships and apprenticeships and employment outcomes. **Consistency, quality and system delivery** Clear and consistent thresholds, pathways and quality assurance processes are established across early years, schools and post-16 provision, ensuring a predictable and equitable baseline of support across all localities. Transition pathways between early years, school and post-16 are fully embedded. Post 16 transitions are supported through increased training and continuity across provision, as well as ensuring secure system understanding of different pathways to enable successful transition both into education and employment. This will support continuity of provision, access and advice reducing variation in experience and outcomes for children and young people. Delivery of the Universal Offer is consistent across the partnership, with shared expectations for inclusive practice and strengthened capability across settings. Quality assurance processes, supported by data and partnership oversight, ensure that Ordinarily Available Provision is implemented effectively and that variation is identified and addressed at pace. **Impact and outcomes** A consistent, partnership-wide Universal Offer will result in earlier identification and support for children

	employment or training, with 89.2% in EET, indicating a broadly stable system. Our own internal baseline data collection shows overall attendance (84%) and achievement (86%) at SEN Support demonstrate that many post-16 providers are effectively supporting learners with SEND. High-performing providers demonstrate that strong outcomes and inclusive practice are achievable within the current system, providing a foundation for scaling best practice. Those which are lower tend to be so across both measures, demonstrating the direct correlation. Most learners continue in education post-16, with further education as the dominant pathway, indicating a well-established post-16 infrastructure. Some learners with SEN are achieving less well than peers for level 2 outcomes, however areas where there have been significant improvements have valuable information for sharing to further scale up and develop practice. **Areas for Improvement** However, OAP and inclusive practice are not yet consistently embedded across all phases and localities. There is variability in post-16 provision and at key transition points. Confidence and capability across settings in meeting a range of SEND needs, including speech, language and communication needs, autism and social, emotional and mental health needs, varies, and parental confidence in early support remains inconsistent.	and young people within mainstream settings, reducing the need for statutory assessment and high-cost interventions over time. Strengthened inclusive practice across all settings will improve outcomes, including attendance, attainment and engagement, and reduce the need for exclusions. This will lead to reduced escalation to Education, Health and Care Plans (EHCPs), fewer placements in specialist and out-of-area provision, and increased capacity within mainstream settings to meet a wider range of needs. Financial sustainability will be improved through reduced need for high-cost provision and more effective use of resources, ensuring that investment is aligned to impact and outcomes and supports a more inclusive and sustainable SEND system.

	System data demonstrates that outcomes for children and young people with SEND, including attendance, attainment and exclusion rates, remain significantly below those of their peers, indicating that inclusive practice is not yet consistently strong enough to drive sustained improvement across the system. Using our internal unvalidated data and validated data sets, in Post 16, there is significant variation in attendance (75%–91%) and achievement across providers, indicating inconsistent delivery of post-16 inclusion and support. Outcomes at Level 2 are declining, particularly English attainment (65% → 53%), suggesting that the system is not consistently securing strong academic progression. Transition into and through post-16 is not consistently effective, with a significant drop in participation between Year 12 and Year 13. NEET increases significantly from 4.4% in Year 12 to 9.9% in Year 13, indicating a clear transition risk point requiring earlier intervention. There is variation in outcomes by geography, with some districts performing significantly below others, demonstrating inconsistency in local delivery. **What needs to change** In the next year, the focus will be on embedding Ordinarily Available Provision consistently across all phases and localities, creating a clear and predictable baseline of inclusive practice. Effective models, including Team Around the	

	School and the Neurodiversity MDT, will be scaled and extended to strengthen early identification and intervention across the system. Work will also strengthen transition pathways, particularly into post-16 provision, ensuring continuity of support and improved preparation for adulthood. Continued Local Offer engagement will increase parental confidence and access to support, while phase-specific data mapping, including early years and post-16 analysis, will be used to refine and target delivery. Post-16 - A clearly defined and co-produced post-16 OAP must be implemented across all further education providers, aligned to the 0–25 SEND framework. This will set clear expectations for inclusive teaching, support, and adaptation; ensure continuity of SEN Support beyond school age; and reduce variation between providers. As a result, all learners will receive consistent support regardless of setting, providers will have clarity in delivery, reliance on escalation to statutory support will be reduced. A structured and system-wide approach to transition must be embedded, with a particular focus on Year 11 → Year 12 entry and Year 12 → Year 13 retention. This will include earlier and more coordinated transition planning, continuity of SEN Support	

	and Preparing for Adulthood pathways and targeted intervention at identified risk points. Reduce variation between providers and districts with a consistent approach to performance and improvement must be implemented across post-16 provision. This will include better use of data, targeted support and engagement for lower-performing areas, and use of best practice from high-performing inclusive providers. This will ensure outcomes are equitable across Hampshire, place-based inequality is reduced, and resources are used more efficiently A coherent set of pathways (PfA) must be established across: • Further education • Apprenticeships • Employment • Supported internships This will include clear progression routes, stronger partnerships with employers and providers and alignment to PfA outcomes This will ensure young people move into employment and independence; families understand pathways and long-term reliance on services reduces. Together, these actions will strengthen mainstream provision, including early years; enable earlier support; reduce escalation to statutory processes and specialist placements;	

	and improve outcomes for children and young people with SEND. Early years provision will be fully aligned to the Universal Offer, ensuring consistent application of the graduated approach and inclusive practice from the earliest stages. There is currently transition expectations available which focus on ensuring defined expectations for early years to school transition. Work is needed to review and strengthen these, to ensure consistent use.	
Experts at Hand **Core minimum requirements alignment:** The Experts at Hand model demonstrates alignment with the following core minimum requirements, setting out a clear, integrated delivery model that strengthens early intervention, improves access to multi-disciplinary support and underpins a more inclusive and sustainable local system: • CMR1 – Delivery approach and rationale • CMR2 – Partnership approach to model design • CMR3 – Enhancing existing access to specialist support • CMR4 – Alternative Provision commissioning aligned to the three-tier model • CMR5 – Approach to Alternative Provision capacity • CMR6 – Commissioning of outreach from specialist providers	**Strengths** Hampshire is well placed to deliver the Experts at Hand model, with a strong foundation of educational psychology, specialist teacher services and a strong in-house therapy offer that works closely with settings to compliment the NHS core service. This capacity allows the LA to deploy an agile service across the county and beyond; responding to pressures as they arise. Delivery will build on established district-based Local Authority Local Delivery Teams, supported by strong relationships between the local authority and the Hampshire and Isle of Wight Integrated Care Board (HIOW ICB). The model has been co-produced with partners and informed by locality-level data on need, demand and outcomes (UO04, UO01). Hampshire benefits from established workforce networks and provider forums, and there is a clear commitment to delivering a consultative, preventative and capacity-building approach	**The model and access to support** Experts at Hand underpins this future by providing a single, equitable route for schools and settings, including early years and post-16 to access timely multi-disciplinary expertise, including for out-of-area FE attended by Hampshire young people. It builds on existing learning and shifting specialist input to where it is most needed, reducing reliance on statutory processes and specialist placements while improving outcomes, experience and financial sustainability. Experts at Hand represents additional capacity and system coordination, strengthening and amplifying existing services rather than replacing them. The model scales what already works well - strong inclusive practice, specialist outreach and effective partnership working - through whole-setting consultation, coaching and workforce development, while addressing key areas of variability such as parent confidence, fragmented pathways and delays in accessing advice. This will be achieved through clearer access routes, consistent triage and shared expectations for inclusive practice across all settings.

• CMR7 – Timely access to specialist health and education professionals • CMR8 – Implementation planning and trajectory • CMR9 – Governance, accountability and Senior Responsible Officer (SRO) • CMR10 – Joint governance and shared accountability • CMR11 – Equitable access to support across all settings • CMR30 – Partnership commissioning approach	that supports mainstream inclusion and reduces escalation. Strong foundations are also in place through the Best Start in Life programme (UO06) and Family Hub network, providing a platform for integrating early years, family support and early identification within the Experts at Hand model. In addition, a Neurodiversity MDT provides universal, targeted and coordinated support without requiring diagnosis, including a single point of access, triage, workshops, and workforce training. This is a service which works across all age-ranges and demonstrates a graduated response and early intervention. The model is closely aligned to the core requirements of the Experts at Hand model. The Parent Carer Forum supports the delivery of the ND MDT through co-production, engagement events and workshops. It helps to secure strong participation, facilitates feedback loops and has a genuine place in system-wide collaboration. This provides strong evidence of the family involvement, straightforward and prompt access, co-production and system integration required within the Experts at Hand model. Through its Transforming SEND (TSEND) work, the Local Authority has pursued several approaches already with schools to develop mainstream inclusion and improve educational engagement. A Team Around the School project has had significant impact, including	Experts at Hand will be fully integrated with Best Start in Life delivery, connecting Family Hubs, Services for Young Children and specialist SEND services within a single, coordinated system. This will ensure that children and families benefit from earlier identification, timely access to specialist advice, and consistent support through every stage of their SEND journey. This approach also strengthens pathways beyond statutory school age, with Local Offer discovery and engagements events connecting 16–25-year-olds to education, employability support, adult learning opportunities and participation pathways, ensuring continued access to support and progression into adulthood. Work to ensure that information and advice is both timely and appropriate to ensure transitions post 16 are seamless. **Workforce and delivery model** Locality-based Experts at Hand workforce will be embedded within districts and school clusters, with an integrated workforce model including NHS and Local Authority advanced practitioners, in-house therapy practitioners and assistants, alongside Educational Psychology, in house SaLT and OT capacity, supported by structured development pathways for OTs, in house SaLTS and EPs. SWOT analyses have been conducted by the EP, in house SaLT/OT and Specialist Teacher services to ensure that workforce development and recruitment take account of skills gaps and enhances the scope of those services still further.

	reduced exclusions, improved attendance and staff confidence, providing quantifiable outcomes and case studies demonstrating its effectiveness in reducing escalation. **Areas for Improvement** Rising statutory requests are currently limiting capacity for early intervention, consultation and system-level work. Access to specialist expertise is often reactive and referral-based, with variability across districts, phases and settings. Workforce models remain predominantly reliant on highly qualified professionals, with limited use of mixed-skill approaches. Opportunities for early advice, whole-school consultation and cluster-based delivery are not consistently embedded, and escalation to statutory processes is often driven by unmet need or variable system confidence. Multi-agency working varies in consistency, with decision-making and escalation routes not always clearly understood at locality level. Digital resources are fragmented, and data is more often used reactively than proactively to support early intervention. Links with Best Start in Life services and Best Start Family Hubs are not yet fully utilised to support early identification and coordinated intervention at the earliest stages. Whilst there is strong joint governance across the local area partnership, including through the Local Area Partnership Board, this is not yet consistently	Alongside the core Experts at Hand team, existing services concerned with developing mainstream inclusion, including the Primary Behaviour Service (PBS) and Inclusion Support Service (ISS) will work in an integrated way to enhance the offer. PBS is an outreach SEMH service providing consultation, training, assessment and early intervention to reduce exclusions and improve behaviour. ISS is a multi-function inclusion service covering attendance, exclusion prevention, reduced hours provision, reintegration and safeguarding support. ISS works directly with families and schools to provide early help, system coordination, and to prevent escalation. The work of these services is well-regarded by schools and aligns with our aspiration to provide targeted and preventative support as part of a graduated response. Health partners will play a central and integral role within this model, contributing specialist expertise through advanced practitioner roles, providing clinical leadership for therapy practitioners and assistants to support training, mentoring, early intervention and specialist input across the system. Education settings will successfully work with Local Delivery Teams to access consultation, training and capacity-building support, ensuring that specialist expertise is embedded within day-to-day practice across settings. Specialist expertise will be focused on consultation, practice development and decision-making at pre-statutory stages. Multi-disciplinary approaches will support needs earlier, reducing unnecessary reliance

	translated into clear expectations for joint governance, monitoring and shared accountability within the delivery of the Experts at Hand model. There is not currently an established model for delivering Experts at Hand support across post-16 settings and geographical boundaries. As part of implementation, Hampshire will work collaboratively with post-16 providers, neighbouring local authorities, NHS partners, parent carers and young people to co-produce a clear operating model that ensures equitable access to support regardless of where a young person is educated. Local Delivery Teams will work closely with post-16 leaders to establish consistent referral pathways, eligibility criteria, information-sharing arrangements and agreed principles for collaboration. This will include the development of a Hampshire-wide framework for engagement with Further Education colleges, sixth forms, specialist post-16 provision and independent providers. Hampshire will develop reciprocal cross-border arrangements with neighbouring local authorities to support young people who live in Hampshire but attend post-16 provision elsewhere, and those who live outside Hampshire but are educated within Hampshire settings. The principle underpinning these arrangements will be that support follows the	on diagnostic pathways and ensuring that support is needs-led rather than diagnosis-led. This model increases reach and equity of access without increasing reliance on individualised or statutory routes. It strengthens mainstream provision, reduces reliance on statutory processes and specialist placements, and improves experiences and outcomes for children, young people and their families. The Experts at Hand model will have rebalanced expenditure towards earlier specialist input, reducing reliance on costly individual placements and reactive services. **Alternative Provision and outreach** Alternative Provision and outreach form a core component of the Experts at Hand model, with commissioning aligned to a clear three-tier framework reflecting best practice from Alternative Provision Specialist Taskforce (APST) approaches. This ensures a consistent and graduated pathway across prevention, targeted intervention and specialist provision, with AP operating as part of the wider system of early and multi-disciplinary support. The three-tier model for AP is embedded as part of a graduated system and will strengthen the experts at hand offer in aligning seamlessly: • **Tier 1: Early, Preventative and Outreach Support** - focus on prevention and early intervention, using AP expertise to support mainstream schools through outreach, advisory and capacity-building activity. This will align with Experts at Hand expectations by

	young person, rather than being determined solely by the location of the educational setting. Subject to co-production with partners, the proposed model will include: • A single point of access through the Hampshire Experts at Hand Local Delivery Team, regardless of where the young person is educated. • A named lead professional responsible for coordinating support and acting as the link between the young person's educational setting, local delivery team and relevant services. • Agreed referral, triage and decision-making processes to ensure timely access to appropriate support. • Cross-border information-sharing protocols and data-sharing agreements that support effective joint working while maintaining statutory duties and data protection requirements. • Reciprocal commissioning principles enabling local delivery teams to provide support into neighbouring areas where this delivers the timeliest and most efficient response for young people. • Clear escalation routes where support needs exceed the resources available within the host local delivery team. • Joint quality assurance, performance monitoring and outcome evaluation arrangements to ensure consistency,	enabling earlier access to specialist advice and strengthening schools' ability to meet needs without escalation. This outreach offer will be developed with Education Centre leaders and Special School Headteachers – both of these types of organisations already offer outreach support, but there are some significant local difference and fragmentation and the Experts at Hand approach and associated funding provides the opportunity to address and eradicate this. • **Tier 2: Time-Limited Targeted Alternative Provision** - provide short-term, targeted placements for pupils requiring additional support beyond what can be sustained in mainstream. Placements will be time-limited, quality-assured and planned from the outset around reintegration, with close collaboration between schools, providers and families. Again, the facilitators for these placements will be our Education Centres and, over time, our Special Schools. • **Tier 3: Intensive and Specialist Alternative Provision** - support pupils with the highest levels of need requiring more intensive or specialist Alternative Provision. Commissioning will ensure placements are outcome-focused, appropriately specialist and integrated with wider SEND pathways, with ongoing review and transition planning. It is intended that these specialist placements be directly commissioned by schools with providers, building on the strengths of the AP Framework. Outreach commissioning linked to all three tiers supports the core principles of Experts at Hand and

	equity and effectiveness across geographical boundaries. Hampshire will test and refine these arrangements during implementation, using feedback from young people, families, post-16 providers and partner organisations to develop a sustainable model that aligns with the expectations of the Experts at Hand programme and ensures all eligible young people can access support on an equitable basis, irrespective of where they are educated Further development of pathways between local authority and NHS therapy pathways is required. Whilst services complement each other, pathways could be more streamlined to support smoother transitions between the offers for children and young people. Close working will also ensure sharing of best practice, more robust identification of need and pressures, and more efficient use of resources, reducing duplication. Workforce supply, particularly across educational psychology and therapies, is a national constraint, with competition across local areas limiting the pace at which capacity can be expanded. **What needs to change** Experts at Hand will be implemented through Local Delivery Teams across all districts, providing a consistent, locality-based model of delivery. The system will shift from a reactive,	contributes to sustainable system change. This includes a fully developed and impactful offer for the use of placements in Education Centres and facilitating time-limited placements for mainstream children and young people within Special Schools where appropriate. Outreach staff based within Education Centres and Special Schools work directly with leaders and teachers in mainstream settings to develop relational and trauma-informed approaches. This includes delivery of CPD across clusters, targeted support to schools' leaders and alignment with SEND Advisers to strengthen high-quality adaptive teaching and ordinarily available provision. Local Delivery Team meetings ensure that EPs, in house SaLTs and other professionals work in a coordinated way alongside outreach staff. The commissioned model reflects APST best practice by embedding Alternative Provision within a graduated system, prioritising early intervention, strengthening accountability for outcomes and ensuring clear entry and exit criteria. AP providers are commissioned as partners in system improvement rather than standalone placement providers, contributing to multi-agency working, consistent delivery models and shared performance frameworks across education and health. Commissioning is undertaken collaboratively with education and health partners and governed through established SEND partnership arrangements. A key benefit of this approach is stronger and more consistent reintegration planning. From the outset of any placement, there is a clear focus on planned

	referral-based approach to one focused on early advice, consultation and capacity building. Workforce development will include the introduction of a mixed-skill model to expand capacity and reach, with access to support standardised across settings, and increased emphasis on whole-setting and cluster-based delivery. Experts at Hand funding will enhance existing services and access routes by increasing capacity for early advice, consultation and targeted intervention, enabling specialist expertise (including Educational Psychology, in-house Speech and Language Therapy and Occupational Therapy) to be deployed earlier and more flexibly, rather than accessed primarily through referral and statutory pathways. There will be a key focus on ensuring clear pathways through to Post 16, including those in out of county placements, enabling all young people to access an equitable offer. In Early Years, Experts at Hand will be aligned with Best Start in Life delivery through Best Start Family Hubs and early help services, ensuring earlier identification, coordinated support for families and improved access to support for early years settings. Services for Young Children will deliver CPD and training for early years settings and practitioners, supporting inclusive practice and child development and sharing advice on speech, language and communication, behaviour and	return to mainstream education where appropriate, supported by schools adapting provision and staff receiving targeted training and guidance. Specialist teachers and other professionals play an active role in shaping reintegration plans and working directly with receiving schools, reducing the risk of repeated placements, exclusions, and long-term separation from mainstream education. Children in Alternative Provision will benefit from significantly improved access to coordinated specialist support, including input from Educational Psychologists, Speech and Language Therapists, Occupational Therapists, Specialist Teachers, and neurodiversity and behaviour teams. This support is organised through the Local Delivery Team and aligned with provision in the child's longer-term education setting, ensuring greater consistency, stronger coordination and sustained progress beyond the placement. **Governance and commissioning** The commissioning model places a strong emphasis on consistency, equity of access and value for money, with coordinated commissioning undertaken collaboratively with education and health partners. This includes arrangements that support equitable access for Hampshire children and young people, including those accessing provision outside the local area. Governance and performance monitoring arrangements sit within established SEND partnership structures (EAH11), enabling joint oversight of impact, quality and alignment with SEND Reform priorities.

	emotional regulation, neurodiversity and early learning. Best Start Family Hubs will enhance this offer through Local Offer events and parent and carer learning opportunities, helping families access information, support and advice at the earliest opportunity. Best Start Family Hubs will provide a trusted space to support early identification of need, provide brief consultations with professionals (e.g. speech and language therapy, occupational therapy, SEND advisers and Best Start Inclusion Practitioners), and connect families and settings to Local Delivery Teams. They provide a space for early discussion of concerns, allowing support to be put in place without escalation reducing the need for more intensive interventions. Best Start Family Hubs will play a pivotal role in supporting transitions into early years settings and schools, ensuring needs are identified, understood and planned for in advance and that provision is in place. This proactive approach will strengthen continuity of support, promote positive early educational experiences, and reduce the risk of unmet needs, delayed identification and poorer longer-term outcomes Each district's Local Delivery Team will connect closely with Best Start Family Hubs, Best Start Inclusion Practitioners and wider community services, ensuring support is delivered locally and providing a more joined-up experience for families.	Delivery is overseen through these structures, with shared performance dashboards, aligned outcome measures and joint decision-making at both locality and system level. Data and feedback are used to inform continuous improvement and ensure commissioned outreach is meeting system needs. Overall delivery is led by a single Senior Responsible Officer (SRO), providing clear system leadership and accountability for the implementation of the Experts at Hand model across the Local Area Partnership. Clear expectations for joint governance, monitoring and shared accountability are embedded across partners, with education and health jointly responsible for outcomes, resource use and system impact. Over time, this will develop from coordinated multi-agency delivery to fully embedded shared accountability, supported by consistent data, regular performance review and transparent reporting. This enables partners to collectively monitor performance, identify variation and take timely action to improve delivery and outcomes. **Impact and outcomes** By the end of the three years, Experts at Hand will operate as the consistent, partnership-wide delivery model for early and targeted support, fully embedded across education, health and social care and underpinning an inclusive SEND system. Children and young people will have earlier and more consistent access to multi-disciplinary support, with needs identified and addressed at the earliest stages.

	Best Start Family Hubs will operate as the system's primary front door for Early Years SEND (EAH10). They will: • coordinate early identification and triage of children with emerging needs • provide structured access to multi-disciplinary advice and intervention • act as the central coordination point linking early years providers, health services and Local Delivery Teams. This ensures earlier, consistent identification and reduces variation in access to support. Across all age ranges, data and digital tools will be strengthened to support early identification and intervention, alongside clearer escalation and decision-making pathways. Development of short-term placement capacity within Education Centres will support reintegration and reduce reliance on longer-term specialist provision. Clear expectations for joint governance, monitoring and shared accountability will be established across education and health partners, including shared performance measures, aligned reporting and locality-level oversight. This joint delivery model will be underpinned by formal partnership arrangements between Hampshire County Council and the ICB, including a Memorandum of Understanding (MoU), which sets out roles, responsibilities,	This will strengthen mainstream provision, reduce reliance on statutory processes and specialist placements, and improve experiences and outcomes for children, young people and their families. Across the system, practitioners will have increased confidence in inclusive practice, supported by timely access to specialist advice and a more coordinated, needs-led approach to support delivery.

	workforce contributions, funding alignment and performance expectations across partners. Alternative provision which sits within this area benefits from a guidance document for education settings, however this will need further review to ensure consistent understanding and application across the educational landscape. The current delivery framework for Education Centres, including alternative provision, outreach, reintegration and monitoring, supports inclusion, reduces exclusions, builds system capacity, and has successfully enabled children to return to mainstream settings following supportive placements. This approach is aligned to the Experts at Hand model but requires development to extend the outreach and placement model still further. Delivery will include active market development, workforce expansion and new roles to increase capacity, alongside ongoing engagement with national government regarding workforce supply.	
SEND Sufficiency and Place Planning (Capital) **Core minimum requirements alignment** The SEND Sufficiency and Place Planning approach demonstrates alignment with the following core minimum requirements, setting out a clear, data-led strategy to increase local	**Strengths** Hampshire has an active and strategically aligned approach to capital and sufficiency planning. The Member approved Schools Places Plan 2026-2030 sets out the Council's statutory sufficiency duties and detailed forecasting methodology using population, housing and participation data. The plan	**Capital strategy and system alignment** The SEND capital programme is aligned with the wider SEND reform programme, including the Experts at Hand model, to increase local capacity and reduce reliance on specialist and out-of-area placements. This ensures that children and young people can access timely support within their local communities,

capacity, strengthen mainstream inclusion and reduce reliance on specialist and out-of-area provision: • CMR12 – Sufficiency pressures and demand trends • CMR13 – Increasing local capacity to reduce reliance on specialist provision • CMR14 – Collaboration with MATs on inclusion base development • CMR15 – Quality and alignment of inclusion bases to need • CMR16 – Effective use of existing school estate and opportunities from falling rolls • CMR17 – Planning for specialist places aligned to local need • CMR18 – Flexibility to respond to rurality and local variation • CMR19 – Impact of travel and transport on sufficiency planning • CMR25 – Early years sufficiency, including SEND provision	demonstrates how future SEND need is modelled and informs planning for additional provision; this is closely linked to the wider SEND reform programme. SEND provision is continually reviewed to assess county-wide need against available specialist places and to plan new provision where required. Requests have significantly increased in recent years, driven by rising numbers of children with Education, Health and Care Plans (EHCPs), with the greatest growth in need relating to social, emotional and mental health (SEMH) and autistic spectrum conditions (ASC) (SPP06, SPP09). Capital investment is being used to strengthen mainstream inclusion, create and expand specialist provision within mainstream settings (including inclusion specialist bases, currently Resourced Provisions), and reduce reliance on independent and out-of-area placements. The expectations of resourced provisions are supported through guidance documentation which clarifies the role of the provision and how they are best used to support inclusion. Planning is informed by demographic trends, EHCP growth and patterns of need, supported by an integrated sufficiency model and robust governance arrangements (SPP05; SPP05). There is a clear focus on improving local access to provision and addressing geographic gaps, ensuring children and young people can attend settings that meet their needs within their local communities. Use of high needs capital investment includes consideration of	supported by strengthened mainstream provision and earlier intervention. Hampshire will deliver a sustainable and responsive early years system where sufficiency is locally aligned to need, not just sufficiency at county level. Children in Early Years with SEND are supported earlier within mainstream provision. Specialist provision is targeted to children with the most complex need. Workforce capacity and confidence enable consistent inclusive practice across all childcare providers. The SEN Inclusion Fund (SENIF) strengthens mainstream inclusion, enabling early years providers to meet the needs of children with emerging and additional needs within universal provision wherever possible. Its use informs local data sets and has decreased as settings become more able to support need at the universal level. **Delivering local capacity through inclusion bases** Investment is prioritised towards the delivery and expansion of inclusion specialist bases within mainstream settings, making best use of existing accommodation, including opportunities created through falling rolls. These bases operate as targeted support within mainstream pathways, addressing geographic gaps in provision and enabling more needs to be met locally. Delivery of inclusion bases is undertaken in collaboration with MATs and education partners to identify suitable sites and plan provision aligned to local need. Inclusion support bases reduce escalation by providing earlier, structured support within mainstream settings,

	proposals for assistive technology to support inclusion, improve attendance and support mental health conditions. SEND transport demand (SPP07) is driven by a combination of: • CYP attending local mainstream schools • CYP placed in maintained special schools (1,934 students) • CYP in INMSS including out of area placements (1,728 students). Improvements in processes and contract management, alongside strengthened working with the statutory SEND team, have resulted in recent reductions in cost and travel time. **Early Years Sufficiency, Identification and Inclusion (0–5)** Hampshire has a strong Early Years childcare market, with 1,307 providers delivering funded entitlements and offering 32,858 places across the county. Data is collected to establish take up of Early Years entitlements for children with SEND and those with emerging needs. Gaps in take up are explored to ensure that there are no barriers to accessing places. Data is reported through the annual Childcare Sufficiency Assessment. In relation to SEND, all Early Years provision is expected to operate inclusively, supported through a graduated approach and reasonable adjustments.	reducing reliance on independent and out-of-area placements. They also contribute to more planned and predictable transport arrangements, reducing long travel times for children and young people. Clear and consistent frameworks for inclusion bases are embedded across the system, supported by a shared understanding of high-quality inclusive practice and the role of support bases as a mechanism to strengthen inclusion rather than replace mainstream provision. **Impact and outcomes** This approach delivers improved placement sufficiency, reducing reliance on high-cost independent and out-of-area provision and ensuring that more children and young people are supported within their local communities. Financial sustainability is strengthened through reduced placement costs, lower transport expenditure and better utilisation of existing provision, creating long-term cost avoidance and a more efficient and sustainable SEND system.

	Specialist SEND Early Years Places (UO01)
	Specialist SEND provision is delivered through a mixed model, combining inclusive mainstream provision and targeted specialist capacity:
	• Early Years SEND Hubs:
	  ○ 4 static hubs and 3 peripatetic hubs
	  ○ 137 core specialist places, with flexibility to support up to 229 children
	• SEN Inclusion Fund (SENIF):
	  ○ 428 providers supported
	  ○ 981 children supported
	  ○ Funding used to enable inclusive placements within mainstream settings
	• Portage Service:
	  ○ Supporting 1,060 children with additional needs through home-based early intervention
	
	This model enables most children with SEND to access mainstream provision with additional support, with specialist places reserved for children with the most complex needs.
	
	SEN Inclusion Fund (SENIF) is an enabler for access to mainstream early years childcare, however, overtime we would expect to see this decrease as the workforce becomes more confident in delivering OAP.
	
	Hampshire has strong relationships with its post 16 providers, employers and supported internships. Collated information from colleges details specialist and inclusion available, including pathways and provision types. This	

	informs understanding of support base capacity across the post 16 phase and informs future expansion plans. However, the use of this data to drive improvement and establish inclusion base capacity is limited and is a priority for area (SPP02). **Areas for Improvement (SPP09)** Despite this, current capacity and distribution of provision do not fully align with population growth or patterns of need, with identified gaps in provision for autism and social, emotional and mental health needs. Increasing complexity, particularly in ASC and SEMH, continues to place pressure on the system and contributes to reliance on specialist and independent placements (UO09 slides 19-24). Support pathways between phases, particularly into secondary provision and post 16, are not consistently strong, limiting progression and contributing to escalation. Delivery of capital programmes is constrained by available funding and pipeline sequencing, affecting the pace at which additional capacity can be created. The data held on post 16 provision (UO08) i.e. support bases is limited and requires baselining and a continuous cycle of monitoring and improvement. The use of data relating to transport, travel time and placement patterns is not yet fully embedded within capital planning decisions. In addition, triangulation of data, finance and sufficiency requires further development to	

	ensure investment is consistently aligned to need and delivers maximum impact across the system. Despite overall EY sufficiency, the following system gaps are clearly identified in 49 wards experiencing shortfalls. There is a need for an additional mainstream 1,053 places, a requirement for approximately 272 additional staff to meet demand, and inconsistent ability across providers to meet complex needs. Within Early Years there is increasing complexity of need (particularly SLCN, ASD, SEMH). This has increased pressure on Portage waiting lists and caseloads. Some children with SEN are not accessing full entitlements **What needs to change** Over the next year, capital investment will be further targeted to address identified gaps in provision, including the expansion and redesignation of inclusion bases and strengthening of mainstream capacity. This will support more children and young people to have their needs met within local mainstream settings, reducing reliance on specialist and out-of-area placements. Progression pathways across phases will be strengthened to support smoother transitions and reduce escalation, particularly into secondary and post-16 provision. The capital programme will be managed through a live pipeline and strengthened governance	

	arrangements to ensure ongoing alignment with emerging need. Investment will prioritise locality-based provision to reduce travel distances and improve access, supported by improved use of data on transport pressures, travel time and placement trends. This will be underpinned by strengthened system capability to integrate and triangulate data across sufficiency, finance and demand, creating a single, shared view of need. Impact on travel distances, journey times and reliance on out-of-area placements has been assessed and is used to inform capital planning decisions, with mitigations focused on increasing local provision and reducing travel requirements over time. Capital will continue to be used as an invest-to-change lever, aligned with the Universal Offer and Experts at Hand workstreams, to improve system sustainability and reduce reliance on high-cost placements over time. Variation in Early Years sufficiency needs to be addressed. This will be achieved through ongoing monitoring of ward-level and need sufficiency through the childcare sufficiency assessment, including three-year forecasts for all children and those with SEN. Targeted action is required to increase capacity in areas of identified shortfall through a	

	coordinated range of approaches. This includes the use of peripatetic delivery models to provide greater flexibility, alongside workforce development through Best Start Family Hubs and Experts at Hand. A structured training offer will support providers to build confidence and capability in inclusive practice, complemented by the deployment of Early Years Inclusion Practitioners to strengthen capacity within settings. This approach ensures that Early Years sufficiency is not only maintained at a system level but is responsive to local need. It supports greater inclusion within mainstream provision, enables earlier identification and intervention, and reduces the need for escalation to specialist provision over time. All professionals will be encouraged to demonstrate professional curiosity and identify families who have not yet engaged with early years settings. Post-16 inclusion base capacity and variation of support offered by colleges need to be addressed. This will be achieved through strengthening understanding of individual college offers and collation of the specialist and inclusion support available, including pathways and provision types. This will build understanding of capacity, geographic priorities, gaps, and inform any requirements for future expansion or new provision, with capital funding being used to strengthen mainstream post-16 inclusion, create and expand inclusion base provision, and reduce	

	reliance on independent and out-of-area placements.	
Partnership, Participation and Resolution (Governance and Co-Production – System leadership, partnership and accountability) **Core minimum requirements alignment** The Partnerships, Participation and Resolution approach demonstrates alignment with the following core minimum requirements, setting out a strong, integrated framework for partnership governance, co-production and system accountability that ensures effective early resolution, continuous improvement and a consistent experience for children, young people and families across the Local Area Partnership: • CMR31 – Partnership leadership and governance • CMR32 – Representation across early years, schools, MATs and further education • CMR33 – Shared data, dashboards and system insight • CMR34 – Engagement of all education providers and partners • CMR35 – Dispute resolution and escalation processes • CMR36 – Senior Responsible Officer (SRO) leadership and accountability • CMR37 – Co-production with Parent Carer Forum (PCF) • CMR38 – Voice of children and young people	**Strengths** Hampshire has a strong partnership foundation, with well-established governance through the Local Area Partnership Board, including embedded parent carer and young people's voice. There are effective working relationships across education, health and social care, supported by a strong track record of evidence-based impact evaluation to ensure resources are used effectively. Terms of refence for the board are well established and defines the system level governance, accountability and coproduction of the partnership. This partnership is further strengthened through the Transforming SEND continuous improvement work which clearly sets out how education is supported in developing practice and feeds into the governance of the Local Area Partnership for governance. The Hampshire Parent/Carer Network is formally integrated into governance arrangements and contributes directly to system self-evaluation, strategy development and improvement planning. Engagement activity across the partnership, including large-scale surveys and co-production of the reform plan, provides a strong evidence base and reflects meaningful participation from families and young people.	**Co-production and system leadership** Co-production is embedded and consistently applied at both strategic and operational levels, supported by structured partnership arrangements, systematic feedback loops and early resolution processes. Children, young people and families actively shape service design, delivery and evaluation across the Local Area Partnership, ensuring that services are responsive to need and grounded in lived experience. Co-production is underpinned by benchmarking against NHSE co-production guidance, with a baseline assessment of current practice used to identify strengths, gaps and priority areas for development. A co-produced co-production charter is embedded across the partnership, establishing clear expectations for equal partnership and shared decision-making with children, young people and families. Continuous improvement is supported through regular self-assessment against the NHSE co-production benchmark, with identified actions implemented to strengthen practice over time. System leadership is characterised by shared accountability across education (early years, school and post 16), health and social care partners, with co-production informing decision-making at all levels of the system. This results in more consistent and joined-up delivery, with earlier agreement with families reducing prolonged casework, minimising escalation and enabling more effective and sustainable support pathways.

• CMR39 – SENDIASS quality, independence and accessibility • CMR40 – Co-production benchmarking and continuous improvement (NHSE guidance) • CMR41 – Mediation arrangements and participation • CMR42 – Mediation monitoring, timeliness and effectiveness	The SEND Youth Forum has co-produced a Hampshire SEND Participation Guide which explains how participation with Children & Young People works, including Lundy Model, Hart's Ladder, and practical engagement approaches. This is due to be launched across the partnership in the coming months. Mediation and dispute resolution arrangements are well embedded within a wider early resolution system, with clear governance structures and generally positive outcomes. Mediation is delivered through an independently commissioned provider under the Southeast Mediation Group Framework, with processes in place to support the participation of both parent and children and young people. Learning from mediation and dispute matters is used to inform service improvements, workforce development and preventative system change (PPR01). SENDIASS plays a central role in supporting parents, carers and young people to understand and navigate the SEND system, providing impartial, confidential and accessible information and advice. The service is commissioned from an independent external provider and operates with clear separation, supported by independent line management, supervision arrangements and a published impartiality policy (PPR02). The service operates in line with national SENDIASS minimum standards, including requirements for confidentiality, impartiality, accessibility and	A single Senior Responsible Officer (SRO) provides overall leadership and accountability for SEND reform across the Local Area Partnership, ensuring coherent delivery and oversight across all workstreams. Together, this delivers improved confidence and trust in the SEND system among children, young people and families by ensuring shared accountability across every part of the system. **Data, performance and system insight** Shared, partnership-wide dashboards, aligned data definitions and improved data quality enable transparent management of performance across the Local Area Partnership, including mediation and resolution (PPR01), forecasting and evaluation. This provides a consistent, shared view of need and performance, enabling partners to identify variation, target support effectively and drive continuous system improvement. Investment in data systems and analytics supports accurate demand modelling, financial forecasting and resource allocation through a strengthened DSG management approach. This ensures that resources are aligned to impact and outcomes, enabling earlier intervention, reducing inefficiencies and improving outcomes and experience for children, young people and their families. The Local Offer is shaped by and for children, young people and families, and forms part of this data and insight system by providing accessible, transparent information on services and support. It also generates

	accountability, and is subject to structured quality assurance through contract monitoring and multi-agency steering group. The Local Offer is central to information sharing and signposting for families. Significant improvements have been made to user experience and engagement, including the successful launch of a redesigned platform supported by Local Offer engagement events. Hampshire devolved area has been finalised, and we begin to work and plan towards the new unitary model of LGR (Local Government Reorganisation). **Areas for Improvement** Despite these strengths, partnership arrangements are not yet consistently translating into a predictable and joined-up experience for families. Co-production, while structurally embedded, is not yet consistently applied to service design and iterative improvement. Periods of high demand have impacted the timeliness of mediation processes, and performance is currently below target, with 19-32% of cases completed within 30 days against a 90% target (Q3 Global Mediation Data). Whilst a strong volume of data is available, inconsistencies in quality, alignment and shared definitions limit its use for system-wide learning.	user insight and feedback that contributes to ongoing service improvement and co-production across the partnership. **SENDIASS and system learning** SENDIASS insight is systematically integrated into system learning and improvement across the Local Area Partnership. Data and feedback from SENDIASS are routinely used to identify emerging themes and trends, inform strategic planning and decision-making, and shape service development and improvement. As a trusted and independent service, SENDIASS provides a unique and impartial perspective on family experience, ensuring that the views of parents, carers and children and young people are clearly represented within system leadership and decision-making. This insight contributes directly to co-production, strengthens understanding of system pressures, and supports a continuous feedback loop, ensuring that services are responsive, inclusive and aligned to the needs of children, young people and families. **Mediation and early resolution** (PPR01) Mediation and early resolution operate as an integrated, partnership-wide system, supporting the timely and effective resolution of issues at the earliest possible stage. Processes are designed to incorporate and reflect the voices of both parents and children and young people, ensuring that participation is meaningful and that views directly inform outcomes.

	Learning from mediation, complaints and SENDIASS is not yet routinely integrated, and the sharing of insight across partners is inconsistent. Cross-partner data alignment is not fully established, with variation in access, definitions, and data literacy, meaning a single, shared system view is not yet consistently realised. There is also scope for SENDIASS to have a stronger and more systematic influence on strategic decision-making and to further strengthen engagement with children, young people and families across the partnership. **What needs to change** Over the next year, the partnership will strengthen the integration of lived experience, mediation and resolution data into system improvement processes, ensuring that insights from mediation, complaints, SENDIASS and participation activity are consistently used to inform decision-making and drive improvement. Performance monitoring across mediation and early resolution will be strengthened, with clearer oversight of timeliness, resolution rates and effectiveness to support accountability and service improvement. Digital optimisation will simplify and standardise parent journeys, improve communication and increase transparency of information (PPR06). Work will also focus on improving cross-partner data alignment, with shared reporting and data	Performance is consistently monitored through key indicators including timeliness, resolution rates and effectiveness, providing clear accountability and enabling continuous improvement. This ensures that mediation is responsive to demand and delivers a high-quality experience for families. Mediation is part of a wider early resolution approach, where issues are addressed proactively through professional dialogue, Local Delivery Team input and partnership working prior to escalation. Learning from mediation and early resolution is systematically captured and used to inform service improvement, workforce development and preventative system change across the Local Area Partnership. The Partnership will have aligned its models to the new unitaries, and SEN Reform planning work will be embedded seamlessly and is operational across the new areas. **Outcomes and impact** A mature, partnership-wide approach to governance and co-production delivers a fully integrated SEND system, where shared accountability and lived experience consistently shape decision-making and service delivery. Early resolution and strengthened mediation reduce escalation and reliance on formal processes, improving experiences for children, young people and families while enabling timely, sustainable support pathways.

	quality, alongside building data literacy across the system to enable a consistent shared view of need and performance. Co-production will be embedded more consistently across design, delivery and evaluation, ensuring that children, young people and families are actively shaping services and that partnership arrangements deliver a predictable, responsive and high-quality experience.	Robust shared data and system insight ensure resources are targeted effectively, driving improved outcomes, increased parental confidence, and a financially sustainable SEND system.
	Baseline – Where We Are Now (narrative) **1. Improved educational outcomes for children and young people with SEND** (aligned to Goal 1) • Early Years outcomes (GLD): 21.5% (2024/25) • Key Stage 2 attainment (RWM): 24.6% (2024/25) • Key Stage 4 attainment (Attainment 8): 31.9% (2024/25) • Young people with SEND (EHCP) not in education, employment or training, or with unknown destination (Year 12–13 participation): 10.5% (2024/25) **2. Improved attendance for children and young people with SEND** (aligned to Goal 1) • Attendance rates for children and young people with SEND: 90.9% (2024/25) • Children and young people with SEND not in education: 7% (2025)	**Three-year future state** **1. Improved educational outcomes for children and young people with SEND** (aligned to Goal 1) • Early Years outcomes (GLD): increase from 21.5% to at least 23.9% • Key Stage 2 attainment (RWM): increase from 24.6% to at least 28.6% • Key Stage 4 attainment (Attainment 8): increase from 31.9% to at least 33.5% • Young people with SEND (EHCP) not in education, employment or training, or with unknown destination (Year 12-13 participation): remains broadly stable at 10.5%, despite increasing cohort size, with improvement expected beyond the plan period as early intervention and PfA pathways become embedded **2. Improved attendance for children and young people with SEND** (aligned to Goal 1) • Attendance rates for children and young people with SEND: increase from 90.9% to at least 92%

	3. Reduced suspensions and exclusions of children and young people with SEND (aligned to Goal 1) • Suspensions (rate per 100 pupils): 32.6 (2024/25) • Permanent exclusions: 19% (2024/25) **4. Increased parent, carer and young person confidence in the SEND system** (aligned to Goal 2) • Parent/carers and children/young people report feeling supported and child listened to with SEN Support: 37.1% (HPCN 2025-26 survey). • Parent/carers and children/young people report feeling supported and child listened to with an EHCP: 56.1% (HPCN 2025-26 survey). • Mediation cases taking place within statutory timescales: 32% (2025/26 Global Mediation data). • Children and young people's reported happiness in education settings: mean score 58.1% (HPCN 2025-26 survey). **5. Reduced demand pressures and improved financial sustainability of the SEND system** (aligned to Goal 3) • Number of children and young people with EHCPs: 19,916 (2026) • EHCNA requests – children aged under 5 (EY): 1,048 (2025) • EHCNA requests – children aged 5-10: 1,996 (2025)	• Children and young people with SEND not in education: reduces from 7% to 6% **3. Reduced suspensions and exclusions of children and young people with SEND** (aligned to Goal 1) • Suspensions (rate per 100 pupils): reduce from 32.6 to 29.4 • Permanent exclusions: reduce from 19% to 16% **4. Increased parent, carer and young person confidence in the SEND system** (aligned to Goal 2) • Parent/carers and children/young people report feeling supported and child listened to with SEN Support: increase from 37.1% to 67.1% • Parent/carers and children/young people report feeling supported and child listened to with an EHCP: increase from 56.1% to 86.1% • Mediation cases taking place within statutory timescales: increase from 32% to 90% • Children and young people's reported happiness in education settings: mean score increases from 58.1% to 76%. **5. Reduced demand pressures and improved financial sustainability of the SEND system** (aligned to Goal 3) • Number of children and young people with EHCPs: increase from 19,916 to 25,210, reflecting national trends, but at a slower rate of growth than forecast due to improved early intervention and demand management. • EHCNA requests – aged under 5: increase from 1,048 to 1,233, reflecting ongoing request growth, but at a reduced rate compared to baseline

	• Children and young people with EHCPs placed in independent and non-maintained specialist settings: 8.4% (2025) • Children and young people supported through Education Otherwise Than at School (EOTAS) arrangements: 167 (2025) • Specialist place capacity: 7,285 (2025)	projections due to improved early identification and support • EHCNA requests – aged 5-10: increase from 1,996 to approximately 2,349, with slower growth than forecast as a greater proportion of needs are met at SEN Support • Children and young people with EHCPs placed in independent non-maintained specialist settings: remains broadly stable from 8.4% to 8.4%, reflecting increased local capacity offsetting demand growth • Children and young people supported through Education Otherwise Than at School (EOTAS) arrangements: increases modestly from 167 to 180, with growth stabilising over time as system capacity improves, and longer-term reductions expected beyond the plan period • Specialist place capacity: increase from 7,285 to 9,206 **Taken together, these success measures demonstrate a shift towards earlier intervention, improved outcomes and strengthened inclusive practice, reducing reliance on high-cost provision and delivering cost avoidance and long-term financial sustainability within the High Needs system.**

INSERT DOCUMENT UPLOAD LINK MATURITY MATRIX AS ATTACHEMENT IN DOCUMENTS FILE.

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

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

Hampshire’s SEND reform strategy is to create a system where children and young people receive the right help earlier, closer to home, and within inclusive mainstream settings wherever possible. This requires strengthening everyday support, bringing in specialist expertise sooner, to support earlier identification and more consistent SEN Support, reducing escalation, and reserving specialist provision for those with the most complex needs (Goals 1–3).
Our local change story (PPR08) shows a system under sustained pressure. Complexity continues to rise, with increasing EHC requests, workforce capacity constraints across education, health and social care, and growing reliance on high-cost independent placements. While strong strategic leadership and co-production are in place through the LAPB, HPCN and SEND Youth Forum, our maturity assessment highlights too much variation in how support is delivered in practice, leading to inconsistent experiences for families.
We will address this by reducing variation through clearer expectations, stronger multi-agency working and better use of high-quality data and forecasting. Improved insight, alongside lived experience, will help identify gaps earlier and target support more effectively (Goals 1 and 2).

We will strengthen the Universal Offer and SEN Support across all settings, supported by workforce development and established partnerships. Experts at Hand will provide a significant expansion of Hampshire's early intervention and inclusion offer, by further developing its multidisciplinary approach, which builds capacity within education settings and strengthens support around children and young people at the earliest stage of need. Hampshire will achieve this through a phased programme of workforce growth and system development. Additional multidisciplinary capacity will be established within Local Delivery Teams, bringing together specialist expertise from education, educational psychology, SEND, speech and language, occupational therapy, mental health, family support and wider partners. Existing services will evolve from delivering support primarily through assessment, consultation and referral pathways towards a more integrated model focused on prevention, coaching, workforce development and collaborative problem-solving. Practitioners will work alongside education settings to build confidence, develop inclusive practice and strengthen local capacity to meet needs at the earliest opportunity. The long-term ambition is to create a

self-improving system in which specialists not only provide direct support where required, but also develop the confidence, skills and capability of the wider children's workforce.

At the same time, sufficiency planning will expand local provision, reducing reliance on out-of-area placements (Goals 1 and 3). Together, this will improve consistency, reduce escalation, and create a more inclusive, sustainable SEND system.

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

   INSERT DOCUMENT UPLOAD LINK Hampshire LAP Maturity Assessment Tool in DOCUMENT file.

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

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

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

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

KEY – how to read this table
Building block key

- Building block 1 = Strengthening inclusion across education settings.
- Building block 2 = Access to specialist support and local placements.
- Building block 3 = System leadership, local partnership collaboration and co-production.
- Building block 4 = Encouraging inclusive culture and behaviours.

Enabler key

- Capital = place planning, estates and invest-to-save programme delivery.
- Workforce = workforce supply, training/CPD, practice guidance and capability building.

- Data/Digital = dashboards, shared definitions, digital workflows and performance/impact tracking.
- Partnership, Participation & Resolution (PP&R) Enablers 1–4 = (1) Participation & Co-production; (2) Partnership working & system leadership; (3) Mediation & dispute resolution; (4) Data, insight & system learning.
- Sustainable Funding / Investment (critical dependency) = sufficient revenue and capital funding, long-term investment and financial sustainability of the system, including dependency on national funding.

Workstreams + linked enablers

- **WS1 Universal Offer:** Workforce; Data/digital
- **WS2 Experts at Hand (EAH):** Workforce; Data/digital; Sustainable funding / investment.
- **WS3 Sufficiency & Capital:** Capital; Data/digital (plus Workforce for standards/engagement) Sustainable Funding / Investment
- **WS4 Partnership, Participation & System Leadership / PP&R:** Workforce; Data/digital (plus PP&R Enablers 1–4)

Local roadmap for the next 3 years	**2026/27**	**2027/28**	**2028/29**
Overarching roadmap and delivery approach: This roadmap sets out a phased three-year delivery programme aligned to the Local Area Partnership's vision, providing a clear progression from establishing and standardising provision (Year 1), to scaling and embedding consistent practice (Year 2), and achieving a mature, sustainable system (Year 3). Activities across all workstreams are directly aligned to the future state, with each year setting out the key deliverables, milestones and target trajectories required to deliver system reform. This ensures that delivery is measurable, realistic and focused on outcomes, with clear alignment between activity, impact and the three-year vision.			
WS1 - Universal Offer – establish, scale and embed inclusive practice. (Enablers: Workforce; Data/Digital)	Establish and standardise the Universal Offer (0-25) (Building blocks 1 & 4) **Universal Offer design, co-production and governance** Establish shared Universal Offer principles with HIOW ICB and partners, providing a stable foundation for delivery within the context of Local Government	Embed, extend and strengthen inclusive practice at scale (Building blocks 1 & 4) **Universal Offer design, co-production and governance** Formalise and embed governance and delivery arrangements within new unitary structures, ensuring continuity, clear accountability and sustained partnership ownership of the Universal Offer.	Universal Offer as business-as-usual and continuous improvement (Building blocks 1 & 4) **Universal Offer design, co-production and governance** Governance arrangements for the Universal Offer are fully embedded within LGR structures, with clear roles, responsibilities and sustained partnership accountability across the 0–25 system.

Core minimum requirements alignment: The Universal Offer roadmap demonstrates alignment with the following core minimum requirements, setting out a co-produced, consistent and inclusive 0–25 framework that strengthens early intervention, supports clear pathways across phases and reduces escalation across the local system: • CMR20 – Partnership-wide Universal Offer agreement • CMR21 – Engagement of MATs and Parent Carer Forum (PCF)	Reorganisation (LGR), leading to a formal partnership-wide agreement. This establishes a formally agreed, partnership-wide Universal Offer framework, underpinned by shared expectations for inclusive practice across all providers. Work with a steering group, including Parent Carer Forum, SENDIASS, early years, maintained schools, MATs and post-16 providers, to co-produce the partnership-wide Universal Offer (0–25), including clear OAP expectations. Building on existing early years and schools work, priority will focus on extending consistency into post-16 and strengthening support for high-incidence needs (Autism, SEMH and SLCN), ensuring consistent access and pathways across all phases. The co-produced Universal Offer will embed collective responsibility for inclusive practice across all providers and will be formally signed off by the Local Area Partnership Board. This includes formal representation from early years, schools, multi-academy	**Inclusive practice and Ordinarily Available Provision** Extend the co-produced Universal Offer into post-16 provision, including clear expectations for support bases and practical guidance for delivery. This will involve implementing a clearly identified trajectory from the baseline, ensuring coproduced guidance is applicable to the type of post 16 pathway / setting and that input is first prioritised to those areas with less access to current specialist resource or where data demonstrates highest trajectory of need, which creates an increased risk of courses not being completed. Embed Universal Offer expectations through locality-based implementation, targeted training and quality assurance, ensuring consistent application across early years, schools and post-16 settings. **Inclusion capacity and school/system practice** Strengthen inclusion base networks, including secondary provision, and implement consistent data collection to ensure use is targeted, time-limited and reduces inappropriate escalation. (Building block 2, enabled by Data & Digital).	**Inclusive practice and Ordinarily Available Provision** The Universal Offer is fully embedded across early years, schools and post-16, with stable OAP expectations, consistent application of the graduated approach and routine quality assurance. A co-produced total communication approach is embedded across settings where appropriate, supported by refreshed resources and ongoing training. **Inclusion capacity and school/system practice** Inclusion bases operate as an integrated and consistently governed part of the continuum, with clear entry and exit pathways and evidence of sustained reduction in escalation to specialist provision. Post-16 pathways are consistently understood and applied, maintaining clear routes into education, training, employment and supported internships, with continuity into adulthood. **Data, quality assurance and continuous improvement**

• CMR22 – Strengthening early intervention • CMR23 – Meeting common areas of need • CMR24 – Reducing escalation into higher-cost provision • CMR26 – Early years identification and intervention • CMR27 – Early years to primary transition • CMR28 – Post-16 pathways • CMR29 – Pathways into and out of post-16 provision	trusts and post-16 providers within partnership governance arrangements. (Building block 1) **Inclusive practice and Ordinarily Available Provision** Post-16 OAP and SEN Support guidance co-produced, published and disseminated, with Universal Offer expectations established for all post-16 and out-of-area providers so the Universal Offer is consistently applied beyond school age (Building Blocks 1 & 4) Inclusive Early Years, Schools and Post 16 funds funding will be allocated with clear guidance aligned to the Universal Offer, supporting use for effective support and support base expansion. The Universal Offer will be implemented consistently across early years, schools and post-16, providing a predictable baseline of support, reducing escalation to statutory assessment and stabilising EHCP growth through consistent use of the graduated approach and inclusion bases. This will equip mainstream settings to meet common needs (SLCN,	Review and refine post-16 pathways to maintain clear routes into education, training, employment and supported internships, ensuring continuity into adulthood. OAP fully implemented across post-16 settings, with quality assurance arrangements established. **Implementation, training and workforce development** Scale delivery of the Universal Offer across all localities and phases, ensuring equitable access, increased uptake and reduced variation in SEN Support practice. **Data, quality assurance and continuous improvement** Use implementation learning, data and family feedback to refresh and co-produce the Universal Offer annually, ensuring it remains responsive to need and is consistently applied. Increase active use of the Hampshire Approach to Inclusion and associated resources, using insight to inform targeted workforce development and sufficiency planning across early years and post-16 provision. **System impact and demand management**	A mature, partnership-wide data, quality assurance and continuous improvement cycle is embedded, with performance data, co-production and lived experience informing ongoing refinement of the Universal Offer. The Universal Offer is refreshed annually to reflect outcomes, emerging need and system learning. **System impact and demand management** Reduced requests for EHC needs assessment is sustained through embedded inclusive practice, lowering long-term High Needs Block cost pressures and supporting DSG recovery. **Year 3 milestone:** The Universal Offer (0–25) is fully embedded as business as usual across the local area, with stable and consistently applied OAP and the graduated approach across all phases, supported by an embedded quality assurance, data and continuous improvement cycle, including annual co-produced review and refresh, and sustained appropriate use of the Universal Offer within the wider continuum of support. **Universal target trajectory:**

	autism, SEMH) through evidence-based training, consistent pathways and earlier support, increasing mainstream capacity and reducing reliance on specialist provision. This strengthens early intervention within mainstream settings, preventing escalation of need and reducing requests for statutory assessment and specialist provision. **Inclusion capacity and school/system practice** Co-produce, with Parent Carer Forums, children and young people, schools and MATs, guidance for inclusion bases aligned to Tier 1 AP, Experts at Hand and the graduated approach. Inclusion bases will operate to clear co-produced standards, aligned to local need and SEND demand, ensuring consistency across the system. (Building blocks 1 & 2) (SPP04) Inclusion bases will support a mainstream-first system, provide earlier targeted support and reduce reliance on independent and out-of-area placement. Where specialist provision is required, this will be based on clear evidence that needs cannot be met through	Review and refine financial modelling to demonstrate reduced rates of new EHCPs through embedded inclusive practice, lowering new High Needs commitments and improving long-term sustainability. **Year 2 milestone:** The co-produced Universal Offer (0–25), including OAP, post-16 guidance and inclusion base principles, is consistently implemented across localities and phases, supported by targeted training, quality assurance and shared data, with demonstrable uptake and active use across education settings and evidence of more consistent practice aligned to the graduated approach. **Universal target trajectory:** • Training and support offer accessed by 75% of school phase education settings and 30% of early years and post-16 settings • Hampshire Approach to Inclusion sign up (and implementation of guidance) reaches 60% of education settings • Reduction in SENDIASS contacts relating to SEN Support pathways to 12% • 60% of settings reporting confidence in the Universal Offer (via Hampshire Approach to Inclusion audit)	• Training and support offer accessed by 95% of school phase education settings and 75% of early years and post-16 settings • Hampshire Approach to Inclusion sign up (and implementation of guidance) reaches 90% of education settings • Reduction in SENDIASS contacts relating to SEN Support pathways to 10% • 70% of settings reporting confidence in the Universal Offer (via Hampshire Approach to Inclusion audit)

	strengthened mainstream provision and inclusion bases. To facilitate growth in existing support bases, this will include best practice for staffing models, use of available space and suggested effective use of SEN funding streams. Post-16 pathways will support clear and coordinated routes into education, training, employment and supported internships, aligned to Preparing for Adulthood outcomes. Effective transitions into and out of post-16 provision will ensure continuity of support and increase participation and retention in education, employment and training. There is specific coproduced guidance for post-16 on OAP alongside good practice models and clearly defined expectations for inclusive practice. **Implementation, training and workforce development** Strengthen take-up of the training and support offer and co-produce consistent core training pathways (UO2), including e-learning, person-centred planning and the SEN Support line. Data will be used systematically to target settings with lower uptake or weaker SEN Support outcomes across early		

	years, schools and post-16 (Building blocks 1 & 4, enabled by Data & Digital) Launch the Universal Offer with settings, starting with early years and primary, supporting transition and rapid improvement in SEN Support practice, including co-produced parent workshops to improve shared understanding. This phased approach will strengthen workforce capability, improve SEN Support quality and consistency, and support earlier intervention, reducing escalation over time. All training and implementation activity is supported by clear delivery plans and is achievable within existing workforce capacity and available resources. **Data, quality assurance and continuous improvement** Establish shared, partnership-wide data and reporting dashboards to track uptake, variation in SEN Support and alignment with Universal Offer expectations, enabling partners to identify variation and target improvement.		

	Data will be used systematically to inform QA, workforce development and service improvement, creating a continuous feedback loop between performance, lived experience and co-production. This will improve SEN Support quality and consistency and support ongoing refinement of the Universal Offer. For Post 16 data existing post-16 provision, support bases and specialist bases will be mapped that identifies variation and gaps across providers, need types and districts. A full audit will have been undertaken of High Needs Spend and TSEND workstreams to identify system improvements, value for money and efficiencies. **System impact and demand management** Increase Hampshire Approach to Inclusion (UO03) sign-up and align the Local Offer so families can access support early and understand pathways for common needs. This will embed collective responsibility for inclusion across		

	providers and reduce variation across localities. Improved early access and confidence in mainstream provision will reduce escalation to statutory assessment and demand for specialist and out-of-area placements. This will contribute to a reduction in new EHCP requests and lower reliance on specialist and out-of-area placements over time. **Year 1 Milestone:** A fully co-produced, partnership-wide Universal Offer (0–25), including clear OAP, post-16 guidance and inclusion base principles, is formally agreed and signed off by the Local Authority, Integrated Care Board, education representatives (including MATs), and the Parent Carer Forum, and is made digitally accessible to all education settings through the Local Offer, with defined expectations aligned to the graduated approach. Strengthen targeting of funding to children with emerging needs, settings with lower confidence or capacity. Align SENIF more closely with Best Start Family Hubs, early		

	identification processes and multi-disciplinary support. **Universal target trajectory:** (showing how improvements in universal provision are expected to lead to better outcomes, attendance and inclusion, and reduced escalation to statutory services, with an indirect contribution to parent, carer and young person confidence) • Training and support offer accessed by 50% of school phase education settings • Uptake on Early Years and Post-16 provider training increases by 25% from the 2026 baseline. • Hampshire Approach to Inclusion sign up (and implementation of guidance) reaches 30% of education settings • Reduction in SENDIASS contacts relating to SEN Support pathways from 18% to 15% • 50% of settings reporting confidence in the Universal Offer (via Hampshire Approach to Inclusion audit)		
WS1.2 – Universal to Experts at Hand – building capacity and sufficiency through	Establish and standardise the Universal to Experts at Hand training pathway (0-25) (UO07) (Building blocks 1, 2 & 4) By the end of 2026/27, a co-produced Universal to Experts at	Scale and strengthen the Universal to Experts at Hand training pathway (0–25) (Building blocks 1, 2 & 4) By the end of 2027/28, the Universal to Experts at Hand training pathway is consistently implemented across all	Embed the Universal to Experts at Hand training pathway as business-as-usual (0-25) (Building blocks 1, 2 & 4) By the end of 2028/29, the Universal to Experts at Hand training pathway is

teaching and learning. (Enablers: Workforce; Data/Digital) **(EAH01)** **Core minimum requirements alignment:** The Universal to Experts at Hand pathway demonstrates alignment with the following core minimum requirements, setting out a clear, phased and equitable approach to progressing from universal provision to targeted and specialist support, strengthening early intervention and ensuring consistent access to multi-	Hand training pathway is clearly defined and understood across the system, providing a structured progression from Universal Offer training to targeted and specialist support through Experts at Hand. This strengthens the graduated approach across all phases and ensures consistent access to support. This provides a clear, structured pathway from universal provision through targeted support to specialist intervention, ensuring timely access to appropriate expertise based on assessed need. Equitable access is established across early years, schools and post-16 providers, supported by tracking and oversight to ensure support is not disproportionately accessed by more proactive settings and is aligned to identified need. Access to support will be monitored and managed through agreed thresholds and referral routes, ensuring equitable and needs-led access across all settings. **Early years / Best start in life** Map and align the roles of early years inclusion practitioners, Best	phases and localities, supporting high-quality teaching and learning and strengthening the graduated approach. Training is embedded in practice, with improved consistency, stronger transitions between phases and more targeted use of specialist support. **Early years / Best start in life** Review Year 1 implementation to ensure sufficient availability of early years provision, including specialist placements, aligned to local need. Use Best Start Family Hubs and early help services to scale consistent early years delivery, embedding shared approaches to early intervention and strengthening transitions into primary education. Ensure consistent access to early years training and support across localities, reducing variation and aligning delivery with the Universal Offer and Experts at Hand model. **Best Start Family Hubs** Continue the phased expansion of the Best Start Family Hub network in line with Hampshire's Best Start in Life programme (2027 onwards). Deliver workforce development, CPD and inclusion training for early years practitioners through Services for Young	fully embedded and operating as business-as-usual across all phases, with consistent application of the graduated approach and strong transitions between early years, schools and post-16 settings. Training is embedded within practice, driving sustained improvements in teaching, inclusion and outcomes. **Early years / Best start in life** Review Year 2 implementation to ensure sustained sufficiency and capacity across early years provision. Early years delivery is consistent across localities, supported by aligned workforce capability, ensuring equitable access to training, early intervention and improved outcomes. Early years delivery is consistent across localities, with sustained sufficiency and capacity supporting equitable access and reduced variation in outcomes. Best Start Family Hubs and early help services are fully integrated within the pathway, supporting consistent early identification and transitions into primary education. **Best Start Family Hubs**

disciplinary expertise across the system: • CMR1 – Delivery approach and rationale • CMR3 – Enhancing access to specialist support • CMR4 – Alignment with graduated and tiered Alternative Provision model • CMR7 – Timely access to specialist support • CMR8 – Implementation planning and trajectory • CMR11 – Equitable access to support • CMR22 – Strengthening early intervention	Start Family Hubs, Services for Young Children and specialist teams to create a coordinated pathway from universal training into Experts at Hand support. This ensures consistent early identification, shared approaches to intervention and stronger transitions from early years into primary education, supporting earlier intervention and reducing escalation of need through timely access to appropriate support (UO02). Early years sufficiency gaps (UO01) will be actively managed through data-led monitoring of local provision, targeted expansion in areas of shortage, workforce development, and the deployment of Best Start Inclusion Practitioners and multi-disciplinary support to strengthen inclusive capacity within mainstream settings. Mainstream settings will be monitored to ensure that families are able to access their entitlements to ensure that barriers are not being put in place. Low or no referral rates of SEND children from individual settings will be followed up. **Best Start Family Hubs**	Children to strengthen early identification and support for children with emerging SEND needs (ongoing). Deliver Local Offer events, parent learning opportunities and SEND information sessions through Best Start Family Hubs (ongoing). **Schools** Review Year 1 implementation to ensure locality-based delivery models are effective and aligned to need. Scale delivery of the Universal to Experts at Hand pathway across all school phases, ensuring consistent access and reducing variation between settings and localities. Strengthen the use of Experts at Hand through coaching and targeted support, embedding learning in classroom practice and intervening where impact is not yet secure. Strengthen preparation for adulthood through improved transition planning, ensuring consistent pathways into post-16 provision aligned to individual needs. **Post 16** Review Year 1 implementation to ensure pathways are suitable and responsive to local demand.	Continue the phased expansion of the Best Start Family Hub network in line with Hampshire's Best Start in Life programme (2027 onwards). Deliver workforce development, CPD and inclusion training for early years practitioners through Services for Young Children to strengthen early identification and support for children with emerging SEND needs (ongoing). Deliver Local Offer events, parent learning opportunities and SEND information sessions through Best Start Family Hubs (ongoing). **Schools** Review of year 2 work to ensure suitability and appropriately placed locality models. Universal to Experts at Hand pathways are consistently applied across all school settings, with targeted deployment of Experts at Hand support to maximise impact and build sustained capacity in line with identified need. Inclusive practice, preparation for adulthood and transition pathways are embedded across phases, with a shared system understanding and consistent application. **Post 16**

• CMR24 – Reducing escalation into higher-cost provision • CMR26 – Early years identification and intervention • CMR27 – Early years to primary transition • CMR28 – Post-16 pathways • CMR29 – Pathways into and out of post-16 provision	Open Phase 2 Best Start Family Hubs in Andover, Gosport and East Hants, extending access to integrated early intervention, family support and SEND inclusion services (Autumn 2026). Recruit and induct Best Start Inclusion Practitioners (BSIPs) across all operational Best Start Family Hubs (Autumn 2026). Launch the Best Start Family Hub SEND offer, providing early identification, support for inclusive practice, family guidance and navigation to specialist SEND services (Autumn/Winter 2026). Establish the Best Start Outreach Team to strengthen engagement with children, families and early years settings (Autumn/Winter 2026). Continue the phased expansion of the Best Start Family Hub network in line with Hampshire's Best Start in Life programme (2027 onwards). Deliver workforce development, CPD and inclusion training for early years practitioners through Services for Young Children to strengthen early identification and support for children with emerging SEND needs (ongoing). Deliver Local Offer events, parent learning opportunities and SEND	Embed and extend Universal to Experts at Hand pathways across post-16 providers, including out-of-area settings, ensuring consistent access to training and support. Strengthen sufficiency and capacity through ongoing review of provision and pathways, ensuring equitable access aligned to need. Refine post-16 training using best practice, strengthening workforce capability and consistency of delivery, and supporting progression into education, training and employment. **Year 2 Milestone:** All Hampshire settings understand and can access a consistent Universal to Experts at Hand pathway, with increasing application in practice and evidence of improved transitions between phases. **Universal to Experts at Hand target trajectory:** • Universal training and support offer accessed by 75% of school phase education settings and 30% of early years and post-16 settings • Schools and settings accessing Experts at Hand support reaches at least 75%	Review Year 2 implementation to ensure pathways remain responsive to local demand. Post-16 pathways are fully embedded, with consistent access to Universal and Experts at Hand support across all providers, including out-of-area settings. Sufficiency and capacity are maintained through continuous monitoring, ensuring equitable access and sustained placement outcomes. Training and support are embedded within post-16 practice, strengthening workforce capability and supporting transition, progression and sustained outcomes into education, training and employment. **Commissioning and system maturity** Experts at Hand delivery is effectively commissioned and coordinated across partners, including cross-border collaboration, ensuring all Hampshire learners can access consistent support regardless of where they are educated. **Year 3 Milestone:** The Universal to Experts at Hand pathway (0–25) is fully embedded and operating as business-as-usual across

	information sessions through Best Start Family Hubs (ongoing). Embed alignment between Best Start Family Hubs, Services for Young Children and Experts at Hand to create a coordinated pathway of support for children with emerging SEND needs (ongoing). Develop locality outreach and inclusion support to improve access to advice, guidance and early intervention for families and settings (ongoing). **Schools** Map and define how Universal Offer training transitions into Experts at Hand support across tiers, establishing a shared language, clear access routes and alignment across services. Begin implementation of training pathways that support transitions between phases, ensuring continuity of support, consistent SEN Support practice and effective information sharing. This reduces duplication across services and ensures support is coordinated, timely and aligned to the graduated approach. **Post 16**	• Children and young people identified for targeted support accessing appropriate provision increases to at least 65%	all phases, with consistent access, strong transitions and demonstrable impact on teaching, inclusion and outcomes. Targeted support is deployed based on need and impact measures, with evidence of improved transitions, placement stability and reintegration outcomes. **Universal to Experts at Hand target trajectory:** • Universal training and support offer accessed by 95% of school phase education settings and 75% of early years and post-16 settings • Schools and settings accessing Experts at Hand support reaches 100% (business-as-usual) • Children and young people identified for targeted support accessing appropriate provision increases to at least 75%, with improved reintegration outcomes

	Co-produce clear Universal to Experts at Hand pathways for post-16 settings, ensuring consistent access to training and support beyond school age, including for out-of-area providers. Clear referral routes identified and shared to ensure access. Identify sufficiency and capacity needs within the post-16 sector to ensure pathways are appropriate, equitable and aligned to need levels in their locality. This ensures that provision and pathways are responsive to local need and support sufficient, accessible post-16 opportunities. Develop teaching and learning-focused training aligned to the post-16 context, ensuring consistency with the wider Universal Offer and supporting progression into adulthood. This supports progression into education, training and employment and ensures continuity of support into adulthood. Implementation is supported by clear delivery plans, workforce capacity and governance oversight, ensuring the pathway is achievable within available resources.		

	Year 1 Milestone: All Hampshire settings, regardless of phase, understand and can access a consistent Universal to Experts at Hand training pathway, strengthening teaching and learning, building workforce capacity and supporting system-wide improvement, as well as supporting consistent, needs-led access to specialist support across the system. **Universal to Experts at Hand target trajectory:** • Universal training and support offer accessed by 50% of school phase education settings • Schools and settings accessing Experts at Hand support reaches at least 50% • Children and young people identified for targeted support accessing appropriate provision (including AP Tier 1/2 and multi-disciplinary pathways) reaches at least 50%		
WS2 - Experts at Hand (Enablers: Workforce; Data/Digital; Sustainable	Establish and deliver the Experts at Hand model (EAH06) (Building blocks 1-4) Year 1 implementation focuses on establishing Local Delivery Teams across all districts, deploying a	Strengthen, scale and align delivery (Building blocks 1-4) By the end of 2027/28, Experts at Hand is consistently embedded across all districts, with strengthened coordination, expanded workforce capacity and clear	System maturity, statutory alignment and business-as-usual (Building blocks 2, 3 & 4) By the end of 2028/29, Experts at Hand operates as Hampshire's default SEND delivery model, fully aligned to

Funding / Investment) **Core minimum requirements alignment:** The Experts at Hand roadmap demonstrates alignment with the following core minimum requirements, setting out a clear, partnership-based model for early and targeted multi-disciplinary support that strengthens early intervention, improves access to specialist expertise and reduces reliance on statutory and high-cost provision: • CMR1 – Delivery approach and rationale	strengthened multi-disciplinary workforce and embedding consistent access to early advice, consultation and targeted support. By the end of 2026/27, Experts at Hand is fully operational across all districts as Hampshire's agreed delivery and workforce model for early and targeted SEND support, embedded within the graduated response and aligned to the three-tier Alternative Provision (AP) model. This provides a clear pathway from universal provision to targeted and specialist multi-disciplinary support, enabling earlier intervention, reducing escalation to statutory pathways and improving outcomes, attendance and inclusion. **Universal and Targeted Delivery Model (Steps 1 and 2 live)** A co-produced, countywide universal CPD and practice development offer is delivered locally through district clusters, Best Start Family Hubs, community hubs, Education Centres and special school outreach acting as Tier 1 and Tier 2 AP.	evidence of impact on early intervention and prevention of escalation. This supports a more flexible three-tier approach to Alternative Provision, maintaining a strong focus on reintegration into mainstream education. Scaling delivery increases the proportion of children and young people accessing targeted and multi-disciplinary support earlier, strengthening inclusive practice and contributing to improved outcomes and reduced demand for statutory services. **Strengthening Inclusive Practice and Early Support** Learning from Year 1 is used to refine and strengthen consultation-led practice and practice development, ensuring consistent inclusive delivery across all districts. Universal CPD and school cluster working continue at scale, with increased focus on early identification, early response and cross-phase collaboration, and more consistent application of the three tiers of AP, prioritising Tier 1 and Tier 2 to sustain placements and support system-wide improvement. Targeted teaching and learning support delivered through SEND Advisers.	statutory processes and embedded across education, health and social care. This mature, integrated system delivers consistent early and targeted intervention at scale, ensuring that most children and young people receive the right support at the earliest stage. As a result, needs are increasingly met within mainstream provision, reducing escalation and delivering sustained improvements in inclusion, outcomes and long-term system sustainability. **Sustained Inclusive Practice at Scale** Learning from Years 1 and 2 is consolidated, with inclusive practice consistently embedded across mainstream settings and reduced reliance on programme-based support. Universal, targeted and intensive support operate as a single, integrated continuum, with regular Local Delivery Team oversight ensuring consistent access, impact and application across all settings. Data is used routinely to monitor performance and identify where additional support or challenge is required to sustain and further embed inclusive practice. This is informed by a range of system

• CMR2 – Partnership approach to model design • CMR3 – Enhancing access to specialist support • CMR4 – Alternative Provision aligned to the three-tier model • CMR5 – Approach to Alternative Provision capacity • CMR6 – Commissioning of outreach from specialist providers • CMR7 – Timely access to specialist health and education professionals • CMR8 – Implementation planning and trajectory	Delivery is needs-led and data-informed, with 2026/27 priorities including SEN Support, inclusive classroom practice, behaviour and wellbeing, speech and language, and neurodiversity-informed practice. This ensures timely access to support, reduces reliance on diagnostic pathways and prevents escalation to higher tiers of provision and EHC needs assessment. **Workforce at Scale Model in Place** Experts at Hand is underpinned by a coordinated, integrated workforce model combining Educational Psychology, in-house Speech and Language Therapy (SaLT), and Occupational Therapy (OT) with NHS clinical leadership, specialist teachers, SEND Advisers, behaviour and inclusion professionals and Primary Behaviour Service expertise. Local authority delivery teams are strengthened by health partners through advanced practitioner roles, clinical leadership for in-house therapy practitioners and assistants, providing training, mentoring, early intervention and specialist input.	Impact is evaluated and programmes are refined and reshaped accordingly, with stronger integration with outreach APST and multi-disciplinary support. A full review of early years and post-16 teaching and learning offers is undertaken, with SEND Advisers, Local Delivery Teams and setting leaders working collaboratively to refine and strengthen provision. Inclusive practice expectations are embedded as standard, ensuring needs are addressed earlier and locally, with alternative provision consistently used as a short-term intervention. This strengthens early identification and response, increasing the proportion of needs met at SEN Support and reducing escalation to statutory assessment and alternative provision. Delivery remains aligned with Best Start in Life and delivered through Best Start Family Hubs and early help services, supporting coordinated early intervention across education, family and health systems. **Scaling and Refining the Workforce Model** Workforce capacity is further expanded and optimised in line with Year 2 funding, building on the foundations	intelligence, including school improvement activity, feedback from PCF and SENDIASS, Ofsted outcomes, complaints and tribunal data, and analysis of alternative provision usage. Intensive interventions are consistently designed to build lasting capability within settings, reducing repeat demand and strengthening mainstream provision over time. Experts at Hand operates as a single graduated pathway from early years to post-16, embedded as business-as-usual across education, health and social care. Teaching and learning support is continuously reviewed and refined, ensuring that provision remains responsive to need and aligned to system priorities. As a result, most children and young people's needs are met within mainstream provision without escalation, reducing reliance on targeted and specialist support. This approach remains fully aligned with Best Start in Life and is delivered through established collaboration with Best Start Family Hubs and early help services, ensuring coordinated support

• CMR9 – Governance, accountability and Senior Responsible Officer (SRO) • CMR10 – Joint governance and shared accountability • CMR11 – Equitable access to support across all settings • CMR30 – Partnership commissioning approach	Health partners (ICB) strengthen the Experts at Hand workforce model through the expansion and development of clinical support for in-house therapy roles, including link therapists (Band 5/6), therapy assistants (Band 3) and NHS advanced practitioner roles. This supports increased capacity for early intervention, attendance at meetings, whole-school approaches and multi-disciplinary working. Health-led contributions also include the development and delivery of training offers, workforce development through apprenticeships and postgraduate programmes, and enhanced digital and system-wide support, ensuring specialist expertise is accessible across settings and embedded within day-to-day practice. Recruitment to additional EP, in-house SaLT, OT, NHS clinical leadership, SEND Adviser and PBS, STAs roles has commenced, with existing capacity deployed through recruitment in complementary teams, e.g. Inclusion Support Services, to support early delivery and the development of the offer. Where recruitment proves challenging and vacancies cannot	established in Year 1 and strengthening the integrated workforce model across education and health. This includes continued expansion of Educational Psychology, in house speech, language and communication, and inclusion and therapeutic roles, alongside the further development of advanced practitioner, practitioner and assistant roles. There is continued flexibility to expand Neurodiversity MDT and Primary Behaviour Service capacity in response to local need. The tiered workforce model is refined and standardised across all districts, with clearly defined deployment of advanced practitioners, practitioners and assistants supporting consultation-led practice, early intervention and multi-disciplinary delivery. Increased workforce capacity enables Alternative Provision task forces to operate within every locality. Role clarity, supervision and consistent deployment patterns reduce variation across districts and strengthen responsiveness and consistency of delivery. Health partners continue to play a central role within the integrated model, contributing through advanced practitioner roles, clinical leadership for	across education, family and health systems. **Sustained and Embedded Workforce Model** Experts at Hand roles are fully incorporated within core service structures and workforce development pathways across education, health and social care, operating as part of business-as-usual delivery. The integrated workforce model is sustained across all districts, with local authority practitioners and health partners, including advanced practitioners, clinical leadership for therapy practitioners and therapy assistants, continuing to deliver coordinated training, mentoring, early intervention and specialist input. Workforce capability is continuously developed through ongoing training, apprenticeships and postgraduate pathways, ensuring that expertise is built, retained and applied consistently across the system. Clear workforce competencies and expectations are co-produced and embedded across settings, supported through cluster-based working and Local Delivery Team oversight,

	be filled, contingency arrangements, including interim agency capacity, are in place to ensure continuity of delivery. Workforce growth across Year 1 is incremental and reflects the aspirational increase in the number of children and young people without an EHCP supported in schools and settings through these services. This growth is aligned to increasing numbers of children and young people supported at SEN Support, strengthening capacity within each locality and enabling specialist, AP and capital provision to focus on those with the highest level of need. The workforce delivers training, CPD and practice development to build sustainable capacity within settings, alongside targeted direct work with children and young people, where required, to improve accessibility and inclusion. Leadership of the expanding resources will be provided through a multi-agency approach with Local Authority and NHS clinicians overseeing quality, delivery and compliance (EAH06).	in-house therapy practitioners and assistants, and supporting training, mentoring, early intervention and specialist input across the system. **Coordinated Multi-Disciplinary Support** Building on Step 2 targeted support established in Year 1, Step 3 coordinated multi-disciplinary support is embedded at scale across all districts and targeted effectively for: o children and young people with sustained or complex (targeted plus) needs o school clusters experiencing shared challenges (Building Block 2). Step 3 delivery provides coordinated, integrated multi-disciplinary support at the appropriate level, preventing escalation to higher tiers of alternative provision and statutory assessment. Multi-disciplinary approaches increasingly meet needs without reliance on diagnostic or statutory pathways, ensuring support remains needs-led, proportionate and consistent with the graduated response. **System Leadership, Partnership and Financial Alignment**	ensuring consistent practice and reducing variation across localities. This ensures that specialist expertise is routinely accessible across all settings and embedded within everyday practice, sustaining system capacity and reducing reliance on external or reactive support. **Effective Use of Intensive and Specialist Support** Step 4 intensive, short-term tier 3 AP interventions are used strategically and consistently as part of the graduated approach, including: o planned Education Centre placements (APST). o enhanced outreach linked to specialist provision, including support from specialist settings and schools for children and young people with specific needs (Building Block 2). All intensive interventions are: o time-limited o reintegration-focused o explicitly designed to build capacity within mainstream settings o support a reduction in reliance in higher tiers of AP

	A co-produced CPD and workforce development plan is established in Year 1 (from Q2), ensuring consistent quality, shared practice and alignment across early years, schools, post-16 and health partners, including Best Start Family Hubs. This supports a joined-up approach to training and development across all services involved in delivering Experts at Hand. **Teaching, learning and capacity building** The workforce delivers relational, trauma-informed practice support to strengthen inclusive teaching, communication and interaction, attendance and behaviour across settings, including the development of communication-friendly environments and support for speech, language and communication needs. Support is primarily delivered through training, CPD and practice development, building sustainable capacity within settings. Where required, practitioners provide targeted direct support to children and young people, working alongside leaders, staff and pupils to improve curriculum access,	Local Delivery Teams coordinate multi-agency planning with shared outcomes, clearly defined roles and delivery accountability, strengthening joint working between education and health partners. This supports a system-wide shift in practice, with earlier intervention and coordinated support reducing reliance on reactive and crisis-led responses. Financial rebalancing is underway, moving investment toward early targeted intervention and cluster-based solutions, strengthening prevention and reducing future High Needs commitments. Improved visibility and planning of spend across stages supports a more predictable, joined-up and value-driven system. This approach contributes to a measurable reduction in escalation to statutory assessment and high-cost provision over time. **Year 2 milestone**: Experts at Hand operates as a scaled, consistent and coordinated system, with strengthened workforce capacity, reduced variation between districts and earlier intervention delivered at scale.	Local provision is used wherever possible in place of high-cost, out-of-area placements. This ensures that intensive and specialist support is used in a targeted and proportionate way, contributing to sustained mainstream capacity, improved reintegration outcomes and reduced dependency on higher-cost provision over time. **Statutory Alignment, System Leadership and Sustainability** EHCP pathways and statutory processes are fully aligned to the Experts at Hand graduated model, ensuring that statutory assessment and decision-making are consistently informed by earlier intervention, high-quality evidence and coordinated multi-disciplinary input. This alignment improves the quality and consistency of statutory decisions, reduces duplication across services and lowers reliance on higher tiers of provision, contributing to reduced tribunal risk and escalation. Multi-agency system leadership is fully embedded across education, health and social care, with Local Delivery Teams and partnership governance structures driving shared outcomes,

	remove barriers to inclusion and embed effective practice. This includes supporting a wide range of needs, including communication and interaction, behaviour, and sensory needs, ensuring that inclusive practice is consistently applied across settings. SEND Advisers work with Local Delivery Teams and school leaders, using quantitative and qualitative local data to identify settings requiring targeted support and develop precise, multi-setting and cross-phase CPD programmes. Clear expectations for engagement are established, and impact is evaluated against agreed inclusion, attendance and academic outcome measures. A specific co-produced offer is developed for early years and post-16 settings, including input from SEND Advisers, school improvement colleagues, early years teaching and learning specialists, SaLT, EP and specialist teachers. Impact is measured against inclusion, outcomes and progression indicators, including post-16 transition and Preparing for Adulthood outcomes.	This results in increasing consistency in inclusive practice across settings, greater confidence in the graduated approach and a growing proportion of children and young people having their needs met at SEN Support without escalation. **Experts at Hand target trajectory:** • Schools and settings accessing Experts at Hand support reaches at least 75% • Children and young people identified for targeted support accessing appropriate provision increases to at least 65% • Increase in the number of children and young people without an EHCP accessing multi-disciplinary support (including SaLT, OT and EP input) to 11,184 • Reduction in the proportion of children and young people with SEND not in education to 6.2%	consistent decision-making and system-wide accountability. Sustainable funding arrangements are embedded to support universal CPD, locality coordination and the effective use of Alternative Provision task forces, ensuring continued investment in early intervention and prevention. Joint ownership, shared accountability and continuous improvement operate as standard practice across education, health and social care, supported by regular performance monitoring and data-driven decision-making. As a result, statutory escalation is sustainably reduced, with more needs met earlier in mainstream provision. This contributes to long-term High Needs cost avoidance, improved DSG sustainability and a more financially stable SEND system. This ensures that earlier intervention and reduced escalation are maintained over time, supporting sustained improvements in outcomes, inclusion and long-term system sustainability. **Year 3 milestone:** Experts at Hand has transitioned fully from programme to business as usual,

	Delivery is underpinned by strong multi-agency alignment, including health partners and Best Start Family Hubs, ensuring a joined-up approach to workforce development and intervention across the 0–25 system. Local delivery is informed by countywide and locality data on inclusion and outcomes, ensuring alignment to identified need and existing local authority structures, including early help, social care and behaviour support services. There have been engagement events with Executive Headteachers, multi-agency colleagues and the PCF to ensure that the model is co-produced. There is further operational engagement events planned with SENCOs. Ongoing engagement with school leaders, SENCOs, multi-agency partners and the Parent Carer Forum supports co-production and continuous improvement, with regular review and feedback loops ensuring the model remains responsive and effective.		operating as a mature, preventative SEND system. Children and young people consistently access the right support at the right time within local mainstream provision, with strong application of the graduated approach and most needs met at SEN Support. This results in improved parental confidence and sustained reductions in demand for statutory assessment and specialist provision. **Experts at Hand target trajectory:** • Schools and settings accessing Experts at Hand support reaches 100% (business-as-usual) • Children and young people identified for targeted support accessing appropriate provision increases to at least 75%, with improved reintegration outcomes • Increase in the number of children and young people without an EHCP accessing multi-disciplinary support (including SaLT, OT and EP input) to 14,799 • Reduction in the proportion of children and young people with SEND not in education to 6%

	Targeted Outreach and Early Intervention Embedded Tier 1 and Tier 2 AP outreach / APST is formalised through revised Education Centre SLAs (EAH05), including clearly defined co-produced expectations for Tier 1 and Tier 2 provision that focus on building capacity and sustaining successful placements, and a co-produced Special School Outreach funding agreement (EAH08), ensuring consistent expectations and alignment to the Experts at Hand model. Step 2 early targeted support operates at scale across all districts, coordinated through Local Delivery Teams as a single access and triage point, providing needs-led, diagnosis-free access to early advice and consultation. Support is needs-led and not dependent on formal diagnosis, with multi-disciplinary input reducing reliance on diagnostic pathways, Tier 3 AP and EHC needs assessment. Experts at Hand operates as a preventative model, reducing avoidable escalation to statutory assessment and high-cost provision		

	and supporting early cost avoidance within the High Needs system. Local triage processes ensure settings are directed to the most appropriate funded support routes, including Best Start in Life, Primary Behaviour and Inclusion Support services, Neurodiversity MDT and PCF support. Early intervention plans are co-produced and targeted using School Improvement intelligence and Local Delivery Team oversight, utilising strong established relationships with settings to ensure that less proactive settings access appropriate support. **Governance, Access and System Alignment** Joint Local Authority and ICB governance is established (EAH11), with clinical governance and lead practitioners in place to oversee the developing in-house therapy offer. Strategic oversight from the Local Area Partnership Board and delivery oversight through a multi-agency Implementation Group including early years, schools, FE, PCF and young people. The Implementation Group meets regularly to monitor delivery,		

	respond to emerging issues and ensure consistent implementation across all districts. Clear commissioning and funding arrangements ensure delivery aligns with agreed priorities, workforce deployment and equitable access across all districts, with shared accountability across education, health and social care partners for delivery, performance and outcomes. Access routes to universal CPD, early advice and targeted support are clearly defined, co-produced and communicated across all settings. Schools and clusters can proactively request support; however, access is not solely request-led. Where Local Delivery Teams identify that a school or cluster of schools requires support, a proactive, data-informed approach is used to identify need, drawing on: ○ The existing picture of the school in relation to the stated success measures of the Experts at Hand programme and any locality information gathered through the universal tier		

	○ Additional non-measurable information and context that affects leadership capacity and the capacity to promote and develop inclusivity in schools – such as adoption of the Hampshire Approach and implementation of the universal tier ○ Quantitative and qualitative information held by the Local Authority's data team and district school improvement team about the school's current position (outcomes including SEND outcomes, inclusion indicators, Ofsted status etc) This ensures that support is targeted toward settings and cohorts with the greatest need, including those that are less proactive, enabling equitable and needs-led access across all phases and providers. This approach applies consistently across all phases, including early years and post-16, and includes out-of-area FE settings, ensuring equitable access regardless of location or setting type. Locality teams will hold oversight to ensure that all parts are equally benefitting.		

	Hampshire's established school improvement infrastructure further strengthens delivery. Each district includes dedicated School Improvement Managers across early years, primary, secondary, post-16 and specialist provision. Working alongside Best Start Family Hubs and early help partners, these teams use established relationships with settings to support engagement and ensure that those most in need – including less proactive settings – are encouraged, and where necessary required, to access the Experts at Hand offer. **Post-16 specific approach** In the first weeks of the introduction of Experts at Hand, specific processes will be developed by the Experts at Hand Local Delivery Teams and county-wide Implementation Group with Post-16 leaders to ensure that these processes are as robust and as equitable as with Early Years and schools. Specifically, the following decisions will be made in conjunction with FE settings: • The way in which curriculum information, outcomes and inclusion indicators from post-16		

	settings will be used to establish the required CPD offer and, if necessary, 'Tier' of access to Experts at Hand at the appropriate time. • The way in which the training and delivery should be shaped specifically for post-16 teaching staff and CYP. • A robust system which ensures that cross-phase cluster consideration is given to the delivery of CPD, so that the key priorities of EY, schools and the post-16 setting are joined together appropriately. • The mechanisms, timescales and impact measures to be used to evaluate the success and impact of the work and associated, timely escalation and de-escalation routes. In addition, in the early weeks of the programme, MoUs/SLAs are drawn up for the reciprocal delivery of timely support to young people in settings out of area with partner colleges. Additionally, the establishment of mechanisms and protocols to ensure the impact of this work is evaluated by the Implementation Group, utilising cross-border governance collaboration where appropriate.		

	MoU/SLA will include defined access routes and response times for all providers, including out-of-area settings. Cross-border arrangements will ensure equitable access for Hampshire learners placed outside the local area by working across existing networks and tracking learner data. Cross-border delivery for the Post-16 Experts at Hand offer will be achieved by formalising partnerships with neighbouring authorities and providers, enabling Hampshire-placed learners to access provision through agreed referral pathways. Local Delivery Teams will engage colleges through established networks, regular partnership meetings and clear communication of referral processes, expectations and benefits, ensuring providers are active participants in identifying and supporting learners. Learner participation, progress and destinations will be tracked through shared data protocols aligned to DfE expectations on data protection, information sharing and outcomes monitoring (including GDPR compliance, accurate ILR returns and destination tracking). Impact will be measured through		

	analysis of engagement rates, learner progress, retention and positive destinations, alongside qualitative feedback from providers and learners. This approach will ensure that learners placed out of area will receive equitable access to support, while Hampshire will maintain oversight of quality, participation and impact in line with DfE expectations for accountability, inclusion and evidence-informed provision. LDTs will be the conduit for this evaluation of impact. An engagement workshop is taking place in July 2026, with SENCOs and Principals/Vice-Principals from FE colleges across Hampshire to establish protocols for ensuring that access to Experts at Hand support is equitable across settings. Local Delivery Teams will report into the county-wide Implementation Group to quality assure this over time. Employer links both within and across local authority borders will be built through simple, joined up working rather than separate approaches. Education teams across LA borders will work together to identify shared priorities and will approach employers with one clear, consistent approach.		

	Consideration will be given to brokerage through existing enterprise and work experience providers who work across South-East Local Authorities, such as Education Business Partnership South and Business in the Community. BITC is a business-led charity that facilitates collaborations between companies and local schools and colleges, with the goal is to close the educational attainment gap, boost social mobility, and equip young people with essential workplace skills. Using the Experts at Hand approach, identified individuals within LDTs will act as connectors, bringing employers and providers together and making it easy to engage. Relationships will be developed over time, not through one-off requests. Employers and business partnerships will be supported to play an active role in shaping provision, offering placements, and informing curriculum, so that engagement is worthwhile and sustainable. Access to Experts at Hand support for post-16 providers will be underpinned by clear expectations		

	for timeliness, equitable access and consistent coverage, including for out-of-area placements, ensuring that support is not dependent on provider capacity or engagement levels. Define and begin implementing a standardised transition model: • Roles and responsibilities • Information sharing expectations • Extend Universal + Experts at Hand access to all providers, including out-of-area • Introduce equity monitoring to ensure access is not provider-dependent • Establish timeliness expectations for support Post-16 progression will be actively tracked through Local Delivery Teams, including: • monitoring of participation, retention and progression outcomes • identification of learners at risk of disengagement • targeted intervention aligned to Preparing for Adulthood pathways **Effective Transition between phases – EY to KS1-4**		

	Local Delivery Teams will be cross-phase as stated – building on the strong existing information sharing processes across age-specific teams within the LA. LDTs will ensure that information sharing between Early Years and schools-focussed professionals builds on the CPD and support which has been provided before and develops, rather than duplicates, including taking account of emerging cohort specific need in specific schools and clusters of schools. **Effective Transition between phases – KS4 to Post-16** Transition into post-16 settings will be underpinned by a deliberately integrated "Experts at Hand" function that will operate as a bridge between Key Stage 4 and Post-16. It will draw systematically on KS4 performance data to diagnose curriculum strengths, gaps in subject knowledge, and patterns of underachievement at cohort and subgroup level. This analysis will inform a sharply targeted programme of CPD, ensuring that post-16 practitioners will be equipped to respond to the specific pedagogical, academic, and pastoral needs emerging from the local area.		

	The model will place particular emphasis on understanding and anticipating SEND profiles. It will use shared data to build a forward-looking picture of need, including EHCP trends, emerging SEMH concerns, literacy and numeracy barriers, and patterns of disengagement. Experts at Hand will then mobilise specialist expertise to support staff in adapting teaching, assessment, and support structures ahead of transition, rather than reacting retrospectively once learners arrive. Robust data-sharing protocols will sit at the core of the approach. Schools, local authorities, and post-16 providers will operate within a common framework that enables timely, secure, and meaningful exchange of attainment, attendance, behaviour, and support-plan data. This will allow post-16 settings to plan provision with precision—curriculum pathways, intervention models, and enrichment offers will all reflect a clear understanding of incoming learners. Finally, the model will be characterised by ongoing collaboration rather than one-off transition points. Local Delivery		

	Teams will facilitate continuous dialogue between KS4 and post-16 professionals, using joint reviews, case discussions, and shared professional learning to sustain alignment. In doing so, it will ensure that transition becomes a coherent continuum of support, with CPD, curriculum design, and learner support evolving directly from an evidence-informed understanding of need. Delivery and impact are regularly reviewed against agreed partnership outcomes, ensuring a continuous feedback loop and supporting ongoing refinement of the model. **System Culture, Feedback and Continuous Improvement** Shared expectations and values are actively promoted across partners through a co-produced “Working Together” charter, published and embedded in 2026/27, supported by visible feedback loops and “You said, we did” responses. Learning from complaints, mediation and tribunal outcomes is systematically captured, analysed and acted upon to strengthen early		

	resolution and improve practice across the system. A shared set of partnership measures is established in 2026/27, supported by quarterly reporting and ongoing evaluation to ensure consistency, transparency and continuous improvement across all localities. **Year 1 Milestone:** All Hampshire settings can access a consistent, locality-based Experts at Hand offer, with clear governance, workforce capacity and operating arrangements enabling earlier intervention, improved engagement and a consistent tiered AP approach. **Experts at Hand target trajectory:** (showing how earlier access to targeted and multi-disciplinary support is expected to lead to better outcomes, attendance and inclusion, and reduced escalation to statutory services, with an indirect contribution to parent, carer and young person confidence) • Schools and settings accessing Experts at Hand support reaches at least 50% • Children and young people identified for targeted support		

	accessing appropriate provision (including AP Tier 1/2 and multi-disciplinary pathways) reaches at least 50% • Increase in the number of children and young people without an EHCP accessing multi-disciplinary support (including SaLT, OT and EP input) from 5,530 to 8,281 • Reduction in the proportion of children and young people with SEND not in education from 7% to 6.6%		
WS3 - SEND Sufficiency and Place Planning (Capital): Plan, Expand and Optimise Local Provision (Enablers: Capital / Sufficiency; Data/Digital; Sustainable Funding / Investment) **Core minimum requirements alignment:** The SEND Sufficiency and	Hampshire will use the announced high needs capital investment of at least £3 billion (2026/27–2029/30) as a strategic invest-to-change lever to strengthen inclusion, improve sufficiency and reduce reliance on high-cost, out-of-area provision across the 0–25 system. This funding supports children and young people (CYP) with SEND or those requiring alternative provision (AP) and will be deployed across early years, statutory school age and post-16 phases in line with Hampshire's mainstream-first, inclusion-led approach. Hampshire's needs-led strategy underpins wider SEND Reform Plan workstreams and places inclusion at the centre of sufficiency planning so	Expand capacity and optimise sufficiency pathways (Building blocks 1-3) **Strategic sufficiency place planning and forecasting** Maintain and regularly refresh mainstream school place planning and capacity across Hampshire through the School Places Plan, providing an updated, data-led view of school place pressure and surplus district-by-district. This includes consideration of rurality, location, demographics and the impact of planned housing developments on demand for school places. Rerun 3-year forecast for next three years in light of SEN Reform and Best Start impact to identify areas of targeted	Operate a mature, rolling SEND sufficiency and capital programme (Building blocks 1-3) **Strategic sufficiency place planning and forecasting** Operate an embedded, annual data-led cycle of SEND sufficiency and capital planning across all phases (including Early Years and Post-16), informed by demand forecasting, designation trends and geographic pressure points, ensuring provision remains aligned to need. (Building block 2) (SPP05) Maintain an integrated approach to SEND sufficiency and mainstream school place planning through the School Places Plan, providing a comprehensive, data-led view of

Capital roadmap demonstrates alignment with the following core minimum requirements, setting out a clear, data-led and phased approach to increasing local provision, strengthening mainstream inclusion and reducing reliance on high-cost and out-of-area placements: • CMR12 – Sufficiency pressures and demand trends • CMR13 – Increasing local capacity to reduce reliance on specialist provision • CMR14 – Collaboration with MATs on	that more CYP can access suitable places in mainstream settings, every child requiring an inclusion base can access one locally, and reliance on long-distance travel is reduced by systematically closing geographic gaps in provision (SPP01, SPP04, SPP05). Targeted capital investment will also improve the suitability, accessibility and inclusivity of the mainstream estate through adaptations, inclusive design and assistive technology, aligned to the local authority's statutory duties (SPP05). (Building blocks 2 & 3) **Strategic sufficiency place planning and forecasting** Capital investment will be prioritised through an integrated sufficiency model combining demographic growth projections, EHCP trends, inclusion base usage, placement need pressures, and participation and transition data (SPP04, SPP05, SPP06, SPP08, SPP09)). Governance arrangements will provide robust oversight of sequencing, feasibility, consultation, approvals and delivery, maintaining alignment to evolving need and compliance. (SPP03). Inclusion bases are central to delivery. Hampshire will expand capacity for	work across all phases, including Early Years. Review SENIF to ensure it is targeted to identified sufficiency gaps in Early Years and is used alongside workforce development, universal and Experts at Hand delivery. This strengthens alignment between sufficiency, workforce development and early intervention, improving access to inclusive provision and reducing escalation to specialist support. This supports a mature, data-led sufficiency system, where place planning intelligence is routinely used to inform capital investment, commissioning decisions and the optimisation of provision across the local area. **Capital delivery and programme governance** Subject to member approval, deliver the 2027/28 Children's Services Capital programme at scale to time, quality and cost, with strengthened sequencing, resourcing and risk controls ensuring consistent and reliable delivery across all projects. (Building blocks 2 & 3) (SPP01) (SPP05)	capacity and demand across districts, including the impact of demographics, rurality and planned housing developments. This supports a fully mature, integrated sufficiency system, where planning intelligence routinely informs capital investment, commissioning and placement decisions, ensuring provision is continuously aligned to local need and system priorities across all phases, including Early Years. Early Years sufficiency is fully aligned to local population need and SEN trends, with SEN IF fully integrated within sufficiency planning, the Early Years inclusion strategy and delivery models. It supports flexible, needs-led delivery, sustains mainstream placements and prevents escalation or need for additional specialist capacity. **Capital delivery and programme governance** Subject to member approval, deliver the 2028/29 Children's Services Capital programme as part of a rolling programme to time, quality and cost, achieving 561 additional specialist inclusion base places in mainstream settings targeted to the highest-need geographic and service gaps (ASC and SEMH), strengthening SEND inclusion

inclusion base development • CMR15 – Quality and alignment of inclusion bases to need • CMR16 – Effective use of existing school estate and opportunities from falling rolls • CMR17 – Planning for specialist places aligned to local need • CMR18 – Flexibility to respond to rurality and local variation • CMR19 – Impact of travel and transport on sufficiency planning • CMR25 – Early years sufficiency, including	both Inclusion Support Bases and Inclusion Specialist Bases within mainstream settings (SPP04). Support Bases, created at school or MAT level, will provide early, time-limited intervention with a clear reintegration focus. High needs capital will support physical adaptations, equipment and assistive technology through the Hampshire Approach Inclusion Base Fund and wider capital routes. Subject to Member approval, this fund will launch from 2027/28, supporting up to 20 schools annually (approximately 200–600 children), with flexibility to align to future DfE guidance. In Early Years the sufficiency data shows that whilst there is a localised shortfall for mainstream places, with some areas having excess capacity, the SEN cohort placement needs are being met. The peripatetic support model currently in HCC, allows children to be supported in mainstream early years settings without the need of additional space creation, through inclusion bases. This will be reviewed as part of the ongoing High Needs Capital Strategy to ensure that sufficiency remains positive as it is in the current model. For Post-16, the data is currently an unvalidated baseline,	Programme governance and delivery arrangements are fully embedded, with improved oversight, risk management and coordination supporting effective sequencing of projects and maintaining a continuous pipeline of deliverable schemes aligned to sufficiency priorities. **Inclusion capacity and local provision development** Expand the specialist base network (new/expanded and, where needed, redesignated bases) to close remaining geographic gaps and strengthen all-through progression pathways from primary to secondary, improving local sufficiency and supporting inclusion within mainstream settings. (Building block 2 enabling Building block 1) (SPP04; SPP05; SPP06; SPP08). Use the HAIBF at scale, prioritising schools/settings where targeted adaptations and specialist equipment will support earlier intervention, prevent escalation and improve access to local mainstream provision. Demand and delivery are routinely reviewed to inform future capital allocations and ensure investment is targeted to areas of greatest need. (Building blocks 1, 2 & 4) (SPP04). **System optimisation and estate utilisation**	within mainstream provision across Hampshire. (SPP01). Delivery confidence is sustained through embedded programme governance (SEND Capital Programme Board and linked asset strategy governance), with transparent decision-making, clear accountability and effective escalation routes ensuring consistent delivery performance and alignment with sufficiency priorities. (Building block 3) (SPP03) **Inclusion capacity and local provision development** Sustain HAIBF as a business-as-usual funding mechanism for small-scale improvements, equipment and technology that strengthen mainstream inclusion and support early intervention within settings. Demand and delivery are routinely monitored and reviewed to inform future capital allocations, ensuring investment is targeted to areas of greatest need and continues to prevent escalation to higher tiers of provision. (Building blocks 1 & 4) (SPP04) **System optimisation and estate utilisation**

SEND provision	so whilst we anticipate the fund will support the growth of these, the first cohort will be rolled out with colleges using existing spaces where possible with additional capital funding programmed in as part of the HAIBF criteria. Working alongside colleges to maximise their space as well as providing suggested models of good practice and staffing suggestions, through the codeveloped inclusion base guidance. Inclusion Specialist Bases will be Local Authority commissioned provision embedded in mainstream settings and colleges, prioritised by need and geography, particularly for ASC and SEMH cohorts. Over 560 new specialist base places will be delivered over three years through High Needs Provision Capital Allocation (HNPCA), strengthening pathways between primary, secondary and post-16 phases while reducing escalation to independent and out-of-area placements (SPP04, SPP06). Expansion of specialist provision, including special schools or specialist post-16 institutions, will only occur where there is a clear, evidence-based rationale demonstrating that need cannot be	Systematically use falling-rolls opportunities as part of embedded sufficiency planning to repurpose surplus accommodation into targeted SEND provision, supported by data, pupil forecasts and engagement with schools and academies, improving access and value for money (SPP05). Opportunities arising from school organisation changes or falling rolls (CMR15) are assessed using a consistent decision-making framework, prioritising solutions that meet need within mainstream provision wherever possible. Additional specialist provision is only progressed where projected need and system pressures cannot be met through inclusive mainstream approaches, and where this demonstrably reduces reliance on out-of-area and independent placements. Any Member Decision reports will demonstrate how all proposals are supported by robust data, including analysis of demand, placement patterns and travel impact, evidencing reduced long-distance travel and improved local access. This approach strengthens system-wide optimisation of the estate, contributing to	Optimise the estate as a standard element of sufficiency planning by routinely using surplus capacity from falling rolls and wider asset opportunities to create targeted SEND provision, including specialist bases, where this improves locality access and value for money. This data-led approach supports a more predictable and sustainable system, reducing reliance on independent placements and long-distance travel while strengthening local provision aligned to need. (Building blocks 1 & 2) (Enablers: Capital; Data/Digital) (SPP05; SPP07) **Partnership, commissioning and market management** Maintain strong partnership working with MATs, schools and providers to sustain and optimise the local SEND provision market, ensuring capital investment and provision development remain aligned to identified system need. (Building block 3) This supports a stable and well-managed local market, with increased confidence in local provision and reduced reliance on independent and out-of-area placements over time. (SPP05)

	met through mainstream provision or inclusion bases. Decisions will require assurance that expansion reduces reliance on independent provision, addresses geographic inequities and delivers value for money, including travel impact (SPP01, SPP05, SPP07). Hampshire will also maximise opportunities created by falling rolls to repurpose surplus accommodation using tried and tested data-led approaches and reporting. Reducing travel distances remains a key outcome, and all capital business cases will include locality access and transport considerations, with benefits tracked through strengthened data systems and governance (SPP03, SPP07). For post-16, capital investment will support FE providers to expand inclusive pathways and PfA provision. Innovative investment, including assistive technology, will further enhance inclusion within mainstream environments. Overall, this strategy ensures that capital funding delivers sustainable system change, embedding inclusion, improving local access, and creating a more equitable and efficient SEND system.	improved locality provision, reduced reliance on high-cost placements and more efficient use of resources. **Partnership, commissioning and market management** Continue joint work with MATs and maintained schools to identify and bring forward suitable sites for additional provision at pace, using shared data and sufficiency intelligence to prioritise opportunities aligned to local need. This partnership approach enables a more proactive and coordinated pipeline of projects, supporting delivery of additional specialist and support base capacity and strengthening the local sufficiency offer. (Building block 3) (SPP05) **Data, performance and continuous improvement** Maintain embedded, routine benefits reporting (including places delivered, impact on placement patterns and travel time), ensuring that delivery and outcomes are regularly monitored and evaluated. Central government support is critical to delivering the SEND Reform Plan at pace and scale. Specialist expertise in co-production, data analytics, demand modelling and system change would	**Data, performance and continuous improvement** Formal evaluation of capital impact (including places delivered, quality of provision, travel time and cost avoidance) is embedded as part of a continuous, data-led improvement cycle. Learning is systematically used to refine and reprioritise the rolling three-year capital pipeline and commissioning approach, ensuring investment remains aligned to need and delivers improved locality access and value for money. This supports a more predictable and planned approach to transport, alongside sustained improvements in placement patterns and overall system efficiency. (Building blocks 3 & 4) **Year 3 milestone:** The SEND capital and sufficiency programme operates as a mature, rolling, data-led system, with the 2028/29 capital programme delivered to time, cost and quality and achieving planned expansion of specialist and support base capacity aligned to need. Provision is routinely optimised through estate management (including use of falling rolls and targeted investment), supported by embedded governance

	This establishes a clear understanding of Early Years sufficiency, including availability of places, workforce capacity and identified gaps, in line with Core Minimum Requirement 25. Review and baseline EY Childcare Sufficiency to strengthen understanding of ward-level variation and gaps in provision across need types, order to ensure future responsiveness. Use of this baseline will future forecast childcare sufficiency including SEN trends for the next 3 years and report to Members as part of the EY Childcare Sufficiency Assessment. Should forecasting suggest that need is not being met by the current model, then a strategy to develop further sufficiency would be implemented, but current modelling suggests that this is unlikely to be necessary. Audit use of SENIF to support inclusive mainstream placements, reduce inequality in access to early support, and strengthen its alignment with identified sufficiency gaps. Post-16 inclusion base (support and specialist) development will be	strengthen local capacity to implement sustainable, evidence-led reform across education, health and social care. National support for workforce development, recruitment, training and retention is also needed to address pressures in educational psychology, therapies and specialist provision. Peer learning and regional collaboration would accelerate improvement by sharing effective practice and reducing variability. Successful delivery also depends on sustained national enablers: sufficient revenue funding to meet rising need; multi-year funding certainty, particularly for Experts at Hand; adequate high needs capital to expand inclusion bases and specialist provision; national workforce strategies to address shortages in key professions; stronger alignment across education, health and social care; and legislative and policy reform that supports earlier intervention and reduces reliance on statutory processes. The Local Area Partnership will maximise available resources, but delivery at the scale described depends on these national conditions. Successful delivery also depends on sustained national enablers: sufficient revenue funding to meet rising need; multi-year funding certainty, particularly for Experts at Hand; adequate high needs capital to expand inclusion bases	and a complete evaluation of impact. This informs the next cycle of commissioning and investment, resulting in improved locality provision, reduced reliance on high-cost and out-of-area placements, and a more financially sustainable SEND system. **Capital target trajectory:** • Number of additional specialist bases increases to at least 1,451 places in line with the capital delivery programme • Number of additional support bases increases to at least 1,125 places, supported by allocations from HAIBF (subject to need, requirements, setting, and DfE guidance) in line with the capital delivery programme. • Children and young people with EHCPs educated in mainstream schools or academies (including support bases) increases to 44% • Children and young people with EHCPs placed in independent and non-maintained specialist settings remains stable at 8.4%, reflecting increased local capacity offsetting demand growth

	informed by a structured sufficiency model, ensuring that provision is aligned to local demographic need, clearly defined in purpose and quality. **Capital delivery and programme governance** Deliver the member agreed 2026/27 SEND Children's Services Capital programme to time, quality and cost (maintained and academy-led projects), with risk-led oversight through the SEND Capital Programme Board. Delivery is supported by clear programme management, resourcing and risk mitigation arrangements to ensure schemes are achievable within agreed timescales and budgets. (Building blocks 2 & 3) Use and enhance programme governance and reporting, including the establishment of a SEND Capital Strategic Board, to strengthen oversight of delivery, strategic decision-making and management of risks and interdependencies. (Building block 3) (SPP01; SPP03) Identify required feasibility and viability work, alongside approvals,	and specialist provision; national workforce strategies to address shortages in key professions; stronger alignment across education, health and social care; and legislative and policy reform that supports earlier intervention and reduces reliance on statutory processes. The Local Area Partnership will maximise available resources, but delivery at the scale described remains dependent on these national conditions. **Year 2 milestone:** The 2027/28 SEND Capital Programme is delivered at scale to time, cost and quality, with expanded specialist and inclusion base capacity closing key geographic gaps and strengthening progression pathways. A mature, data-led sufficiency system is embedded, with provision routinely optimised through place planning, use of falling rolls and targeted investment. This results in improved locality provision and a reduced reliance on high-cost and out-of-area placements, supported by a standardised and embedded approach to co-production, participation and system learning across the 0–25 partnership. **Capital target trajectory:** • Number of additional specialist bases increases to at least 1,273 places in	

	at an early stage to protect delivery sequencing and ensure a continuous, deliverable pipeline of schemes to achieve 561 additional specialist base places in mainstream settings by 2029. (Building block 3, enabled by Data & Digital) (SPP04) Investment will improve the suitability and accessibility of the mainstream estate, aligned with the local authority accessibility strategy and Experts at Hand model, ensuring environments can meet a wider range of needs within mainstream provision. **Inclusion capacity and local provision development** Target new and expanded inclusion specialist bases to the highest-need geographic gaps using agreed principles, particularly for ASC and SEMH, including development of secondary capacity to sustain primary pathways. (Building block 2 enabling Building block 1) (UO08; UO01) (SPP04; SPP05; SPP06; SPP08) Specialist capacity is developed in a targeted way where needs cannot be met within strengthened	line with the capital delivery programme • Number of additional support bases increases to at least 1,030 places, supported by allocations from HAIBF (subject to need, requirements, setting, and DfE guidance) in line with the capital delivery programme. • Children and young people with EHCPs educated in mainstream schools or academies (including support bases) increases to 43.6% • Children and young people with EHCPs placed in independent and non-maintained specialist settings remains stable at 8.4%	

	mainstream provision, ensuring alignment with a mainstream-first approach and the graduated response. This targeted expansion improves access to local provision, supports earlier inclusion within mainstream settings and reduces reliance on specialist and out-of-area placements. **System optimisation and estate utilisation** Use coordinated, cross-service planning between Strategic Development, Admissions, Education Financial Services and Hampshire Improvement and Advisory Service to identify and fast-track opportunities arising from falling rolls, where surplus accommodation can be repurposed for targeted SEND provision, including specialist bases. Opportunities are assessed using admissions data, pupil forecasts and existing capacity, and are prioritised in areas of identified need to improve locality access and value for money. (Building blocks 1 & 2) (SPP05)		

	Where school organisation changes or falling rolls create potential opportunities for additional specialist provision, these are only progressed where local need cannot be met through strengthened mainstream inclusion and where this demonstrably reduces reliance on independent and out-of-area placements. All proposals are subject to robust Member decision-making, evidencing effective and efficient use of the education estate, including clear analysis of demand, placement patterns and travel impact, demonstrating reduced long-distance travel and improved local provision. Delivery is centrally tracked and reported through the capital workstream, ensuring visibility of opportunities, consistency of decision-making and alignment with sufficiency priorities. **Partnership, commissioning and market management** Strengthen collaboration with MATs and schools to actively shape and bring forward additional secondary inclusion specialist bases and		

	mainstream adaptation opportunities, through early engagement, shared use of data and insights, and a coordinated approach to identifying and delivering provision aligned to local need. (Building block 3) (SPP04; SPP05) Review and refresh the INMSS Market Position Statement to ensure resources are clearly understood and tracked, and that the Local Area Partnership has a comprehensive, up-to-date view of the independent and non-maintained specialist sector, including funding, capacity and emerging trends. This informs commissioning decisions and supports a strategic approach to managing reliance on external provision. (SPP06) **Data, performance and continuous improvement** Strengthen the use of shared data, forecasting and reporting to monitor capital delivery, track capacity against demand across all phases (including Early Years and Post-16) and inform ongoing sufficiency and capital planning decisions. This includes updating the Sufficiency Duty as part of the review cycle.		

	This establishes a consistent, data-led approach to performance monitoring across the local area, enabling regular review of delivery against need and supporting continuous refinement of the capital pipeline and investment priorities. **Year 1 milestone:** The 2026/27 SEND Capital Programme is delivered to time, cost and quality, with a refreshed, data-led SEND sufficiency and school place plan agreed, and a prioritised, approved pipeline of future projects in place, establishing a clear pathway to deliver additional specialist and support base capacity aligned to forecast demand and the graduated approach. There is a clear, shared understanding of Early Years sufficiency gaps with improved access to early support. SENIF is maintained as the primary mechanism to support inclusive mainstream placements. **Capital target trajectory:** (showing how increased local provision capacity supports a shift		

	toward earlier inclusion and enables more children and young people with EHCPs to be educated in mainstream and local settings, improving outcomes, attendance and inclusion, and reducing reliance on high-cost provision, with a positive impact on parent, carer and young person confidence) • Number of additional inclusion specialist base places increases from 944 to at least 1,095 in line with the capital delivery programme (2025) • Number of additional inclusion support base places increases from 310 to at least 575 in line with the capital delivery programme • Children and young people with EHCPs educated in mainstream schools or academies (including support bases) increases from 42.3% to 43% • Children and young people with EHCPs placed in independent and non-maintained specialist settings remains broadly stable at 8.4%, reflecting increased local capacity offsetting demand growth		
WS4 - Partnership, Participation	Establish a consistent partnership way of working for co-production	Standardise and embed participation and system learning (Building blocks 3 & 4)	Operate mature partnership, accountability and business-as-usual co-production

and System Leadership: Establish, Embed and Sustain Co-production and Accountability (Enablers: Workforce; Data/Digital; PP&R) **Core minimum requirements alignment:** The Partnerships, Participation and Resolution roadmap demonstrates alignment with the following core minimum requirements, setting out a clear, partnership-wide approach to governance, co-production, participation and early resolution that strengthens system	and resolution across the whole 0-25 system. (Building block 3) **Governance, decision-making and joint commissioning** Confirm clear decision-making responsibilities, escalation routes and delivery oversight through the Local Area Partnership Board (LAPB) and aligned subgroups across EYs, education (including FE), health, and social care, ensuring actions, risks and dependencies are managed transparently, consistently and at pace. (Building block 3) Launch the refreshed Joint Commissioning Strategy and establish and fully operationalise the Joint Commissioning Board (JCB) as the single strategic forum for SEND-related commissioning decisions. This ensures clear escalation routes, shared accountability between the local authority and ICB, and consistent, coordinated decision-making aligned with the LAPB. LAPB to co-produce and embed a shared roadmap for information dissemination across the Local Area Partnership, reducing fragmentation, clarifying	**Governance, decision-making and joint commissioning** Review joint commissioning arrangements, using data and insight to assess impact on outcomes and refine the Joint Commissioning Strategy, ensuring it is driving improved system performance and value for money. Strengthen and embed joint governance arrangements across the Local Area Partnership, ensuring consistent application of decision-making, clear escalation routes and shared accountability across education, health and social care partners. Governance structures are operating routinely and effectively, supporting aligned decisions and coordinated delivery across the system. Ensure clinical assurance of therapy services is secure and delivering. **Co-production and participation** Embed a consistent participation and co-production approach across the whole 0–25 system through a co-produced Participation and Co-production Charter and a clear participation offer, ensuring it is consistently applied across all partners. This aligns governance, communications and delivery expectations through the Local Area	(Building blocks 3 & 4) **Governance, decision-making and joint commissioning** Maintain a mature governance and assurance cycle across the Local Area Partnership, operating as standard practice with representation from early years, schools and post-16 providers. This includes clear escalation routes, consistent decision logs and transparent reporting, with routine publication of 'You said, we did' updates and an annual partnership learning report ("what we learned and changed") to support system accountability and continuous improvement. Joint commissioning arrangements operate as business-as-usual, with shared accountability between the local authority and ICB for outcomes, resource use and system performance. These arrangements are consistently applied and drive coordinated decision-making and delivery across the 0–25 system. **Co-production and participation** Co-production and participation are embedded as business-as-usual across the 0–25 system, consistently applied across all partners and evidenced through consistent practice,

accountability, improves experience and supports continuous improvement across the Local Area Partnership: • CMR31 – Partnership leadership and governance • CMR32 – Representation across early years, schools and post-16 providers • CMR33 – Shared data, dashboards and system insight • CMR34 – Engagement of all education providers and partners • CMR35 – Dispute resolution and escalation processes • CMR36 – Senior	responsibilities for cascading information and ensuring consistent system-wide messaging. This includes strengthening the use of the Local Offer and developing improved feedback loops through a dedicated working group. The LAPB will play a clear and visible role in ensuring transparency and communication, including the routine publication of key decisions, progress updates and 'You said, we did' outputs through the Local Offer and partner channels. This ensures governance operates not only as a decision-making mechanism, but as a transparent and accessible system through which families, practitioner and partners can see how engagement informs priorities, decisions and service improvement. Alignment of therapy pathways is confirmed and agreed through Partnership leaders. This will remove duplication, confusion and delay in the system. Decisions will include clinical, local authority and school expertise to make the most of early opportunities. Clinical leadership and governance of the in-house therapy service will be agreed. This will underpin high-	Partnership Board (LAPB) and embeds participation into SEND Support, Annual Reviews and key transition points. Broaden and strengthen participation routes beyond single forums, including early years providers, schools, post-16 settings and targeted community outreach. Engagement activity is increasingly coordinated across education, health and social care to reduce duplication, improve reach to underrepresented communities and key transition cohorts (early years, post-16 and preparation for adulthood), and ensure participation is representative and has a clear influence on decision-making and service improvement. **Early resolution and system learning** Standardise operational co-production and early resolution across services, localities and all phases (0–25), supported by shared quality assurance processes and peer learning, ensuring consistent practice and experience across the system. (Building block 3) Publish an annual partnership learning report ("what we learned and changed"), drawing on insight from early years, schools, FE providers, children and young people (including the SEND Youth Forum) and parent/carer networks. This report is used to inform	broad and representative engagement, and demonstrable influence on decision-making, service design, delivery and system improvement. **Early resolution and system learning** Early resolution processes (including SENDIASS, complaints and mediation) operate consistently across the 0–25 system as standard practice, with timely responses, improved experience for families and sustained reductions in escalation into formal routes. Partnership impact evaluation is routinely undertaken and embedded across the system, assessing participation reach and representativeness (families from 0–25), influence on decision-making, timeliness and quality of multi-agency working, and early resolution outcomes including mediation and tribunal. Findings are systematically used to inform decision-making, refresh improvement priorities and shape the next three-year cycle. (Building blocks 3 & 4) **Voice of Children and Young People** The Preparing for Adulthood (PfA) Strategy is embedded across the system and demonstrates sustained impact through improved outcomes in

Responsible Officer (SRO) leadership and accountability • CMR37 – Co-production with Parent Carer Forum (PCF) • CMR38 – Voice of children and young people • CMR39 – SENDIASS quality, independence and accessibility • CMR40 – Co-production benchmarking and continuous improvement (NHSE guidance) • CMR41 – Mediation arrangements and participation • CMR42 – Mediation monitoring, timeliness and effectiveness	quality recruitment, professional standards and practitioner development. NHS assurance will be modelled through this jointly commissioned multi-disciplinary structure. **Co-production and participation** Using NHSE guidance, complete benchmarking activity to self-assess current co-production practice and identify gaps and areas for improvement. Co-produce and publish a clear, partnership-wide participation and engagement offer across the full 0-25 system, setting expectations for how children, young people and families are involved in service design, delivery and review, and how feedback is acted upon (including visible You said, we did loops). This establishes a consistent and coordinated approach to participation and reduces fragmentation across engagement and communication routes. (Building block 3) Develop, agree, and begin embedding, a co-produced co-production charter, informed by benchmarking completed using the NHSE Co-production guidance, with	and refresh the Universal Offer, Experts at Hand and sufficiency priorities. (Building blocks 1–3, enabled by Data & Digital) Embed a routine, system-wide quality and learning cycle, triangulating themes from participation activity (0–25), SENDIASS contacts, complaints, mediation and tribunal data. Learning is used continuously to inform service improvement and refresh delivery priorities, supported by regular 'You said, we did' updates and insight from the Local Offer. PPR02; PPR03; (Building blocks 3 & 4) **Voice of Children and Young People** Embed the use of children and young people's voice across SEND processes, including SEND Support, annual reviews and transitions, ensuring it is consistently applied across the system. Views are routinely captured, reflected in decision-making and evidenced through quality assurance and monitoring. Implement the Preparing for Adulthood (PfA) Strategy across education, health and social care, ensuring it actively informs practice, pathways and improves outcomes for young people. **Workforce, capability and data**	education, employment, independent living, good health and community inclusion. Evidence is routinely used to identify gaps, inform commissioning and ensure consistent, high-quality pathways for young people across the 0–25 system. **Workforce, capability and data** A coordinated multi-agency SEND workforce operates with shared expectations and consistent practice across education, health and social care, consistently applied across all partners and supported by ongoing training, quality assurance and peer learning. Shared data systems and reporting are embedded across partners, enabling real-time insight, continuous improvement and evidence-based decision-making across the SEND system. This includes across the new unitaries. **Year 3 milestone:** A mature, partnership-wide approach to co-production, participation and early resolution operates as business as usual across the 0–25 system, consistently applied across all partners, with embedded governance and

	children and young people, parents/carers, and partners, setting clear expectations for equal partnership and shared decision-making. Co-develop and begin implementing a jointly owned engagement plan with the PCF and children and young people, strengthening alignment between the PCF and forums representing young people (e.g. SEND Youth Forum) and ensuring lived experience directly shapes priorities across education, health and social care. Parent/carer and young person voice will consistently inform all LAPB's, with structured mechanisms ensuring lived experience, participation insights and feedback data are routinely presented and directly influence decision-making, commissioning and system priorities. Co-design and implement a sustainable, multi-channel approach to capturing parent/carer views and children and young people's voices, extending beyond the PCF through school-based networks, the 'Have Your Say' network and exploration of the Coram Parent Champion	Strengthen multi-agency contribution expectations across early years, schools and post-16 settings (including timeliness and quality), ensuring joint working is routine, predictable and consistently applied for families and providers. This is supported by shared templates, clear escalation routes and quality assurance sampling. (Building blocks 3 & 4) Use the findings from the multi-agency SEND training needs analysis to design and deliver a coordinated SEND training programme, setting shared expectations, embedding consistent practice and improving multi-agency working. The programme is evaluated for its impact on frontline delivery and family experience. Strengthen the use of shared data and insight across partners, ensuring it is routinely used to inform decision-making, quality assurance and continuous improvement, enabling more consistent and proactive system delivery. There is a clear plan for the Local Area Partnership integration into the new unitaries. **Year 2 milestone:**	assurance through the Local Area Partnership Board (LAPB). Routine and transparent reporting, including 'You said, we did' updates and annual partnership learning reports, and a completed evaluation of partnership impact are used to inform the next cycle of improvement. This strengthens shared accountability across education, health and social care, improves system responsiveness and supports sustained reductions in escalation into formal processes. **Partnership target trajectory:** • Parent/carers and children/young people report feeling supported and child listened to with SEN Support: increase from 57.1% to 67.1% • Parent/carers and children/young people report feeling supported and child listened to with an EHCP: increase from 76.1% to 86.1% • Mediation cases taking place within statutory timescales increases to 90%. • Children and young people's reported happiness in education settings: increase from 70% to 76%

	programme, ensuring engagement is broad, representative and inclusive. Formally launch, implement and embed the co-produced SEND Participation Guide across the partnership, reducing fragmentation and ensuring consistent application of co-production practice, supported by formalised feedback loops, clear success measures and a structured review cycle to evaluate impact. Co-develop and implement a new transparent, jointly agreed commissioning arrangement with the PCF, clearly defining expectations, outcomes, and resourcing, enabling the PCF to operate as an equal strategic partner. Establish structured engagement mechanisms across all education phases, including early years networks, school clusters, post-16 provider forums and engagement with out-of-area FE providers. These mechanisms ensure all providers are actively engaged in shaping and delivering the SEND system, support shared expectations and strengthen	A consistent, partnership-wide approach to co-production, participation and early resolution is embedded across the 0–25 system, with standardised practice across services and localities and a co-produced Participation and Co-production Charter in operation. A routine quality and learning cycle is established, including annual partnership learning reporting and 'You said, we did' feedback, which is used to inform and refresh the Universal Offer, Experts at Hand and sufficiency priorities. This results in improved consistency of practice, stronger system responsiveness and reduced escalation into formal processes. **Partnership target trajectory:** • Parent/carers and children/young people report feeling supported and child listened to with SEN Support: increase from 47.1% to 57.1% • Parent/carers and children/young people report feeling supported and child listened to with an EHCP: increase from 66.1% to 76.1% • Mediation cases taking place within statutory timescales increases from 60% to 80% • Children and young people's reported happiness in education settings: increase from 64% to 70%	

	collective responsibility for inclusive practice. Through these arrangements, all providers are expected to contribute to co-production activity and delivery of the Universal Offer and Experts at Hand, embedding inclusion and co-production as shared, system-wide responsibilities. **Early resolution and system learning** Clarify routes into SENDIASS (PPR04), complaints and mediation for families across all phases (0-25), and implement a single, system-wide learning loop that captures recurring themes and translates them into service improvements and practice change (Building block 3) Strengthen oversight and coordination of SEND mediation to improve timeliness, using clearer performance data, proactive escalation and joint planning with the commissioned provider to reduce avoidable delay and ensure mediation is arranged within statutory timescales wherever practicable. (PPR01)		

	Co-produce, develop, and implement a standardised SENDIASS data and reporting framework with partners, ensuring consistent capture, analysis, and use of participation and engagement insight to inform SEND Governance, planning and decision-making. Establish measurable feedback loops, including tracking the proportion of engagement themes that result in identified actions, service improvements or policy changes, alongside the timely publication of 'You Said, We Did' updates. This system-wide approach enables learning from participation, SENDIASS, complaints, mediation and tribunal activity to be consistently reviewed and acted upon, supporting earlier resolution of concerns, reducing escalation into formal processes and strengthening system confidence. **Voice of Children and Young People** Co-produce, finalise and publish a Preparing for Adulthood (PfA) Strategy with children and young people, parents/carers and		

	partners, ensuring clear implementation and review mechanisms are in place to evidence impact across education, health and social care. The views of children and young people will be actively sought, recorded and given due weight in all SEND processes, particularly where they have the mental capacity to express their preferences. Practitioners will engage directly using accessible methods, and where views differ from those of the parent/carer, this will be clearly evidenced and considered in decision-making. Quality assurance processes will monitor how effectively young person voice is reflected in plans, provision and outcomes. The voice of children and young people is captured directly and distinctly from parent and carer voice, and is routinely used to inform decision-making, service design and system improvement across the Local Area Partnership. **Workforce, capability and data** Complete a multi-agency SEND training needs analysis across education, health and social care to		

	identify shared and service-specific capability gaps, particularly in co-production, inclusive practice and multi-agency working at SEN Support, annual reviews and transitions. This informs the development of shared expectations, consistent practice and targeted workforce development across the 0–25 system. Strengthen shared data processes across education, health and social care to support coordinated planning, assurance and early intervention. Data is increasingly used in a consistent and structured way to inform commissioning, workforce planning and service improvement, enabling more predictive and proactive system responses to emerging need. Information and data sharing across the new LGR footprint has begun for all partners. **Year 1 milestone:** A consistent, partnership-wide approach to co-production and early resolution is established across the 0–25 system, with clearly defined governance, decision-making and escalation routes through the Local		

	Area Partnership Board (LAPB), and a co-produced and published participation and partnership offer in place and used consistently across partners. A single system-wide learning loop is implemented and applied across all partners and services, translating feedback from families, SENDIASS, complaints and mediation into service improvement and practice change, supporting earlier resolution and reducing escalation into formal processes. **Partnership target trajectory:** (showing how strengthened co-production, participation and system responsiveness are expected to improve parent, carer and young person confidence, and support earlier resolution of concerns, reducing escalation and demand for formal processes) • Parent/carers and children/young people report feeling supported and child listened to with SEN Support: increase from 37.1% to 47.1% • Parent/carers and children/young people report feeling supported and child listened to with an EHCP: increase from 56.1% to 66.1%		

	• Mediation cases taking place within statutory timescales increases from 32% to 60% • Children and young people's reported happiness in education settings: increase from 58.1% to 64%		
Success Measures The roadmap sets out a clear trajectory from current baseline performance to the 3-year targets, with phased improvements driven through strengthening universal provision, scaling Experts at Hand and increasing local capacity.	**1. Improved educational outcomes for children and young people with SEND** (aligned to Goal 1) • Early improvements in outcomes driven by consistent implementation of a co-produced Universal Offer and graduated approach, with increased access to early specialist advice, effective local provision and a structured teaching and learning offer, including SEND-led practice development, through Experts at Hand. • **Leading indicators** include increased use of SEN Support pathways, improved access to EP/SaLT/OT input, effective use of local provision and stronger workforce confidence in inclusive practice. **2. Improved attendance for children and young people with SEND** (aligned to Goal 1) • Attendance begins to improve as earlier identification, coordinated	**1. Improved educational outcomes for children and young people with SEND** (aligned to Goal 1) • Outcomes improve more consistently as inclusive practice, effective local provision and early intervention are embedded across localities, with Experts at Hand supporting sustained workforce capability through a scaled teaching and learning offer and SENA-led practice development. • **Leading indicators** include consistent use of graduated pathways, improved quality of SEN Support, effective use of local provision and reduced variation between settings. **2. Improved attendance for children and young people with SEND** (aligned to Goal 1) • Sustained improvement as attendance support is integrated within inclusive practice and early intervention systems, with consistent use of data to target need, supported by improved teaching approaches across settings.	**1. Improved educational outcomes for children and young people with SEND** (aligned to Goal 1) • Improved outcomes are sustained as strong mainstream inclusion, effective local provision and early intervention operate as business as usual across the 0-25 system, supported by embedded teaching and learning approaches and SENA-led quality assurance. • **Leading indicators** include high-quality, consistent SEN Support, effective use of local provision and sustained progress across phases. **2. Improved attendance for children and young people with SEND** (aligned to Goal 1) • Attendance improvements are embedded as part of a mature, inclusive system where needs are met early and consistently within local provision, with inclusive teaching approaches fully embedded across settings. • **Leading indicators** include low and stable absence rates, effective use

	support and improved local provision reduce unmet need, supported by Team Around the School, Early Help and data-led intervention, with workforce capability strengthened through targeted training and advice delivered via Experts at Hand. • **Leading indicators** include earlier intervention for at-risk pupils, improved engagement, effective use of local provision and reduced reliance on reduced timetables. **3. Reduced suspensions and exclusions of children and young people with SEND** (aligned to Goal 1) • Initial reductions achieved through consistent behaviour and inclusion practice, strengthened outreach and early targeted support via Experts at Hand and AP Tier 1/2 pathways. • **Leading indicators** include increased use of preventative support, effective use of local provision, earlier de-escalation and more consistent decision-making across settings. **4. Increased parent, carer and young person confidence in the SEND system** (aligned to Goal 2)	• **Leading indicators** include improved engagement across cohorts, effective use of local provision and reduced persistent absence linked to SEND. **3. Reduced suspensions and exclusions of children and young people with SEND** (aligned to Goal 1) • Reductions become consistent across the system as schools confidently apply inclusive approaches and use AP as a short-term, targeted intervention within a graduated model. • **Leading indicators** include greater use of Tier 1 outreach, effective use of local provision, reduced reliance on reactive placements and improved reintegration practice. **4. Increased parent, carer and young person confidence in the SEND system** (aligned to Goal 2) • Confidence increases significantly as co-production becomes embedded and the system is experienced as more joined-up, predictable and responsive, including through more consistent experiences of mainstream inclusion. • **Leading indicators** include reduced escalation to formal mediation, increased participation, effective feedback loops (e.g. stronger evidence of “you said, we did” system learning) and timely early resolution.	of local provision and sustained engagement for children and young people with SEND. **3. Reduced suspensions and exclusions of children and young people with SEND** (aligned to Goal 1) • Low and stable levels of suspension and exclusion reflect an embedded inclusive culture, effective local provision and effective early support across all settings. • **Leading indicators** include minimal reliance on crisis interventions, effective use of local provision and consistent reintegration into mainstream provision. **4. Increased parent, carer and young person confidence in the SEND system** (aligned to Goal 2) • High confidence is sustained as co-production, transparency and timely early resolution are fully embedded and routinely experienced by families, with consistent confidence in mainstream provision across the system. • **Leading indicators** include sustained participation, minimal escalation to formal processes, strong system learning and feedback demonstrating trust in the system

	• Confidence improves through clearer pathways, coproduced Universal Offer and strengthened timely early resolution reduce delay and inconsistency, alongside growing confidence in mainstream provision. • **Leading indicators** include increased engagement in co-production, improved visibility of support routes and timely resolution of concerns without escalation. **5. Reduced demand pressures and improved financial sustainability of the SEND system** (aligned to Goal 3) • Demand begins to stabilise through earlier intervention, improved system navigation and reduced avoidable escalation to statutory assessment and high-cost placements, supported by strengthened mainstream capacity and increased local provision through the capital programme. • Improved balance of children and young people with EHCPs educated in mainstream and local provision, with stability in the proportion placed in independent and non-maintained settings despite rising demand	**5. Reduced demand pressures and improved financial sustainability of the SEND system** (aligned to Goal 3) • Demand is more effectively managed as earlier support reduces escalation, and capital investment improves local sufficiency and placement stability, alongside strengthened mainstream capacity through workforce development. • Improved balance of children and young people with EHCPs educated in mainstream and local provision, with stability in the proportion placed in independent and non-maintained settings as demand continues to grow • **Leading indicators** include greater use of Tier 1 outreach, effective use of local provision, reduced reliance on reactive placements and improved reintegration practice.	and embedded timely early resolution. **5. Reduced demand pressures and improved financial sustainability of the SEND system** (aligned to Goal 3) • The system operates more sustainably, with demand effectively managed through earlier intervention and increased local provision capacity, supported by ongoing workforce capability and SEND Advisor-led system oversight. • With a sustained balance of children and young people with EHCPs educated in mainstream and local provision, and continued stability in the proportion placed in independent and non-maintained settings • **Leading indicators** include reduced reliance on high-cost placements, stable demand, effective use of local provision and more stable proportions of children and young people with EHCPs in mainstream and independent provision, contributing to clear value for money across the system.

	• **Leading indicators** include increased support at SEN Support, more effective use of mainstream and local provision, improved alignment between need and provision, and more stable proportions of children and young people with EHCPs in mainstream and independent provision.		

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

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

2026-27 Local delivery plan	**Q2**		**Q3**		**Q4**	
Workstream outline – mapped to building block ***Outcome -*** *what you want to achieve with this workstream* ***Success measures –*** *how you measure progress drawing on metrics from the accompanying data template*	***Milestones per workstream*** *What key milestones will enable you achieve your targeted trajectory*	***Target trajectory per workstream*** *Where do you expect your data to be?*	***Milestones per workstream*** *What key milestones will enable you achieve your targeted trajectory*	***Target trajectory per workstream*** *Where do you expect your data to be?*	***Milestones per workstream*** *What key milestones will enable you achieve your targeted trajectory*	***Target trajectory per workstream*** *Where do you expect your data to be?*
Overarching Year 1 delivery approach: This delivery plan sets out the Local Area Partnership's Year 1 priorities, translating the three-year strategy into clear activity across all workstreams. It covers Universal Offer, Experts at Hand, sufficiency and capital, and partnership and governance, ensuring a complete and system-wide approach to SEND reform. Each workstream includes key milestones, success measures and target trajectories across the year, supporting a phased approach to delivery. Activity focuses on establishing consistent models, strengthening inclusive practice and improving access to early and targeted support. Planned investment is aligned to delivery activity across each workstream and supports the achievement of key milestones, outputs and intended outcomes. Investment is focused on strengthening inclusion, increasing local capacity, improving family experience and reducing escalation to statutory and high-cost provision, contributing to improved outcomes for children and young people with SEND and the long-term sustainability of the system. Funding and resources are set out within the plan to support implementation, monitoring and delivery. Delivery of the Early Years elements of the SEND Reform Plan will align with Hampshire's Best Start in Life Programme and the wider Families First Partnership Programme, supported by the emerging Early Help Strategy. This will help ensure a coordinated approach to prevention, early identification, family support and integrated service delivery across the partnership.						

Universal Offer – Workstream 1: Strong, consistent and co-produced Universal Offer (Building block 1 and 4) **Outcome**: A co-produced, clearly defined 0–25 universal offer aligned to national inclusion standards, enabling children and young people to consistently access appropriate support at SEN Support level without unnecessary escalation. This will improve inclusive practice across all settings, leading to better educational outcomes, attendance and experiences for children, young people and families, while stabilising demand for EHCPs and reducing pressure on the High Needs Block. **Success measures:** 1. Improved educational outcomes for children and young people with SEND 2. Improved attendance for children and young people with SEND 3. Reduced suspensions and exclusions of children and young people with SEND	• Universal Offer (0–25) co-produced, mapped and aligned to national inclusion standards, with formal governance sign-off across Local Authority, Integrated Care Board, education settings (including MATs), and Parent Carer Forum • Delivery model and responsibilities clearly defined across system partners, including education, health and social care • Universal Offer digitally published and accessible to all education settings via agreed platform • System-wide communication approach established, including use of SEN Matters and associated guidance to support understanding and implementation	• Training and support offer accessed by 20% of school phase education settings • Hamshire Approach to Inclusion sign-up and implementatio n reaches 10% of education settings • SENDIASS enquiries relating to SEN Support reduce from baseline (e.g. 18% to 17%), indicating improved system understanding and earlier support • Parent/carer confidence shows baseline established with early	• Universal Offer published via the Local Offer and fully accessible to all education settings across phases • System-wide rollout and communication completed, ensuring awareness and understanding across education, health and social care partners • Training and support offer launched and actively delivered, with engagement across early adopter settings • Graduated approach implemented in practice across early adopter settings, aligned to the universal offer and Hampshire Approach to Inclusion • Monitoring and quality assurance processes operational to identify variation in	• Training and support offer accessed by 35% of school phase education settings • Hamshire Approach to Inclusion sign-up and implementation reaches 20% of education settings • SENDIASS enquiries relating to SEN Support reduce from baseline (e.g. 17% to 16%), indicating improved system understanding and earlier support • Parent/carer confidence monitoring mechanisms in place (PCF survey and feedback), with baseline and	• Universal Offer shows evidence of being consistently implemented across the majority of education settings, with clear expectations embedded in practice. • Needs-based pathways for common areas of need (e.g. Autism, Speech, Language and Communication Needs, SEMH) co-produced, defined and in use across the system, aligned to evidence-informed approaches • Universal Offer fully integrated into system practice and communication, including publication through the Local Offer and supporting materials for both practitioners and families	• Training and support offer accessed by 50% of school phase education settings • Hamshire Approach to Inclusion sign-up and implementation reaches 30% of education settings • SENDIASS enquiries relating to SEN Support reduce to c.15% (from baseline c.18%), reflecting improved clarity, confidence and use of the universal offer • Parent/carer confidence measured through annual PCF survey shows improved outcomes

4. Increased parent, carer and young person confidence in the SEND System **Core minimum requirements alignment** This workstream delivers the following core minimum requirements: • CMR20 – Partnership-wide Universal Offer agreement • CMR21 – Engagement of MATs and PCF • CMR22 – Strengthening early intervention • CMR23 – Meeting common areas of need • CMR24 – Reducing escalation into higher-cost provision **Evidence:** See Universal Offer Evidence Summary Sheet (UO01-UO09)	• Baseline data and monitoring approach established to track implementation, uptake and variation across settings • Baseline post-16 data analysis to identify priority themes for the Universal Offer, including variation in achievement, transition risk and NEET.	improvement, as measured through PCF survey and feedback mechanisms • Increased engagement from post-16 providers, evidenced through improved data completion rates and attendance at information sessions, with baseline measures established to inform development activity.	implementation and target support • Share post-16 performance and variation data with education and strategic services to support a more consistent countywide approach. Review data and build action plan for targeted work including OAP training, support bases expansion and transition support.	approach established to measure year-on-year improvement • Post-16 provision mapping completed, with priority areas identified and an agreed action plan in place, informed by Q2 baseline data and used to target improvement activity.	• Evidence of improved consistency in SEN Support practice across settings, supported by monitoring, audit and quality assurance processes • Sustainability and handover arrangements established, including clear ownership, governance and ongoing improvement approach • Review implementation and gather learning from FE providers to refine the post-16 Universal Offer for Year 2 • Use Year 1 data and provider feedback to identify where further support is required to reduce variability in outcomes	compared to previous year, with supporting in-year feedback indicating increased understanding of SEN Support and the universal offer • Post-16 data is accurate and has an embedded cycle of returns at the end of the academic year, to ensure timely updates from the baseline point.

Universal Offer – Workstream 1a: Support inclusion bases best practice Building blocks: 1, 2 & 4 Enablers: Workforce; Data/Digital **Outcome:** Support inclusion bases operate as a consistent, quality-assured part of the graduated response in mainstream, enabling earlier and more effective support, improving attendance, reducing exclusions and strengthening confidence in mainstream provision, with clear entry/exit expectations and evidence-informed practice shared across settings. **Success measures:** 1. Improved educational outcomes for children and young people with SEND 2. Improved attendance for children and young people with SEND 3. Reduced suspensions and exclusions of children and young people with SEND 4. Increased parent, carer and young person confidence in the SEND System	• Inclusion base principles, for school and post 16 phases, and best practice guidance co-produced and agreed, with headteacher groups (maintained schools and MATs), and formally signed off through stakeholder governance arrangements. • Guidance to focus on use of accommodation, staffing, curriculum and environment to ensure best use of any available resource, as well as how the mainstream inclusion fund might be used for best impact • Early adopter settings begin implementing agreed inclusion base principles in practice, aligned to the Universal Offer and graduated approach	• Training and support offer relating to inclusion bases accessed by 20% of school phase education settings. • Hampshire Approach to Inclusion sign up and associated implementation of guidance reaches 10% of education settings, including early adopter settings implementing inclusion base principles • Early adopter settings implement inclusion base principles in practice, with initial evidence of consistent approaches	• Inclusion base best practice library established and actively populated, using existing digital platforms accessible to education settings • Inclusion base best practice shared and disseminated across all settings, supporting wider uptake and consistent application • Inclusion base principles implemented across a broader cohort of settings (beyond early adopters), aligned to the universal offer and graduated approach • Monitoring and quality assurance processes in place to assess consistency and effectiveness of inclusion base practice across settings	• Training and support offer relating to inclusion bases accessed by 35% of school phase education settings. • Hampshire Approach to Inclusion sign up and associated implementation of guidance reaches 20% of education settings, including early adopter settings implementing inclusion base principles • Inclusion base best practice adopted across an increasing number of settings beyond early adopters, with evidence of improving consistency in approaches	• Review and refresh cycle for inclusion base principles and guidance established and in operation, ensuring continuous improvement • Inclusion base principles consistently embedded across a majority of settings, aligned to the universal offer and graduated approach • Evidence of improved consistency and quality of inclusion base practice across settings, supported through monitoring, audit and quality assurance processes • Sustainability and ongoing ownership arrangements of inclusion bases established, including governance and	• Training and support offer relating to inclusion bases accessed by 50% of school phase education settings. • Hampshire Approach to Inclusion sign up and associated implementation of guidance reaches 30% of education settings, including early adopter settings implementing inclusion base principles • Inclusion base principles consistently embedded across an increasing number of settings, supported by monitoring and quality

Core minimum requirements alignment This workstream delivers the following core minimum requirements: • CMR22 – Strengthening early intervention • CMR24 – Reducing escalation into higher-cost provision **Evidence:** See Universal Offer Evidence Summary Sheet (UO01-UO09).		across participating settings, with baseline measures established through monitoring and audit • SENDIASS enquiries relating to SEN Support reduce from baseline (e.g. 18% - 17%), indicating improved understanding of available provision and earlier intervention		(measured through monitoring and audit) • SENDIASS enquiries relating to SEN Support reduce further (e.g. 17% - 16%), reflecting improved understanding of available provision and earlier intervention	mechanisms for continued development, scaling and reporting	assurance processes to assess consistency and variation in practice • SENDIASS enquiries relating to SEN Support reduce to c.15%, reflecting improved confidence, clearer pathways and earlier intervention

Universal Offer – Workstream 1b: Refresh, extend and embed OAP/SEN Support guidance across phases (incl. post-16) Building blocks: 1 & 4 (interface with 3) Enablers: Workforce; Data/Digital **Outcome**: OAP and SEN Support guidance is current, co-produced and consistently applied across early years, schools and post-16, ensuring settings and families experience a predictable graduated response, improving outcomes, attendance and behaviour, and strengthening confidence and self-advocacy. **Success measures:** 1. Improved educational outcomes for children and young people with SEND 2. Improved attendance for children and young people with SEND 3. Reduced suspensions and exclusions of children and young people with SEND	• Existing OAP and SEN Support guidance, early years practical guidance and Hampshire Approach to Inclusion confirmed as current baseline and consistently applied across settings • OAP and SEN Support guidance review and refresh process initiated, including co-production with partners to ensure relevance across all phases (including post-16) • Approach to integration with Best Start Family Hubs identified, supporting alignment of early years to primary transitions • Feedback and co-production mechanisms	• Training and support offer relating to OAP and SEN Support guidance accessed by 20% of school phase education settings • Hampshire Approach to Inclusion sign-up and implementation reaches 10% of education settings, supporting consistent application of OAP and SEN Support guidance • Initial refreshed guidance developed and piloted across early adopter settings, with baseline established for consistency of SEN Support practice (through monitoring and audit)	• Post-16 application of OAP and SEN Support guidance co-produced with post-16 providers, Parent Carer Forum and SEND Youth Forum, ensuring relevance and consistency across phases • Updated OAP and SEN Support guidance (including post-16 application) formally agreed and signed off through stakeholder governance arrangements (LA, ICB, colleges and PCF) • Young person's guide to OAP and SEN Support guidance co-produced and published, supporting accessibility, understanding and self-advocacy • Updated and cross-phase guidance	• Training and support offer relating to OAP and SEN Support guidance accessed by 35% of school phase education settings • Hampshire Approach to Inclusion sign-up and implementation reaches 20% of education settings, supporting consistent application of updated guidance across phases • Updated OAP and SEN Support guidance adopted across an increasing number of settings across phases (including post-16), with	• Mechanism for monitoring consistency of OAP and SEN Support guidance implementation across settings established and operational, initially across early years and school phases • Mechanism for monitoring use and impact of parent/carer and young person guidance established, supporting consistent understanding and advocacy across the system • Young person's guide to OAP and SEN Support adapted for early years and Key Stage 1 and implemented across settings, supporting	• Training and support offer relating to OAP and SEN Support guidance accessed by 50% of school phase education settings • Hampshire Approach to Inclusion sign-up and implementation reaches 30% of education settings, supporting consistent application of updated guidance across phases • Refreshed OAP and SEN Support guidance embedded across an increasing number of settings, supported by monitoring and audit to assess consistency and variation in SEN Support practice

4. Increased parent, carer and young person confidence in the SEND System **Core minimum requirements alignment** This workstream delivers the following core minimum requirements: • CMR20 – Partnership-wide Universal Offer agreement • CMR21 – Engagement of MATs, PCF and young people • CMR22 – Strengthening early intervention • CMR23 – Meeting common areas of need • CMR27 – Early years to primary transition • CMR28 – Post-16 pathways **Evidence:** See Universal Offer Evidence Summary Sheet (UO01-UO09).	established, using the Local Area Partnership Board (LAPB) as the stakeholder reference group	• SENDIASS enquiries relating to SEN Support reduce from baseline (e.g. 18% → 17%), reflecting improved clarity of guidance and earlier intervention	rolled out across education settings, supporting consistent application of the graduated approach across all phases	evidence of improving consistency in SEN Support practice (measured through monitoring and audit) • SENDIASS enquiries relating to SEN Support reduce further (e.g. 17% → 16%), reflecting improved clarity, accessibility and understanding of guidance across the system	improved transition and alignment with Best Start Family Hubs • Refreshed OAP and SEN Support guidance consistently embedded across phases, with clear expectations reflected in practice • Evidence of improved consistency in SEN Support practice across settings, supported through monitoring, audit and quality assurance processes	• SENDIASS enquiries relating to SEN Support reduces to c.15% (from baseline c.18%), reflecting improved clarity, accessibility and confidence in the application of guidance

Universal Offer – Workstream 1c: Embed and increase uptake of Universal Offer tools and support routes Building blocks: 1 & 4 Enablers: Workforce; Data/Digital **Outcome**: Universal Offer tools, training and support routes are widely understood and consistently used across all phases and localities, enabling earlier and more effective intervention, improving outcomes, attendance and behaviour, and reducing unnecessary escalation. Focus is on uptake, embedding and increasing the use of the tools and support routes in practice. **Success measures:** 1. Improved educational outcomes for children and young people with SEND 2. Improved attendance for children and young people with SEND 3. Reduced suspensions and exclusions of children and young people with SEND 4. Increased parent, carer and young person confidence in the SEND System	• Transforming SEND Improvement Framework reviewed and refined following stakeholder feedback, and formally agreed through governance and stakeholder reference groups • System-wide engagement and communication approach co-produced, ensuring clarity of universal offer tools, support routes and expectations across all phases (early years, schools and post-16, including cross-border settings) • Universal Offer tools and support routes (e.g. e-learning, SEN Support Line, person-centred planning) clearly defined and communicated, with initial access	• Training and support offer relating to Universal Offer tools and support routes accessed by 20% of school phase education settings • Hampshire Approach to Inclusion sign-up and implementation reaches 10% of education settings, supporting consistent use of available tools and support • Universal Offer tools and support routes (e.g. e-learning, SEN Support Line, person-centred planning) accessed by	• Targeted approach to increasing use of Universal Offer tools and support routes (including e-learning, SEN Support Line and person-centred planning) implemented in settings and localities with lower uptake, including early years and primary phases • Targeted engagement and support in accessing the tools, delivered to lower-performing settings and localities, ensuring increased awareness, understanding and access to available tools and support routes • Universal Offer tools and support routes rolled out across a broader cohort of settings, moving beyond initial users and supporting	• Training and support offer relating to Universal Offer tools and support routes accessed by 35% of school phase education settings • Hampshire Approach to Inclusion sign-up and implementation reaches 20% of education settings, supporting consistent use of tools and support routes • Universal Offer tools and support routes (e.g. e-learning, SEN Support Line, person-centred planning) adopted across an increasing number of settings beyond	• Targeted approach to increasing use of Universal Offer tools and support routes extended to secondary and post-16 settings, ensuring continuity and consistency across all phases • Universal Offer tools and support routes consistently used across phases, with clear expectations embedded in practice • Evidence of increased and more consistent uptake of tools and support routes across settings, supported through monitoring, usage data and quality assurance processes • Mechanisms for ongoing monitoring, improvement and targeted support established and in active use to inform continuous	• Training and support offer relating to Universal Offer tools and support routes accessed by 50% of school phase education settings • Hampshire Approach to Inclusion sign-up and implementation reaches 30% of education settings, supporting consistent use of tools and support routes • Universal Offer tools and support routes consistently used across an increasing number of settings, with evidence of reduced variation in uptake

Core minimum requirements alignment This workstream delivers the following core minimum requirements: • CMR22 – Strengthening early intervention • CMR24 – Reducing escalation into higher-cost provision **Evidence:** See Universal Offer Evidence Summary Sheet (UO01-UO09).	enabled across settings	an initial cohort of settings, with baseline established for uptake across the system • SENDIASS enquiries relating to SEN Support reduce from baseline (e.g. 18% - 17%), reflecting improved awareness and use of available support and earlier intervention	consistent use across phases • Monitoring and quality assurance processes in place to track uptake and variation in use of tools and support routes across settings	initial users, with evidence of growing uptake across phases (measured through monitoring and usage data) • SENDIASS enquiries relating to SEN Support reduce further (e.g. 17% - 16%), reflecting improved awareness, access to support and earlier intervention	improvement, ensuring sustained and equitable access to tools and support across all phases	(measured through monitoring and usage data) • SENDIASS enquiries relating to SEN Support reduce to c.15% (from baseline 18%), reflecting improved awareness, access to support, and earlier intervention

Universal Offer – Workstream 1d: Universal training offer: align, promote and refresh Building blocks: 1 & 4 Enablers: Workforce; Data/Digital **Outcome**: A coherent universal SEND training offer is aligned to the Universal Offer and principles of inclusion and early intervention, is consistently accessed across settings, and improves workforce confidence and SEN Support practice, driving better outcomes for children and young people. Focus is to ensure the training is aligned, refreshed, promoted and improving workforce capability. **Success measures:** 1. Improved educational outcomes for children and young people with SEND 2. Improved attendance for children and young people with SEND 3. Reduced suspensions and exclusions of children and young people with SEND 4. Increased parent, carer and young person confidence in the SEND System	• Existing Universal Offer training offer aligned to principles of early intervention and inclusion, and mapped across all phases to support consistent delivery and transition • Engagement and promotion strategy co-produced, ensuring clarity of training offer and expectations for uptake across all phases and settings • Universal Offer training clearly defined and communicated across the system, with initial access enabled for all phases	• Training and support offer relating to Universal Offer training provision accessed by 20% of school phase education settings • Hampshire Approach to Inclusion sign-up and implementation reaches 10% of education settings, supporting increased engagement with training and support offer • Universal Offer training and support offer accessed by an initial cohort of settings across phases, with	• Gaps and additional requirements within the Universal Offer training identified and prioritised, including locality-specific and phase-specific needs (e.g. early years through Best Start Family Hubs and post-16 transition pathways) • Updated and additional training offer developed and tailored to local needs, ensuring relevance across phases and settings • Targeted delivery of training implemented in priority settings and localities, increasing engagement and access where uptake is lowest • Universal Offer training offer rolled out across a broader cohort of settings, with increasing reach across phases	• Training and support offer relating to Universal Offer training provision accessed by 35% of school phase education settings • Hampshire Approach to Inclusion sign-up and implementation reaches 20% of education settings, supporting increased engagement with training and support offer • Universal Offer training and support offer adopted across an increasing number of settings beyond initial users, with evidence of increased	• Universal Offer training reviewed and refreshed, ensuring continued alignment to the universal offer and emerging system needs • Evidence of impact library established and in use, demonstrating the effectiveness of training offer across settings • Universal Offer training consistently implemented across phases, with clear expectations embedded in workforce practice • Evidence of improved workforce confidence and consistency in SEN Support practice, supported through monitoring, participation data and feedback mechanisms • Mechanisms for ongoing improvement,	• Training and support offer relating to Universal Offer training provision accessed by 50% of school phase education settings • Hampshire Approach to Inclusion sign-up and implementation reaches 30% of education settings, supporting increased engagement with training and support offer • Universal Offer training and support consistently accessed and applied across an increasing number of settings, with evidence of

Core minimum requirements alignment This workstream delivers the following core minimum requirements: • CMR22 – Strengthening early intervention • CMR24 – Reducing escalation into higher-cost provision **Evidence:** See Universal Offer Evidence Summary Sheet (UO01-UO09).		baseline established for uptake and workforce engagement • SENDIASS enquiries relating to SEN Support reduce from baseline (e.g. 18% - 17%), reflecting improved awareness of support available and earlier intervention	• Training supports practice in meeting common areas of need, including speech, language and communication, autism and social, emotional and mental health needs • Monitoring and quality assurance processes in place to track uptake, engagement and variation in workforce development across settings	workforce engagement and confidence (measured through participation data and feedback) • SENDIASS enquiries relating to SEN Support reduce further (e.g. 17% - 16%), reflecting improved awareness, skills and earlier intervention across the workforce	monitoring and targeted workforce support established, ensuring sustained delivery and continuous development of the training offer	increased workforce confidence and reduced variation in SEN Support practice (measured through participation data) • SENDIASS enquiries relating to SEN Support reduce to c.15% (from baseline c.18%), reflecting improved workforce confidence, clearer understanding of SEN Support expectations, and earlier intervention

Universal Offer - Workstream 2: securely embedded as the foundation to the graduated approach Building blocks: 2 & 3 Enablers: Workforce; Data/Digital **Outcome:** The Universal Offer is consistently applied as the foundation of the graduated approach across all phases, enabling equitable access to support and avoiding unnecessary escalation where needs can be met at a universal level. A structured review and refresh cycle ensures the offer remains current and responsive, improving educational outcomes, attendance and behaviour, and strengthening confidence in the SEND system. **Success measures:** 1. Improved educational outcomes for children and young people with SEND 2. Improved attendance for children and young people with SEND	• Universal Offer established as the threshold for access to targeted (EAH) support, with agreed expectations for its use across all phases • Mapping of universal to targeted support pathways completed and published, supporting consistent application of the graduated approach • Inclusive Early Years (EY) funding allocated to settings, with clear expectations for use aligned to the Universal Offer • Supporting guidance and resources for use of EY	• Training and support offer accessed by 20% of school phase education settings, supporting understanding of the Universal Offer and graduated approach • Hampshire Approach to Inclusion sign-up and implementation reaches 10% of education settings, supporting consistent use of the Universal Offer as the foundation for SEN Support • Universal Offer used as the threshold for access to targeted support in an initial cohort of settings, with baseline established for	• System for monitoring Universal Offer uptake and use within the graduated approach co-developed and implemented across phases (early years to post-16) • Feedback loop established and operating through stakeholder governance arrangements, supporting ongoing system refinement • Monitoring and evaluation processes for Inclusive Early Years (EY) funding implemented, including links to wider Reform Plan delivery • Quality assurance processes established and shared with	• Training and support offer accessed by 35% of school phase education settings, supporting consistent understanding of the Universal Offer and graduated approach • Hampshire Approach to Inclusion sign-up and implementation reaches 20% of education settings, supporting consistent application of the Universal Offer as the foundation for SEN Support • Universal Offer consistently used as the threshold for access to targeted support across an	• Principles of resolution and assurance established through stakeholder governance arrangements, supporting consistent decision-making across the system • Data sharing processes and arrangements established and in operation, enabling regular information sharing and joint decision-making across the Local Area Partnership • Inclusive Early Years (EY) funding reviewed, including completion of evaluation processes and analysis of impact across settings • Parent and carer views on the use and effectiveness of Inclusive EY funding gathered through established	• Training and support offer accessed by 50% of school phase education settings, supporting consistent understanding of the Universal Offer and graduated approach • Hampshire Approach to Inclusion sign-up and implementation reaches 30% of education settings, with the Universal Offer consistently used as the foundation for SEN Support • Universal Offer embedded as the threshold for access to targeted support across an increasing number of settings, with evidence of

3. Reduced suspensions and exclusions of children and young people with SEND 4. Increased parent, carer and young person confidence in the SEND System **Core minimum requirements alignment** This workstream delivers the following core minimum requirements: • CMR20 – Partnership-wide Universal Offer agreement • CMR22 – Strengthening early intervention • CMR24 – Reducing escalation into higher-cost provision • CMR26 – Early years identification and intervention **Evidence:** See Universal Offer Evidence Summary Sheet (UO01-UO09)	funding developed and shared, enabling impact on provision and early intervention • Early Years shared conversation and setting visit guidance updated and implemented, supporting monitoring of practice and improving transition across early years and primary • Principles and expectations for use of the Universal Offer within thresholds communicated across settings, establishing consistent system understanding	consistency of decision-making across phases • SENDIASS enquiries relating to SEN Support reduce from baseline (e.g. 18% - 17%), reflecting improved understanding of pathways, thresholds and earlier intervention	providers, supporting consistent application of thresholds and use of the Universal Offer • Expectations for use of Inclusive EY funding aligned with updated OAP and SEN Support guidance and communicated across settings • Monitoring and QA processes actively used to assess consistency of Universal Offer application and decision-making across settings	increasing number of settings, with evidence of improving consistency in decision-making (measured through monitoring and QA) • SENDIASS enquiries relating to SEN Support reduce further (e.g. 17% - 16%), reflecting improved understanding of pathways, thresholds and earlier intervention	feedback mechanisms • Learning from monitoring, evaluation and feedback incorporated into future planning, supporting continuous improvement of Universal Offer delivery • Consistent use of the Universal Offer within the graduated approach embedded across settings, with clear expectations reflected in practice • Evidence of improved consistency in application of thresholds and reduced variation in decision-making, supported through monitoring and quality assurance processes	reduced variation and increased consistency in decision-making (measured through monitoring and QA) • SENDIASS enquiries relating to SEN Support reduce to c.15% (from baseline c.18%), reflecting improved clarity of pathways, stronger early intervention and more consistent system navigation

Universal Offer - Workstream 2a: Alternative Provision pathway guidance – three-tier model – links to EAH Building blocks: 1, 2 & 4 Enablers: Workforce; Data/Digital **Outcome**: Alternative Provision (AP) is used as part of a consistent graduated response, with clear expectations and decision-making for Tier 1, Tier 2 and Tier 3 support (including how inclusion bases sit within pathways). This ensures children and young people access the right support earlier, remain connected to mainstream wherever possible, and reduces escalation into higher-cost provision, strengthening confidence in the SEND system. **Success measures:** 1. Improved educational outcomes for children and young people with SEND 2. Improved attendance for children and young people with SEND	• Alternative Provision (AP) pathway guidance reviewed, and refresh process initiated, including co-production of clear mapping across Tier 1, Tier 2 and Tier 3 provision across all phases • Draft AP pathway framework developed, including how inclusion bases and outreach sit within the graduated response • Examples and case studies of appropriate use of Tier 1 outreach within the graduated approach identified and developed • Initial AP pathway	• Training and support offer relating to Alternative Provision pathways accessed by 20% of school phase education settings • Hampshire Approach to Inclusion sign-up and implementation reaches 10% of education settings, supporting consistent use of the Universal Offer as the foundation for SEN Support • Initial cohort of settings begin applying Alternative Provision pathways using the three-tier model (Tier 1–3), with baseline established for appropriate use of AP within the	• Revised, co-produced Alternative Provision (AP) pathway guidance (including three-tier model and case studies) formally published and disseminated across early years to post-16 settings • AP pathway guidance actively implemented across a broader cohort of settings, supporting consistent application of Tier 1–3 provision within the graduated approach • Stakeholder governance arrangements used to develop and publish supporting materials, including summary guidance and frequently asked	• Training and support offer relating to Alternative Provision accessed by 35% of school phase education settings • Hampshire Approach to Inclusion sign-up and implementation reaches 20% of education settings, supporting consistent understanding and application of the AP pathways within the graduated approach • Alternative Provision pathways (Tier 1–3) applied across an increasing number of settings beyond early adopters, with evidence of improving consistency and	• Alternative Provision (AP) pathway guidance, summary materials and frequently asked questions embedded within the Local Offer, ensuring consistent access to information for all partners and families • Consistent messaging and understanding of AP pathways established across partners, with alignment of advice and guidance delivered through Parent Carer Forum (PCF) and wider engagement activity • AP pathways (Tier 1–3) consistently applied across settings, with clear expectations	• Training and support offer relating to Alternative Provision accessed by 50% of school phase education settings • Hampshire Approach to Inclusion sign-up and implementation reaches 30% of education settings, supporting consistent application of the AP pathways within the graduated approach • Alternative Provision pathways (Tier 1–3) consistently applied across an increasing number of settings, with evidence of reduced variation and improved appropriateness of AP use

3. Reduced suspensions and exclusions of children and young people with SEND 4. Increased parent, carer and young person confidence in the SEND System **Core minimum requirements alignment** This workstream delivers the following core minimum requirements: • CMR22 – Strengthening early intervention • CMR24 – Reducing escalation into higher-cost provision **Evidence:** See Universal Offer Evidence Summary Sheet (UO01-UO09).	guidance shared with early adopter settings, supporting early understanding and application of the three-tier model • Governance and stakeholder reference group engaged to review and shape the refreshed AP pathway approach	graduated response • SENDIASS enquiries relating to SEN Support reduce from baseline (e.g. 18% - 17%), reflecting improved understanding of pathways, thresholds and earlier intervention	questions, to support consistent understanding beyond education settings • Targeted engagement and support delivered to settings and partners to embed understanding of AP pathways and appropriate decision-making • Monitoring and quality assurance processes in place to review use of AP pathways and application of the three-tier model across settings	appropriateness of AP use (measured through monitoring and QA) • SENDIASS enquiries relating to SEN Support reduce further (e.g. 17% - 16%), reflecting improved understanding of pathways, thresholds and appropriate use of support	embedded in practice • Evidence of improved consistency and appropriateness in AP decision-making across settings, supported through monitoring and quality assurance processes • Ongoing mechanisms for review, feedback and continuous improvement of AP pathways established, ensuring sustainability and responsiveness to system needs	(measured through monitoring and QA) • SENDIASS enquiries relating to SEN Support reduces to c.15% (from baseline c.18%), reflecting improved understanding of pathways, thresholds and appropriate use of support

Universal Offer - Workstream 2b: System navigation, thresholds and early escalation prevention Building blocks 2 & 3 (supports 1 & 4) Enablers: Workforce; Data/Digital **Outcome**: All partners and settings have a clear, shared understanding of pathways, thresholds and access routes (universal → targeted → statutory), enabling children and young people to access the right support earlier. This improves the predictability of system navigation for families and reduces avoidable escalation into higher-cost provision. **Success measures:** 1. Improved educational outcomes for children and young people with SEND 2. Improved attendance for children and young people with SEND 3. Reduced suspensions and exclusions of children and young people with SEND	• Early years, school improvement and post-16 teams begin to work with settings to coproduce rapid improvement principles for attainment of the SEN support cohort in order to improve both short term and longer-term attainment outcomes • Initial set of rapid improvement principles for the SEN Support cohort developed, supporting consistent application of support within the graduated approach across phases • Alignment of improvement expectations across key transition points (early years, KS1, KS2, KS4 and post-16) defined,	• Training and support offer relating to pathways, thresholds and SEN Support accessed by 20% of school phase education settings • Hampshire Approach to Inclusion sign-up and implementation reaches 10% of education settings, supporting understanding of thresholds and consistent application of the graduated approach • Initial cohort of settings demonstrate use of agreed pathways and thresholds to support decision-making within	• Pathways, thresholds and SEN Support decision-making guidance formally published and disseminated across early years, school and post-16 settings • Targeted engagement and support delivered to settings and partners to embed understanding and consistent application of thresholds and pathways • Supporting materials (including summaries, guidance and frequently asked questions) developed and shared to strengthen understanding across education and wider partners • Monitoring and quality assurance processes in place to review consistency of	• Training and support offer relating to pathways, thresholds and SEN Support accessed by 35% of school phase education settings • Hampshire Approach to Inclusion sign-up and implementation reaches 20% of education settings, supporting consistent understanding and application of pathways and thresholds • Pathways and thresholds used consistently across an increasing number of settings, with evidence of improving alignment in	• Pathways, thresholds and SEN Support decision-making processes consistently embedded across phases, with clear expectations reflected in practice • Supporting materials (including summaries and frequently asked questions) embedded within system resources (e.g. Local Offer), ensuring consistent access for all partners and families • Evidence of improved consistency in decision-making across settings, with reduced variation in application of	• Training and support offer relating to pathways, thresholds and SEN Support accessed by 50% of school phase education settings • Hampshire Approach to Inclusion sign-up and implementation reaches 30% of education settings, supporting consistent application of pathways and thresholds within the graduated approach • Pathways and thresholds consistently applied across an increasing number of settings, with evidence of reduced variation and increased consistency in decision-making

4. Increased parent, carer and young person confidence in the SEND System 5. Reduced demand pressures and improved financial sustainability of the SEND system **Core minimum requirements alignment** This workstream delivers the following core minimum requirements: • CMR22 – Strengthening early intervention • CMR24 – Reducing escalation into higher-cost provision • CMR28 – Post-16 pathways • CMR29 – Post-16 pathways – clarity and coordination **Evidence:** See Universal Offer Evidence Summary Sheet (UO01-UO09).	supporting consistency in support and decision-making • Draft guidance and supporting materials developed to clarify expectations for SEN Support pathways, thresholds and intervention approaches • Early adopter settings engaged to test and refine principles and guidance • Post-16 pathways mapping initiated, with baseline established for routes into education, training, employment and supported internships aligned to preparation for adulthood outcomes	SEN Support, with baseline established for consistency across phases • SENDIASS enquiries relating to SEN Support reduce from baseline (e.g. 18% - 17%), reflecting improved understanding of pathways, thresholds and earlier intervention	decision-making, use of pathways and application of thresholds across settings • Stakeholder governance and feedback mechanisms actively used to review practice and refine expectations across the system • Post 16 pathways further strengthened to ensure clear, coordinated pathways into and out of post 16 provision whether this be education, training, employment or supported internships. To ensure independence and comprehensive development of life skills.	decision-making and reduced variation (measured through monitoring and QA) • SENDIASS enquiries relating to SEN Support reduce further (e.g. 17% - 16%), reflecting improved clarity of system navigation, thresholds and earlier intervention	thresholds and pathways (supported through monitoring and QA) • Feedback and learning from monitoring, stakeholder engagement and system data used to refine pathways and thresholds and inform future planning • Ongoing mechanisms for review, assurance and continuous improvement established, ensuring sustained consistency and system-wide understanding	(measured through monitoring and QA) • SENDIASS enquiries relating to SEN Support reduces to c.15% (from baseline c.18%), reflecting improved clarity of system navigation, more predictable decision-making and earlier intervention • Work on post 16 pathways completed ensuring clear routes into education, training, employment and supported internships and out of post 16 provision to ensure continuity of support into adulthood, including areas such as life skills

Universal Offer - Workstream 2c: Data-led early intervention and Early Help model integration Building blocks 3 & 4 (enabling 1 & 2) Enablers: Data/Digital; Workforce **Outcome**: A shared, data-led approach to early intervention is embedded across the partnership (ISS, PBS and Early Help), ensuring emerging risk (attendance, suspensions/exclusions and reduced-hours provision) is identified earlier and acted on consistently. Early Help is strengthened as a partnership-wide model, supported by a single-family help assessment, with learning from system data translated into practical improvements. **Success measures:** 1. Improved educational outcomes for children and young people with SEND 2. Improved attendance for children and young people with SEND	• Data strategy developed and implemented across ISS, PBS, and social care enabling identification of emerging risk (including attendance, exclusions/suspensions and reduced-hours provision) • Agreed approach for data-led early intervention established, with partners working collaboratively to respond to identified areas of risk and prevent escalation • Initial data insights shared across the partnership, informing targeted early intervention activity and supporting consistent decision-making across phases • Complete Southern Audit of TSEND to ensure compliance, value for money and	• Training and support accessed by 20% of school phase education settings • Data-led identification of emerging risk (attendance, exclusions/suspensions and reduced-hours provision) implemented across an initial cohort of settings, with baseline established for early intervention activity • Early intervention responses initiated in identified areas of risk, supporting earlier action and	• Data strategy actively used across ISS, PBS and social care to identify emerging risk and target early intervention, with evidence of application across priority areas (attendance, suspensions/exclusions and reduced-hours provision) • Findings from Southern Audit incorporated into TSEND and Schools Forum work, with actions agreed to strengthen compliance, value for money and effective resource use	• Training and support accessed by 35% of school phase education settings • Data-led identification of emerging risk (attendance, exclusions/suspensions and reduced-hours provision) applied across an increasing number of settings, with evidence of earlier and more consistent identification • Early intervention responses delivered more consistently across identified areas of risk, with increasing alignment of partner response	• Case studies developed from data-led early intervention approaches embedded within a best practice library and actively used (e.g. SEN Matters) to support system-wide understanding and consistent application • Single family help assessment model implemented across the partnership, supporting coordinated early intervention and more effective transitions between services and phases • Data-led early intervention approach consistently applied across settings, with evidence of earlier identification of risk and more aligned partner response • Ongoing mechanisms for monitoring,	• Training and support accessed by 50% of school phase education settings • Data-led identification of emerging risk (attendance, exclusions/suspensions and reduced-hours provision) embedded across an increasing number of settings, with evidence of earlier and more consistent identification • Early intervention responses consistently delivered across identified areas of risk, with aligned partner response through Early

3. Reduced suspensions and exclusions of children and young people with SEND 4. Increased parent, carer and young person confidence in the SEND System 5. Reduced demand pressures and improved financial sustainability of the SEND system **Core minimum requirements alignment** This workstream delivers the following core minimum requirements: • CMR22 – Strengthening early intervention • CMR24 – Reducing escalation into higher-cost provision • CMR26 – Early years identification and intervention **Evidence:** See Universal Offer Evidence Summary Sheet (UO01-UO09).	efficient use of resources.	prevention of escalation		through Early Help and ISS/PBS Support	feedback and continuous improvement established, ensuring sustained use of data to inform early intervention and prevent escalation	Help and ISS/PBS Support

Universal Offer / Experts at Hand - Workstream 1: Building capacity and sufficiency through teaching and learning Building blocks 1, 2 & 4 Enablers: Workforce; Data/Digital; Governance **Outcome**: A coherent, co-produced teaching and learning offer spanning the Universal Offer and Experts at Hand is established and understood across all phases. The offer is informed by primary areas of need, including speech, language and communication, autism and social, emotional and mental health needs, and supports consistent implementation of the graduated approach, strengthening workforce capability to meet need earlier and reduce escalation. **Success measures:** 1. Improved educational outcomes for children and young people with SEND	• Existing training and support offer aligned across Universal Offer and Experts at Hand layers, and mapped across all phases to support consistent delivery and transition • Engagement and promotion strategy co-produced, ensuring clarity of the training offer and expectations for consistent uptake across all phases • Mapping of delivery partners (including Best Start Inclusion Practitioners, Best Start Family Hubs, school improvement teams and specialist services, including health) completed, establishing clarity on roles, access to support and reducing duplication • Training and support offer communicated across the system, with initial access	• Training and support accessed by 20% of school phase education settings • Schools and settings accessing Experts at Hand support increases to 25%, reflecting improved awareness, confidence and use of available support • Initial cohort of settings demonstrate increased engagement with the teaching and learning offer across Universal Offer and Experts at Hand, with baseline	• Gaps and additional requirements within the teaching and learning training offer identified and prioritised, including locality-specific and phase-specific needs (e.g. delivery through Best Start Family Hubs and post-16 transition pathways) • Shared language and consistent expectations for the teaching and learning offer co-produced with schools, MATs, early years providers, post-16 providers and Parent Carer Forums, supporting common understanding and application of the Universal Offer and Experts at Hand • Localised development and targeted delivery of training implemented in	• Training and support accessed by 35% of school phase education settings • Schools and settings accessing Experts at Hand support increases to 40%, reflecting improved awareness, confidence and use of available support • Teaching and learning offer across Universal Offer and Experts at Hand adopted across an increasing number of settings beyond initial users, with evidence of increased workforce engagement and confidence	• Teaching and learning training offer across Universal Offer and Experts at Hand reviewed and refreshed, ensuring continued alignment to need and system priorities • Evidence of impact library established and in use, demonstrating the effectiveness of the training offer across phases and settings • Training offer consistently implemented across phases and localities, with equitable access embedded and any capacity or sufficiency requirements (including post-16) identified • Co-produced pathways into and out of post-16 settings defined and aligned to the	• Training and support accessed by 50% of school phase education settings • Schools and settings accessing Experts at Hand support increases to 50%, reflecting consistent and confident use of available support • Teaching and learning offer across Universal Offer and Experts at Hand consistently embedded across an increasing number of settings, with evidence of increased workforce confidence and reduced

2. Improved attendance for children and young people with SEND 3. Reduced suspensions and exclusions of children and young people with SEND 4. Increased parent, carer and young person confidence in the SEND System **Core minimum requirements alignment** This workstream delivers the following core minimum requirements: • CMR3 – Integrated delivery model • CMR8 – Phased delivery and implementation • CMR20 – Partnership-wide Universal Offer (delivery) • CMR22 – Strengthened early intervention • CMR23 – Meeting common needs in mainstream • CMR24 – Reducing escalation **Evidence:** See Universal Offer evidence summary sheet (UO01-UO09) and Experts at Hand evidence summary sheet (EAH01-EAH11)	enabled for settings and services across phases	established for workforce capability and application in practice (measured through participation data and feedback)	priority areas and settings, supporting increased engagement with the offer across phases • Teaching and learning training offer further refined for post-16 settings, ensuring alignment with the wider offer and relevance to transition pathways • Monitoring and feedback mechanisms in place to review uptake, workforce engagement and variation in application across settings	(measured through participation data and feedback)	teaching and learning offer, supporting consistent transition and application of the graduated approach • Mechanisms for ongoing review, monitoring and continuous improvement established, ensuring sustained workforce capability and consistent application of the offer • Access to the teaching and learning offer will be actively monitored to ensure equitable reach across all settings and phases, including those with lower engagement or capacity	variation in practice (measured through participation data, feedback and QA)

Experts at Hand – Workstream 1: System setup & workforce mobilisation (CMR8) Building blocks 1 & 2 Enablers: Workforce; Data/Digital; Governance **Outcome**: A single, coherent Experts at Hand inclusion offer is operational across all 11 Hampshire districts, with a consistent workforce model, governance framework and digital infrastructure in place. This enables timely access to multidisciplinary advice, strengthens mainstream inclusion and reduces premature escalation. **Success measures:** 1. Improved educational outcomes for children and young people with SEND 2. Improved attendance for children and young people with SEND 3. Reduced suspensions and exclusions of children and young people with SEND 4. Increased parent, carer and young person confidence in the SEND System	• Multi-agency EaH Implementation Group established, jointly led by the local authority and ICB, with clear governance, oversight and integration across education, health and family hub services (EAH11) • LDTs established across all districts, aligned to the workforce model, with named leads coordinating multidisciplinary delivery at locality level across education and health services • Workforce mobilisation underway across local authority and ICB partners, including recruitment, redeployment and alignment of EP, in house SaLT, OT and specialist education capacity • Core EaH delivery model defined and operational, co-produced with education and health partners, including a	• Schools and settings accessing Experts at Hand support increases to 25% of all education settings, reflecting initial uptake of the delivery model across districts • Children and young people accessing targeted support pathways (including AP Tier 1/2 and multi-disciplinary support) increases to 25%, reflecting earlier access to support through the Experts at Hand model	• Experts at Hand offer delivered across all districts, with universal CPD and support available to all settings across phases • Systems and processes for early advice, consultation and targeted multidisciplinary support operational across Local Delivery Teams, with clear and consistent access routes for all settings • Outreach delivery implemented across districts (including Education Centres / APST, special schools and Best Start Inclusion Practitioners), aligned to the Experts at Hand model and AP Tier 1/2 pathways • Cross-phase clusters established in each district to	• Schools and settings accessing Experts at Hand support increases to 35%, reflecting wider uptake of the delivery model across districts • Children and young people accessing targeted support pathways (including AP Tier 1/2 and multi-disciplinary support) increases to 35%, reflecting increased access to earlier and more appropriate support • Number of children and	• Experts at Hand operating as a consistent delivery model across all districts, with Local Delivery Teams fully embedded and delivering multidisciplinary support across education and health • Workforce model fully established across districts, including Educational Psychology, Speech and Language Therapy (SaLT), Occupational Therapy (OT) and specialist education capacity • Outreach delivery (including Education Centres / APST, special schools and Best Start Inclusion	• Schools and settings accessing Experts at Hand support increases to 50%, reflecting consistent and embedded use of the delivery model across all districts • Children and young people accessing targeted support pathways (including AP Tier 1/2 and multi-disciplinary support) increases to 50%, reflecting sustained access to appropriate early support • Number of children and

5. Reduced demand pressures and improved financial sustainability of the SEND system **Core minimum requirements alignment** This workstream delivers the following core minimum requirements: • CMR1 – Delivery model and rationale • CMR2 – Partnership approach to model design • CMR3 – integrated delivery with services • CMR7 – Access to specialist professionals (model design) • CMR8 – Phased delivery and implementation • CMR9 – Governance and accountability model • CMR10 – Joint governance and accountability • CMR11 – Equitable access (model design) • CMR30 – EaH commissioning **Evidence:** See Experts at Hand evidence summary sheet (EAH01-EAH11)	teaching and learning model (including SEND Adviser-led targeted support) aligned to local need and the graduated approach (EAH09) • LAPB to agree funding for NHS leadership and overall EaH model; NHS Provider (HIOWHCT) to agree secondment process through internal governance. • Apprenticeship and Masters route clarified • Phase-specific delivery models defined for Early Years and Post-16, co-produced with providers and partners across education and health, aligned to the wider EaH offer with clear referral and access routes • Outreach models reviewed and aligned (including Education Centres / APST, special schools and Best Start Inclusion Practitioners, including SLA review), ensuring consistency with the EaH approach,	• Number of children and young people without an EHCP accessing multi-disciplinary support (including in house SaLT, OT and EP input) increases from the baseline of 5,530 to 6,500 • Percentage of children and young people with SEN not in education reduces from 7% to 6.9%, reflecting early impact of improved access to support and prevention of escalation	support targeted CPD, shared learning and system-wide capacity building • Digital platform development progressed, including completion of specification, procurement and governance requirements to enable system-wide access • Targeted support approaches implemented to ensure equitable access across settings, including those historically less engaged • Phase 2 of the Best Start Inclusion Practitioner outreach model implemented, strengthening early years identification and access to support • Initial monitoring and review of	young people without an EHCP accessing multi-disciplinary support (including in house SaLT, OT and EP input) increases to 7,400, reflecting broader reach of the workforce model • Percentage of children and young people with SEN not in education reduces to 6.8%, reflecting improved access to support and emerging impact on inclusion	Practitioners) fully implemented and aligned to the Experts at Hand model and AP Tier 1/2 pathways • Digital service portal operational and embedded, supporting consistent access to CPD, consultation and targeted multidisciplinary support across the system • Impact of CPD, consultation and outreach evaluated across districts, with evidence used to refine the Experts at Hand delivery model and inform continuous improvement • Summative evaluation of effectiveness of referral and triage system and adjustments as	young people without an EHCP accessing multi-disciplinary support (including in house SaLT, OT and EP input) increases to 8,281, reflecting full implementation of the workforce model • Percentage of children and young people with SEN not in education reduces to 6.6%, reflecting sustained impact on inclusion and prevention of escalation

	integration with health-led delivery, and AP Tier 1/2 pathways • Universal CPD framework agreed and co-produced across education and health partners, aligned to local delivery arrangements and supporting consistent workforce development • Digital delivery infrastructure initiated, including development of the online service portal and procurement processes, enabling access to training, consultation and multidisciplinary support • Referral form and triage system established, enabling settings to request support in a timely way, with LDTs monitoring access and the Implementation Group reviewing system-wide referral patterns		delivery, including workforce capacity, targeted teaching and learning support, and outreach requests, informing refinement and Year 2 planning • Clarify numbers expected to take up of Masters / apprenticeship routes and the impact on staffing model. Develop system wide menu of options and digital resource ICB/HCC • Interim evaluation of the effectiveness of referral and triage systems and reshaping as necessary • Evaluation of offer access to date and action planning for those settings who would benefit from access to the offer but have not yet done so.		necessary ready for Year 2 • Year 2 priorities co-produced and agreed through governance arrangements, informed by Year 1 delivery data, including continued development of post-16 provision and alignment with early help and family services	

Experts at Hand – Workstream 2: Delivery and impact through targeted support and multi-disciplinary pathways (CMR8) Building blocks 1 & 2 Enablers: Workforce; Data/Digital; Governance **Outcome**: Children and young people with SEND receive earlier, targeted support through Experts at Hand, including access to multi-disciplinary advice and intervention, ensuring needs are met at the earliest stage possible. This supports improved engagement in education, strengthens mainstream inclusion, reduces suspensions and exclusions, and decreases the need for escalation to statutory assessment and high-cost provision, including reduction in the number of children and young people not in education through coordinated multi-agency working across education, health and social care, with an integrated workforce model that builds system capacity alongside delivering targeted support.	• Experts at Hand support delivered to an initial cohort of schools and settings across all districts, including access to consultation, CPD and early targeted support (EAH04). • Targeted support pathways operational for children and young people (including AP Tier 1/2, outreach and early intervention), sample of cases identified and coordinated through Local Delivery Teams • Multi-disciplinary support delivered through a coordinated model, with local authority and NHS practitioners working jointly, including Educational Psychology, in house Speech and	• Schools and settings accessing Experts at Hand support increases to 25%, reflecting initial delivery to early adopter settings across districts • Children and young people accessing targeted support pathways (including AP Tier 1/2 and multi-disciplinary support) increases to 25%, reflecting early access to targeted support through the Experts at Hand model	• Experts at Hand support scaled across all districts, with increased numbers of schools and settings accessing consultation, CPD and targeted support pathways • Targeted support pathways (including AP Tier 1/2, outreach and early intervention) delivered at increased scale and with greater consistency across districts • Multi-disciplinary support (including Educational Psychology, in house Speech and Language Therapy (SaLT) and Occupational Therapy (OT) input) delivered at scale to children and young people without an EHCP, with improved access across settings	• Schools and settings accessing Experts at Hand support increases to 35%, reflecting wider uptake and consistent use of consultation, CPD and targeted support pathways across districts • Children and young people accessing targeted support pathways (including AP Tier 1/2 and multi-disciplinary support) increases to 35%, reflecting increased access to earlier and more	• Experts at Hand operating as a fully integrated delivery model across all districts, with local authority and health practitioners providing a coordinated multidisciplinary offer • Targeted support pathways (including AP Tier 1/2, outreach and multi-disciplinary input) embedded as part of the graduated response across all phases and settings • Multi-disciplinary support (including Educational Psychology, in house Speech and Language Therapy (SaLT) and Occupational Therapy (OT) delivered consistently at scale to children and young people without an EHCP	• Schools and settings accessing Experts at Hand support increases to 50%, reflecting consistent and embedded use of consultation, CPD and targeted support pathways across all districts • Children and young people accessing targeted support pathways (including AP Tier 1/2 and multi-disciplinary support) increases to 50%, reflecting sustained access to earlier and more appropriate support

Success measures: 1. Improved educational outcomes for children and young people with SEND 2. Improved attendance for children and young people with SEND 3. Reduced suspensions and exclusions of children and young people with SEND 4. Increased parent, carer and young person confidence in the SEND System 5. Reduced demand pressures and improved financial sustainability of the SEND system **Core minimum requirements alignment** This workstream delivers the following core minimum requirements: • CMR3 – Integrated delivery with services • CMR4 – Alignment to AP model • CMR5 – AP capacity approach • CMR6 – Specialist outreach from providers • CMR7 – Access to specialist professionals (delivery)	Language Therapy (SaLT) and Occupational Therapy (OT) input with NHS clinical leadership layered in appropriately (EAH03) • Early advice and consultation provided to schools and settings, supporting delivery at SEN Support and strengthening confidence in meeting need within the graduated approach (EAH03) • Multi-agency delivery established (including links with early help, family support and social care), enabling coordinated support for children and young people and their families • Initial use of outreach and AP Tier 1 support	• Number of children and young people without an EHCP accessing multi-disciplinary support (including SaLT, OT and EP input) increases from the baseline of 5,530 to 6,500, reflecting initial implementation of the workforce model • Percentage of children and young people with SEND not in education reduces from 7% to 6.9%, reflecting early impact of improved access to	• Outreach and cluster-based delivery embedded across localities, supporting earlier intervention and consistent practice across groups of schools and settings • Multi-agency working embedded across localities, with coordinated delivery involving education, health, early help and social care partners • Targeted approaches implemented to ensure equitable access to Experts at Hand support across all settings, including those historically less engaged • Improved timeliness of access to multi-disciplinary advice and support delivered across settings through the	coordinated support • Number of children and young people without an EHCP accessing multi-disciplinary support (including in house SaLT, OT and EP input) increases to 7,400, reflecting expanded reach of the workforce model across settings • Percentage of children and young people with SEND not in education reduces to 6.8%, reflecting improved engagement and emerging impact of	• Outreach, AP Tier 1 and inclusion-led approaches fully embedded across districts, supporting sustained use of early intervention within mainstream provision • Data systems in place across districts to monitor access to Experts at Hand support, multi-disciplinary input and system use, supporting ongoing performance management • Evaluation of delivery completed and used to inform continuous improvement of the Experts at Hand model and future delivery priorities. This includes review of all spend to date and planning future allocations across the ICB and LA.	• Number of children and young people without an EHCP accessing multi-disciplinary support (including SaLT, OT and EP input) increases to 8,281, reflecting full implementation of the workforce model across settings • Percentage of children and young people with SEN not in education reduces to 6.6%, reflecting sustained impact of early intervention, coordinated multi-agency support and improved

• CMR8 – Phased delivery and implementation • CMR10 – Joint governance and accountability (delivery) • CMR11 – Equitable access across settings **Evidence:** See Experts at Hand evidence summary sheet (EAH01-EAH11)	implemented across settings, aligned to the Experts at Hand model and wider system pathways • Data collection processes established across districts to monitor access to targeted support, multi-disciplinary input and early system use	support and coordinated intervention	Experts at Hand model • Data collection and monitoring expanded across districts to track access to support, multi-disciplinary input and system use, informing ongoing refinement	earlier intervention and coordinated multi-agency support	• Shared accountability embedded across education, health and social care partners, with consistent multi-agency practice operating across all districts	system inclusion • Year 2/3 spending priorities reviewed and agreed, informed by Year 1

SEND Sufficiency and Place Planning (Capital) – Workstream 1: Strengthening Local Capacity and Placement Stability *Delivery of 26/27 SEND capital programme* Building blocks 3 & 4 Enablers: Capital; Governance; Finance / Commissioning **Outcome**: A clearly governed, data-led and evidence-based SEND capital and sufficiency programme is delivered and mobilised in 2026/27, increasing local mainstream and inclusion-base capacity in priority areas. This strengthens placement stability and improves access to local provision, enabling more children and young people with SEND to be supported within mainstream settings where appropriate. The programme supports improved outcomes, attendance and inclusion, while reducing reliance on independent and out-of-area placements and contributing to long-term financial sustainability through a shift towards earlier, local, and	• SEND Sufficiency and Capital Strategy approved, setting a clear, data-led approach to increasing local capacity placement stability. • Integrated demand forecasting model in use, informing sufficiency planning and aligning provision to EHCP trends and demographics (including published Sufficiency duty) • Governance arrangements established and operating through the Specialist Provision Board, with clear oversight of the SEND Capital Programme (including major, intermediate and specialist provision projects) • Capital programme pipeline defined for 2026/27 and 2027/28, including	• Capital programme and delivery pipeline established, with clear alignment between demand forecasts, approved schemes and planned delivery • Baseline understanding of sufficiency gaps and priority areas established using demand, EHCP trends and demographic data • Governance arrangements in operation to oversee the SEND Capital Programme, supporting clear prioritisation,	• Capital delivery programme for 2026/27 actively progressing, with priority schemes (including inclusion bases and mainstream adaptations) on site or in advanced stages of delivery in priority districts • Medium-term sufficiency planning established, with updated Children's Services Capital Programme (2027/28–2029/30) and School Places Plan (2027–2031) aligned to demand forecasts and prepared for approval. • Early Years Childcare Sufficiency Assessment refreshed and showing 3-year placement and need forecasts • Governance arrangements.	• Capital delivery programme progressing across priority schemes, with inclusion bases and mainstream adaptations in delivery or advanced stages across key districts • Sufficiency planning (including Early Years) increasingly aligned to demand data, with updated capital programme and School Places Plan providing a clear medium-term view of capacity development • Governance arrangements operating consistently, providing oversight of delivery	• Medium-term sufficiency planning embedded, with Children's Services Capital Programme (2027/28–2029/30) and School Places Plan (2027–2031) approved and actively informing capacity planning and delivery priorities • Capital delivery programme for 2026/27 substantially progressed, with schemes delivering increased local capacity through inclusion bases, mainstream adaptations and targeted provision • Governance and programme oversight embedded, with regular review of delivery progress, sufficiency impact and alignment to demand informing decision-making	• Capital programme delivery substantially progressed, with schemes increasing local capacity through inclusion bases, mainstream adaptations and targeted provision across priority areas • Medium-term sufficiency planning consistently informing delivery, with approved capital programme and School Places Plan providing clear direction for future capacity development • Governance and programme oversight embedded, with delivery

cost-effective provision. Early years sufficiency is stable at county level and increasingly aligned to local need, with strengthened mainstream inclusion enabling more children with SEND to access appropriate support earlier preventing escalation. **Success measures:** 1. Improved educational outcomes for children and young people with SEND 2. Improved attendance for children and young people with SEND 4. Increased parent, carer and young person confidence in the SEND System 5. Reduced demand pressures and improved financial sustainability of the SEND system **Core minimum requirements alignment** This workstream delivers the following core minimum requirements: • CMR12 – Understanding demand and system pressure	priority schemes, sequencing of approvals and alignment to local need and sufficiency priorities • Feasibility and viability work underway across priority schemes, supporting development of inclusion bases, mainstream adaptations and targeted specialist provision • Mapping of support base capacity across county has been completed for all age ranges. Settings identified with capacity to expand using existing space. • Mainstream-first approach embedded within capital planning, with specialist provision developed only where need cannot be met through inclusive	sequencing and delivery • Mainstream-first approach embedded within planning, with provision aligned to local need and supported by travel impact considerations to improve access to local provision • Improved forecasting confidence in Early Years Sufficiency and understanding of areas of need / gaps related to SENIF • A shared post-16 sufficiency baseline is established, including where demand,	operating effectively through the Specialist Provision Board, providing oversight of delivery, prioritisation and programme performance across all capital schemes • Pipeline of future provision developed in collaboration with schools and partners, including identification of priority sites and progression toward feasibility and viability for 2028 delivery • Data-led planning approaches in active use, including travel impact assessments and system analysis informing decision-making, alongside clear application of mainstream-first principles in provision development (including specialist base guidance	progress, prioritisation and programme performance across capital schemes • Pipeline of future provision developing across priority areas, with schools and partners engaged in planning and progressing schemes toward feasibility and delivery • Data-led approaches in active use, including travel impact assessments and demand analysis, informing decision-making and strengthening alignment to mainstream-first principles	across the partnership • Sufficiency modelling refined and validated, with updated data confirming assumptions and informing planning for Years 2–3 of delivery • Learning from delivery and emerging impact embedded within future planning, with next-phase schemes (including 2028 projects) progressing through feasibility and viability in collaboration with schools and partners • Support bases requiring capital works identified for member approved funding once approved. • EY Sufficiency data is tested and integrated into Best	progress, sufficiency impact and alignment to demand routinely informing decision-making • Sufficiency modelling reliably informing planning, with refined data supporting confident forecasting and alignment of provision to need across the system • Pipeline of future provision advanced, with schemes progressing through feasibility and viability informed by delivery learning and validated sufficiency modelling

• CMR13 – Mainstream-first approach to sufficiency • CMR14 – Development of inclusion bases • CMR15 – Strategic use of capital and estate • CMR16 – Improving accessibility of provision • CMR17 – Reducing travel and out-of-area placements • CMR18 – Responsive local place planning • CMR19 – Travel impact assessment and mitigation • CMR25 – Early years sufficiency (system alignment) **Evidence:** See Sufficiency and Place Planning evidence summary sheet (SPP01-SPP09)	settings and proposals demonstrably reduce reliance on independent and out-of-area placements • Travel impact considerations embedded within capital planning, including assessment of journey times, distance and transport need to improve access to local provision including identification and implementation of travel-related mitigations • Refresh Early Years Sufficiency data to include forecast models for next 3 years as part of the EY Sufficiency Assessment • Review of EY SEN IF data (UO01) to ensure equity of access across the county.	outcomes and destination risks are most acute. • Priority localities and providers for further sufficiency work are identified for post 16. • Post-16 is explicitly included in the wider sufficiency and capital planning cycle	aligned to DfE expectations) • Targeted work completed on settings where support bases are identified by data led approaches. • EY SEN Sufficiency Assessment analysis submitted to members identifying forward trajectories and data for all children and children with SEN. • SEN IF review, analysis and audit recommendations considered. • Refine the post-16 sufficiency picture by triangulating provider data with district-level attainment and NEET patterns. • Identify where post-16 pathways are insufficiently clear or sufficiently inclusive, particularly for young people at risk	• Partners are able to respond to Early Years need in a responsive, data led way that is informed by a range of information including SEN IF • Post-16 sufficiency issues are more clearly defined at county and locality level. • The system has a clearer understanding of where pathway, capacity or progression gaps are contributing to poorer outcomes or higher NEET. • Early planning is in place for Year 2 action on post-16 sufficiency and	Start Family hubs planning • Evaluate the impact of the SEN Reforms on SEN IF uptake. • Finalise the Year 1 post-16 sufficiency analysis, including agreed priority gaps in capacity, progression pathways and locality variation. Use this analysis to inform the wider sufficiency roadmap and future planning for FE inclusive pathways and PfA-related provision. • Agree how post-16 sufficiency will be monitored in Year 2, including alignment to destination, NEET and progression data. • Ensure lessons from Year 1 analysis are reflected in the next stage of capital/place-planning and provider engagement.	• SEN IF embedded as a strategic inclusion tool that aligns to local need and outcomes • Early Years sufficiency aligned with wider SEND sufficiency planning. • A clearer and more evidence-based post-16 sufficiency picture is in place. • Post-16 capacity and pathway development are better aligned to identified need and destination risk. • The local area is ready to move into Year 2 with a defined sufficiency response for post-16.

	• Post-16 sufficiency baseline established, including analysis of achievement, attainment, NEET and provider capacity, with geographic and provider-level variation identified to inform future planning • Engagement with FE providers initiated to align capital investment and sufficiency planning with inclusive pathways and Preparing for Adulthood provision		of disengagement or poor progression. • Develop an initial post-16 sufficiency response, including options to strengthen local inclusive pathways, improve progression routes and align provision more closely to need. • Ensure the wider sufficiency workstream is tracking post-16 alongside early years and statutory school age in routine capacity and forecasting activity.	pathway development • Delivery of additional local places through the capital programme tracked against planned delivery profile, supporting monitoring of sufficiency impact and programme performance		• Delivery performance and sufficiency impact evaluated against planned delivery profile, informing future capital planning

Partnerships, Participation & Resolution (PP&R) – Workstream 1: Participation, Co-production & Lived Experience Building blocks: 2 & 5 Enablers: Participation & Co-production **Outcome**: Children, young people and families feel listened to, valued and confident that their views influence decisions and service design, with participation embedded consistently across the Local Area Partnership; both strategically and operationally. **Success measures:** 1. Improved educational outcomes for children and young people with SEND 4. Increased parent, carer and young person confidence in the SEND System 5. Reduced demand pressures and improved financial sustainability of the SEND system **Core minimum requirements alignment** This workstream delivers the following core minimum requirements:	• A baseline of co-production practice established using NHSE guidance, with strengths, gaps and priority areas identified • Co-production charter co-produced with partners and stakeholders, including agreed principles, governance arrangements and shared expectations • Co-production governance structures established, including a multi-agency working group and joint task and finish arrangements with representation from key stakeholder • Engagement activity initiated across the	• Baseline established for participation reach, diversity and representation across services, including identification of key gaps • Participation activity recording established across early adopter services, including volume of activity and number of settings engaged • Co-production input evidenced in governance processes, with parent/carer and CYP voice routinely captured and recorded (e.g.	• Co-production charter finalised, informed by the Q2 baseline and stakeholder engagement (including seldom-heard groups), and formally adopted across the Local Area Partnership • Co-production implementation approach in delivery, including training, communications and alignment to governance and workstreams, supporting consistent application across partners • Co-produced participation and engagement plan established and operational, building on Q2 design work, with defined roles, responsibilities and mechanisms for involvement across the partnership	• Participation activity established and consistently recorded across a wider range of services and settings, reflecting increased reach and adoption of the co-production approach • Co-production practice implemented across priority services and workstreams, with activity targeted based on Q2 baseline findings and identified gaps • Parent, carer and CYP voice routinely captured and informing governance and decision-making, with evidence of participation	• Co-production charter fully embedded across the Local Area Partnership, with consistent application in governance, service design and delivery across education, health and social care • Co-production approaches established as business as usual across services and workstreams, including routine use of practitioner tools, engagement mechanisms and feedback loops • School-based and community engagement models embedded across districts, including sustained delivery of the Parent Champion model (where approved) and consistent use of “You said, we did” approaches	• Participation and co-production activity consistently delivered across all services and workstreams, with high levels of adoption and routine practice across the partnership • Engagement activity reaching a broad and representative range of children, young people, parents and carers, including sustained improvement in engagement of previously underrepresented groups • Parent, carer and CYP voice routinely embedded in governance and decision-making, with

• CMR37 – Co-production with Parent Carer Forums • CMR38 – Voice of children and young people • CMR34 – System-wide engagement and participation **Evidence:** See Partnership, Participation and Mediation evidence summary sheet (PPR01-PPR09)	partnership, with mechanisms in place to capture and incorporate parent, carer and CYP voice, including mapping of feedback routes and participation approaches • Sustainable partnership and commissioning approach for co-production agreed, including review of current funding, commissioning principles and partnership expectations (including PCF and wider engagement models • Systems and processes for capturing, measuring and evidencing co-production activity established,	PCF, CYP, SENDIASS contributions • Engagement activity initiated across an initial cohort of services and settings, demonstrating early reach of the co-production approach	• School-based and community engagement approaches implemented and expanded, including pilot delivery, parent champion model (where approved) and tools/templates in use to support consistent practice across settings • Co-production approaches embedded across services and workstreams, with practitioner tools in use and participation activity, feedback and insight being routinely captured • Monitoring and reporting framework in operation, with participation data, themes and insight consistently reported into governance structures to inform delivery and decision-making	shaping service design and delivery • Engagement activity expanded across an increasing number of settings and services, including those previously underrepresent ed demonstrating improved reach and inclusivity • Participation data, feedback and insight regularly reported and used to inform delivery, with emerging themes driving refinement of practice across the partnership	• Participation and co-production activity consistently reaching a broad and representative range of stakeholders, including improved engagement of previously underrepresented groups identified in the Q2 baseline • Participation data, feedback and insight routinely informing governance, commissioning and service improvement decisions across the partnership • Monitoring, quality assurance and review processes embedded, including regular evaluation of participation activity, timeliness and impact across partners • Joint commissioning arrangements for participation and co-	clear evidence of participation influencing service design, commissioning and system improvement • Participation data, feedback and insight consistently used across the partnership to inform delivery, with established reporting cycles and clear accountability for action • Monitoring and quality assurance demonstrating improvements in consistency, timeliness and impact of co-production activity across education, health and social care • 47.1% of parent/carers and

	including aligned tools, templates and audit approaches across services • Operating model and workflows for co-production delivery agreed across partners, including baseline measures for engagement, timeliness and impact.		• Joint commissioning arrangements for participation and co-production agreed and implemented, including updated agreements and alignment to the wider engagement plan • Delivery processes, templates and systems embedded across partners, supporting consistent capture, strengthening engagement across education, health and social care, and improving reach to underrepresented groups identified in the Q2 baseline		production fully implemented and operating as part of business as usual, with ongoing monitoring and review through governance structures • Continuous improvement approach established, including self-assessment against the NHSE co-production benchmark, with improvement actions identified and implemented to strengthen practice over time	children/young people report feeling supported and child listened to with SEN Support • 66.1% of parent/carers and children/young people report feeling supported and child listened to with an EHCP • Children and young people's reported happiness in education settings: increase from 58.1% to 64%

Partnerships, Participation & Resolution (PP&R) – Workstream 1a: Integrated Partnership Practice & System Leadership Building blocks 2 & 5 Enabler: Partnership Working & System Leadership) **Outcome**: Consistent, joined-up SEND practice across the county and within services, with increased confidence among children, young people and families that education, health and social care work together to support outcomes, and strengthened early-resolution pathways delivering early reductions in legal and casework costs. **Success measures:** 1. Improved educational outcomes for children and young people with SEND 4. Increased parent, carer and young person confidence in the SEND System 5. Reduced demand pressures and improved financial sustainability of the SEND system	• Clear and consistent SEND governance structure established across the Local Area Partnership, informed by the DfE Partnership Board Toolkit and existing governance mapping • Roles, remit and expectations for SENDIASS defined and agreed across the partnership, including clear principles regarding independence and contribution to governance and resolution processes • Governance terms of reference reviewed, aligned and formally agreed across key partnership forums, ensuring clarity of purpose, decision-making and accountability • Partners engaged and aligned to revised governance	• Clear governance structures established across the Local Area Partnership, with defined roles, responsibilities and decision-making pathways in place • Governance arrangements and agreed terms of reference adopted across key partnership forums, with early implementatio n underway • SENDIASS role and contribution clearly defined and understood across partners, including	• Governance arrangements operating consistently across the Local Area Partnership, with agreed structures, roles and decision-making processes actively in use across key forums • Partners working in a more coordinated and consistent way across education, health and care, demonstrating shared accountability and alignment to agreed governance and system leadership arrangements • SENDIASS actively contributing to governance and system leadership	• Increased consistency in governance application across partnership forums, with improved adherence to agreed structures, roles and decision-making pathways • Increased consistency in multi-agency working across education, health and care, demonstrating improved alignment to governance and system leadership arrangements • SENDIASS routinely contributing to governance and system leadership processes, with its role and independence clearly reflected in decision-making and resolution activity	• Governance arrangements fully embedded across the Local Area Partnership, with clear structures, roles and decision-making processes consistently applied across all partnership forums • Partners working in a consistently joined-up way across education, health and care, demonstrating shared accountability and aligned practice across services and workstreams • SENDIASS fully integrated within governance and system leadership arrangements, with its role, independence and contribution embedded in decision-making and early resolution processes	• Governance and system leadership arrangements consistently applied across all partnership forums, with high levels of adherence to agreed roles, decision-making and escalation processes • Partners working in a consistently coordinated and joined-up way across education, health and care, demonstrating sustained shared accountability and alignment across services and workstreams • SENDIASS routinely and visibly influencing governance and

Core minimum requirements alignment This workstream delivers the following core minimum requirements: • CMR31 – Partnership governance and accountability • CMR32 – Representation across education phases • CMR33 – Partnership maturity and shared data use • CMR34 – System-wide engagement and collective responsibility **Evidence:** See Partnership, Participation and Mediation evidence summary sheet (PPR01-PPR09)	and system leadership arrangements, with shared expectations for joint working, accountability and decision-making • Updated governance arrangements implemented across the Local Area Partnership, with clear structures for oversight, escalation and coordinated system leadership in place	agreed principles of independence and involvement in governance and resolution processes • Partner engagement achieved across education, health and care, demonstrating early alignment to revised governance and system leadership arrangements • Updated governance arrangements implemented across priority forums and workstreams, demonstrating initial consistency in oversight, escalation and	processes, with regular input to partnership forums and clear visibility of its role and independence • Regular partnership insight and performance reporting established, including presentation of multi-agency insight (e.g. SENDIASS, participation, complaints and mediation data) to governance boards to inform decision-making • Clear escalation and resolution pathways in operation across the partnership, supporting earlier and more coordinated responses to emerging issues and reducing	• Partnership insight and performance reporting regularly informing governance discussions, including use of multi-agency data to support decision-making and system oversight • Escalation and resolution pathways in operation across the partnership, supporting earlier and more coordinated responses to issues and reducing fragmentation in practice	• Partnership insight and performance reporting embedded as business as usual, with multi-agency data (including SENDIASS, complaints and mediation insight) routinely informing governance, commissioning and service improvement • Escalation, early resolution and quality assurance processes operating effectively across the partnership, supporting coordinated responses, reducing fragmentation and driving continuous improvement • Training needs analysis findings implemented, informing shared expectations, consistent practice and a targeted multi-agency workforce	decision-making, with its contribution embedded within system leadership and early resolution processes • Partnership insight and performance data consistently used to inform governance, commissioning and service improvement, with established reporting cycles and clear accountability for action • Escalation and early resolution pathways operating effectively across the partnership, contributing to improved coordination, reduced duplication and

		coordinated decision-making	fragmentation in practice • Early evidence of more consistent multi-agency practice across services and workstreams, supported by aligned governance, shared decision-making and joint accountability • Multi-agency SEND training needs analysis completed across education, health and social care, identifying shared and service-specific capability gaps, particularly in co-production, inclusive practice and multi-agency working across SEN Support, annual reviews and transitions		development offer across the 0–25 SEND system	early signs of reduced casework pressure

Partnerships, Participation & Resolution (PP&R) – Workstream 1b: Early Resolution, Mediation, Data & System Learning Building blocks 2 & 5 Enablers: Mediation & Dispute Resolution; Data, Insight & System Learning **Outcome**: Disputes are resolved early, escalation reduces over time, and shared data and lived experience intelligence drive commissioning and service improvement across the SEND system. **Success measures:** 1. Improved educational outcomes for children and young people with SEND 4. Increased parent, carer and young person confidence in the SEND System 5. Reduced demand pressures and improved financial sustainability of the SEND system **Core minimum requirements alignment**	• Core multi-agency SEND dataset and standardised categories for disputes, escalation and resolution defined and agreed across the partnership • Current data sources mapped and aligned across partners, with clear identification of gaps and required improvements to support system-wide insight • Baseline dataset established across key measures (including disputes, mediation, complaints and SENDIASS activity), providing a reference point for tracking improvement over time • Partnership arrangements established to support transparency,	• Core SEND data structures and standardised categories established across the partnership, enabling consistent capture of disputes, mediation, complaints and SENDIASS activity • Data sources aligned across education, health and care, with identified gaps providing a clear understanding of required improvements to support system-wide insight • Governance-aligned reporting framework	• Standardised data recording tools and processes implemented across education, health and care, supporting consistent capture of disputes, mediation, complaints and SENDIASS activity • Data quality assurance processes established and in use across partners, driving improved completeness, accuracy and consistency of data • Governance-aligned reporting cycle established and operating, including production of regular multi-agency insight reports to inform	• Standardised data recording processes consistently applied across education, health and care, enabling reliable capture of disputes, mediation, complaints and SENDIASS activity • Improvements in data quality evident across partners, with increased completeness, consistency and accuracy of information to support system-wide analysis • Governance-aligned reporting cycle established and in operation, with regular multi-agency insight reports providing visibility of trends, themes and system pressures	• Shared data and insight embedded across the Local Area Partnership, with consistent use of multi-agency data (including SENDIASS, complaints and mediation) to inform governance, commissioning and service improvement • Reporting and analysis processes fully embedded, including routine use of trend data and cohort analysis to understand patterns, identify pressures and support system planning • System learning from complaints, mediation and feedback data consistently applied across	• Shared data, reporting and system learning fully embedded across the Local Area Partnership, with consistent use of multi-agency data to inform governance, commissioning and service improvement decisions • Partnership reporting and analysis routinely used across governance, including trend and cohort analysis, providing clear visibility of system performance, pressures and areas for improvement • Multi-agency data (including SENDIASS, mediation and complaints) consistently informing governance,

This workstream delivers the following core minimum requirements: • CMR39 – SENDIASS provision and standards • CMR40 – Mediation and dispute resolution processes • CMR41 – Monitoring of mediation and resolution • CMR42 – Co-produced monitoring and system insight **Evidence:** See Partnership, Participation and Mediation evidence summary sheet (PPR01-PPR09)	accessibility of information and alignment with data, insight and system learning	established, with agreed templates and initial integration into partnership reporting and dashboards • Baseline data established across key measures, including disputes, mediation, complaints and SENDIASS activity, providing a clear starting point for monitoring and improvement • Early use of shared data and insight initiated across priority forums, supporting initial visibility of themes, trends and areas for	partnership boards and system leadership • Shared data and insight actively used across governance forums to identify themes, trends and areas for improvement, supporting stronger system oversight • Early system learning established from complaints, mediation and feedback data, with emerging themes used to inform service improvement and strengthen early resolution approaches	• Increased use of shared data and multi-agency insight in governance forums to identify trends, emerging pressures and priority areas for improvement • Early system learning evident from complaints, mediation and feedback data, with emerging themes used to inform service improvement and strengthen early resolution approaches. • Initial review of datasets on 31st March, with adjustments to forecasting model and projections made to reflect trends as opposed to one off events.	services and workstreams, driving improvements in early resolution and reducing escalation • Transparent feedback loops established and embedded across the partnership, including consistent "You said, we did" approaches and visible responses to stakeholder insight • Data quality, accessibility and user experience for key information sources (including the Local Offer) continuously improved, supporting transparency, engagement and confidence in the SEND system.	commissioning and service improvement decisions across the Local Area Partnership • System learning from complaints, mediation and feedback embedded across the partnership, with evidence of sustained improvements in consistency of responses and early resolution approaches • Early resolution pathways operating effectively at scale, contributing to improved coordination, reduced escalation and emerging reductions in dispute and casework pressure • Ongoing review of datasets on 31st March, with adjustments to

		improvement across the SEND system			• Ongoing review of datasets on 31st March, with adjustments to forecasting model and projections made to reflect trends as opposed to one off events.	forecasting model and projections made to reflect trends as opposed to one off events.

Transformation and capacity building – programme, data and system infrastructure Building block 3 & 4 Enablers: Digital Optimisation; Workforce; Data / Insight; Governance **Outcome**: The Local Area Partnership has strengthened programme management, data and digital systems in place to support effective delivery of SEND reform. This enables clear oversight, consistent governance and the use of high-quality data and insight to inform decision-making, monitor impact and support continuous improvement across the system. Success measures: 1. Improved educational outcomes for children and young people with SEND 4. Increased parent, carer and young person confidence in the SEND System 5. Reduced demand pressures and improved financial sustainability of the SEND system	• Programme management capacity established across the LAP, including a dedicated transformation team (SEN Specialist Programme Lead and PMO) to support delivery and oversight of SEND reform • Governance arrangements for programme delivery established and embedded within Children's Services structures, providing clear oversight, accountability and escalation • Key partnership agreements in place to support delivery of insight, engagement and co-production activity (including Hampshire Parent Carer Network and Coram), enabling coordinated system-wide working	• Programme management capacity in active use across the partnership, supporting coordination and oversight of early delivery • Governance arrangements beginning to demonstrate consistent application across priority workstreams and partnership forums • Data and digital capability enabling initial system monitoring through dashboards and reporting processes • Early use of shared data and reporting	• Programme management arrangements operating across the partnership, with SEN Specialist PMO and programme leadership actively coordinating delivery, monitoring progress and supporting workstreams • Governance arrangements operating consistently through the Children's Services and partnership structures, providing clear oversight, decision-making and escalation • Data and digital systems in active use, including Power BI dashboards and SEND reform KPIs, providing visibility of performance, delivery and demand across the system	• Programme management arrangements actively supporting delivery across the partnership, with SEN Specialist PMO and programme leadership coordinating workstreams and monitoring progress • Data and digital systems in active use, with dashboards and SEND reform KPIs providing visibility of performance, delivery and demand • Partnership delivery activity underway	• Programme management capacity fully established and operating as business as usual, with transformation team and SEN Specialist PMO supporting delivery, oversight and continuous improvement across all workstreams • Governance and reporting arrangements fully embedded, with programme oversight, performance monitoring and decision-making consistently informed by data and insight • Data and digital systems embedded and reliable, with dashboards and reporting providing accurate, timely and accessible information across	• Programme management arrangements consistently operating as business as usual across the partnership, with effective coordination, oversight and delivery across all workstreams • Governance and reporting arrangements fully embedded, with data and insight consistently driving decision-making, performance management and system improvement across the partnership • Data and digital systems consistently used across the partnership, providing reliable, timely and accessible information to

Core minimum requirements alignment This workstream delivers the following core minimum requirements: CMR33 – Partnership maturity and shared data use	• Data and digital capacity established, including data analyst and Power BI capability, supported by interim resource from existing Transforming SEND and Children's Services data teams • Foundations for a shared data, insight and reporting infrastructure established, enabling development of dashboards, performance monitoring and system oversight across the partnership	infrastructure providing visibility of performance, demand and delivery across the system • Partnership arrangements enabling coordinated delivery of insight, engagement and co-production activity	• Partnership agreements (including HPCN and Coram Parent Champion programme) implemented, with planned engagement and co-production activity underway and contributing to delivery • Integrated programme and reporting infrastructure in operation, supporting coordination across workstreams, consistent performance monitoring and system-wide oversight • LGR group implemented to plan for future actions to align the SEN Reform plan to the new unitaries.	(including HPCN and Coram Parent Champions), contributing to engagement, insight and co-production across the system • Integrated programme and reporting approach in operation, supporting coordination across workstreams and enabling consistent monitoring of delivery and outcomes	the Local Area Partnership • Partnership activity (including HPCN and Coram Parent Champions) embedded within delivery, generating consistent insight and lived experience feedback to inform system learning and improvement • System learning embedded across the partnership, with insight from data, feedback and participation driving service improvement and influencing system change and commissioning decisions	monitor delivery, demand and outcomes • Partnership activity (including HPCN and Coram Parent Champions) delivering sustained insight and lived experience feedback, with clear evidence of influence on service improvement and system learning • System learning from data, feedback and participation consistently applied across the partnership, contributing to improved delivery, strengthened practice and emerging reductions in demand pressures

Project Investment Spend per Quarter (Year 1)	**Quarter 2 – Delivery activity and funding source**	**Quarter 3 – Delivery activity and funding source**	**Quarter 4 – Delivery activity and funding source**
This row summarises the projected quarterly revenue investment supporting delivery of the SEND Reform programme in Year 1. Figures reflect the phasing of agreed and expected funding, primarily supported through existing capacity, confirmed funding envelopes and approved spend-to-save arrangements. Figures reflect the phasing of delivery investment and do not represent the full baseline cost of existing services. Delivery is based on agreed funding arrangements and existing capacity unless explicitly stated elsewhere. **Spend categories:** • Programme oversight and leadership capacity • Workforce • Recruitment and role expansion	• **Transforming SEND**: delivery supported through existing capacity, using High Needs Block spend-to-save arrangements. • **Best Start Family Hubs**: delivery supported through existing and agreed funding envelopes in line with programme development. • **Mental Health Support Teams**: delivery supported through existing funding envelopes provided via Integrated Care Boards. • **Workforce training and development**: delivered using existing capacity through TSEND, School Improvement and SEN transformation posts. • **Programme oversight and leadership**: delivery through existing capacity within TSEND and School Improvement and SEN Specialist Transformation Posts. • **Recruitment – Inclusion Practitioners**: funded through	• **Transforming SEND**: delivery supported through existing capacity, using High Needs Block spend-to-save arrangements. • **Best Start Family Hubs**: delivery supported through existing and agreed funding envelopes in line with programme development. • **Mental Health Support Teams**: delivery supported through existing funding envelopes provided via Integrated Care Boards. • **Workforce training and development**: delivered using existing capacity through TSEND, School Improvement and oversight of SEN transformation posts. • **Programme oversight and leadership**: delivery through capacity within TSEND and School Improvement and SEN Specialist Transformation Posts. • **Recruitment – Best Start Inclusion Practitioners**: funded through previously agreed Best Start Family Hubs allocations. • **Participation and engagement (parents and young people):** delivered through existing	• **Transforming SEND**: delivery supported through existing capacity, using High Needs Block spend-to-save arrangements. • **Best Start Family Hubs**: delivery supported through existing and agreed funding envelopes in line with programme development. • **Mental Health Support Teams**: delivery supported through existing funding envelopes provided via Integrated Care Boards. • **Workforce training and development**: delivered using existing capacity through TSEND, School Improvement and Target Services. • **Programme oversight and leadership**: delivery through existing capacity within TSEND and School Improvement as BAU. • **Recruitment – Best Start Inclusion Practitioners**: funded through previously agreed Best Start Family Hubs allocations. • **Participation and engagement (parents and young people):** delivered through existing forums and participation offers already in place.

- Workforce training and development
- Data and digital capability
- High Needs Capital

Total Spend – Total spend based on existing capacity and separately funded components (CMR3)

SEND Reform transformation funding & Experts at Hand

	2026/27
Delivery - HCC	£8,474,906
Delivery - ICB	£314,000
Transformation	£691,000
Admin	£390,000
Total	**£9,869,906**

(EAH06, EAH07, EAH07a, EAH07b)

This approach has been provisionally agreed across the ICB footprint for year 1, with review planned for Q4 once next funding allocation has been finalised.

previously agreed Best Start in Life allocations.

- **Data and digital capability**: mobilisation and delivery supported through existing data, analytics and digital capacity, aligned to SEND Reform transformation funding and routine partnership intelligence activity.
- **SEND Reform – Transformation funding**: Year-1 reform enablement activity mobilised and delivered alongside the Transforming SEND improvement framework. Includes data costs.

Workforce / Recruitment	£144,142
Data/Digital/ Admin	£72,000
Total	**£216,142**

(EAH06, EAH07, EAH07a, EAH07b)

- **Experts at Hand:** Year-1 delivery initiated, supported through dedicated Experts at

forums and participation offers already in place.

- **Data and digital capability:** delivery supported through existing data, analytics and digital capacity, with SEND Reform transformation funding enabling routine dashboards, insight and DfE reform reporting across the partnership.
- **SEND Reform – Transformation funding**: Year-1 reform enablement activity supporting active delivery across workstreams, aligned to the Transforming SEND continuous improvement framework.

Workforce / Recruitment	£432,429
Total	**£432,429**

- **Experts at Hand**: Year-1 delivery operational, supported through dedicated Experts at Hand funding (EAH06, EAH07).

Expenditure in table below includes ICB clinical oversight and central mentoring costs.

Workforce / recruitment	£3,081,388

- **Data and digital capability**: delivery supported through existing data, analytics and digital capacity, with SEND Reform transformation funding supporting assured reporting, system learning and planning for Year 2.
- **SEND Reform – Transformation funding**: Year-1 reform enablement activity embedded to support sustained delivery and system learning, informing priorities and planning for Year 2.

Workforce / Recruitment	£432,429
Total	**£432,429**

- **Experts at Hand:** Year-1 delivery established and stabilised, with learning informing delivery refinement and planning for Year 2 (EAH06, EAH07)

  Expenditure in table below includes ICB clinical oversight and central mentoring costs.

Workforce / Recruitment	£3,081,388
Working training / development	£684,600

High Needs Capital
Total projected capital spend for 26/27 up to £29,481m across:

- Special schools - £15,208m, (HNPCA/basic need)
- Specialist bases - £12,905m, (HNPCA)
- and other smaller allocations.

Hand funding and associated workforce investment.

Alignment with ICB model– HCC will work with the ICB with a 'mentor' model. These ICB practitioners are funded by the ICB and work across the whole ICB footprint. They will give training advice and guidance, work with the universities on recruitment and training, as well as being a centralised service for co-ordinated EAH activity.

In addition to this, further SaLTs will be directly employed by the LA to deliver targeted support in localities, as agreed and directed by the Local Delivery Team. An NHS advanced practitioner will oversee the in-house therapy service to ensure delivery of evidence-based practice, research engagement and clinical quality assurance.

Workforce / Recruitment	£1,027,130
Working training / development	£456,400
Data/Digital/ Admin	£86,800
Total	£3,624,588

(EAH06, EAH07, EAH07a, EAH07b)

High Needs Capital - Capital delivery progresses in line with agreed sufficiency plans, including inclusion base expansion and specialist place development, with spend reflecting project implementation phases.

Data/Digital/Admin	£371,200 (£217,000 digital)
Total	£4,137,188

(EAH06, EAH07, EAH07a, EAH07b)

High Needs Capital - Capital programme delivery continues at pace, supporting inclusion base delivery and specialist capacity growth, with expenditure aligned to project milestones.

	<table><tr><td>Working training / development</td><td>£0</td></tr><tr><td>Data/Digital/ Admin</td><td>£0</td></tr><tr><td>Total</td><td>£1,027,130</td></tr></table> **(EAH06, EAH07, EAH07a, EAH07b)** **High Needs Capital** - Capital investment activity focused on early feasibility, design, and mobilisation of agreed sufficiency schemes, including preparation for support / specialist base expansion and specialist provision growth, with expenditure profiled and tracked.		

INSERT DOCUMENT UPLOAD LINK SEE APPENDIX 1,2,3,4 and DOCUMENT file.

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

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

build the capacity and capability in data and analytics to support effective tracking against the measures in the plan and reporting that informs decision making.

Delivery of the SEND Reform Plan is supported through a strengthened partnership-wide operating model combining programme management, workforce investment and improved data capability. A central SEND specialist programme and PMO function provide the core delivery infrastructure, bringing together programme management, performance, finance and data expertise to coordinate delivery across all workstreams, ensuring risks, dependencies and resources are actively managed against milestones and success measures (PPR05).

Delivery arrangements include defined workstream ownership, a central SEND Specialist PMO function and clear governance and escalation routes, enabling prioritisation, sequencing and timely response to emerging risks. Corporate services, including finance, HR, digital and communications, support recruitment, workforce deployment, financial oversight and system-wide engagement. These arrangements are underpinned by a clear governance hierarchy, providing line of sight from operational delivery through programme oversight to partnership, corporate and political accountability.

Workforce capacity and capability are strengthened through targeted recruitment and deployment across the partnership, including within the EaH model and wider transformation programme. This is reinforced through a coordinated workforce development offer - supporting inclusive practice and early intervention at scale.

Data and analytics capability is enhanced through specialist analytical capacity, shared digital infrastructure, dashboards and agreed data definitions, providing a single view of performance, demand and outcomes. Bi-monthly oversight through the LAPB reviews performance, finance and risk together, while monthly SEND Reform Performance Board cycles ensure data informs decision-making, supports early intervention and drives continuous improvement. Together, these arrangements provide the capacity, capability and infrastructure needed to deliver the first-year plan effectively and at pace.

8. **Other funding Local Authorities**.

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

N/A

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

a. *Inclusion at the core of high needs sufficiency strategy, resulting in more children and young people with SEND accessing suitable places in mainstream settings, across all phases of education*

b. *Every child or young person who needs a place in an inclusion base can access one*

c. *Fewer children and young people with SEND needing to travel a long way to access a suitable placement*

d. *Improved suitability of the mainstream estate to support children and young people with SEND, with adaptations to improve inclusivity and accessibility of the physical environment*

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

Please outline your strategy for how this funding will meet the outcomes above, with reference to the core minimum requirements and other workstreams in this reform plan where appropriate. We would like to see detail around your plans to

increase capacity for inclusion bases (formerly known as SEN units, resourced provision and pupil support units – SU/RP/PSUs), such as schools, colleges or early years providers identified, engagement with relevant settings and trusts, and target cohort of needs.

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

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

Hampshire will utilise high needs capital investment as a strategic invest-to-change lever to strengthen inclusion, improve sufficiency, and reduce reliance on high-cost, out-of-area provision across the 0–25 system. Funding will be deployed across early years, statutory school age and post-16 phases in line with a mainstream-first, inclusion-led approach.

Our needs-led strategy underpins wider SEND Reform Plan workstreams, placing inclusion at the heart of sufficiency planning. This ensures more CYP can access suitable mainstream provision, inclusion bases are available locally, and reliance on long-distance travel is reduced through the systematic closing of geographic gaps in provision (SPP04, SPP05). Targeted capital investment will improve suitability and accessibility of the mainstream estate through adaptations, inclusive design and assistive technology, aligned with statutory duties (SPP05). Early years provision forms a key component of this strategy. Capital investment will support the expansion and adaptation of mainstream and specialist early years provision, including accessibility improvements, specialist facilities, sensory environments and assistive technology. Investment will be targeted to areas where sufficiency analysis identifies capacity gaps and increasing demand, supporting earlier identification of need, improved school readiness and reducing escalation to more specialist provision over time.

Capital investment will be prioritised through an integrated sufficiency model that combines demographic growth projections, EHCP trends, inclusion base usage, placement demand, attendance, exclusion and Alternative Provision trends, alongside participation and transition data (SPP04, SPP05, SPP06, SPP08). New governance arrangements (SP003) will ensure robust oversight of sequencing, feasibility, consultation, approvals and delivery, maintaining alignment to evolving need and ensuring compliance (SPP05).

Alternative Provision will form part of Hampshire's graduated continuum of support and will be planned through the same integrated sufficiency framework used to inform mainstream, inclusion base and specialist provision decisions. Capital investment in Alternative Provision will be targeted where attendance, suspension, exclusion, SEMH demand and placement data demonstrate unmet need. Hampshire's approach will prioritise preventative and reintegration-focused models that support children and young people to remain within, or successfully return to, mainstream education wherever appropriate. Decisions concerning expansion or adaptation of Alternative Provision will be evidence-led and will require clear demonstration that investment contributes to inclusion objectives, reduces escalation to specialist placements and supports wider sufficiency across the SEND system.

Inclusion bases are central to delivery. Hampshire will expand capacity for both Support Bases and Specialist Bases within mainstream settings (SPP04). Support Bases, created at school or MAT level, will provide early, time-limited intervention with a clear reintegration focus. High needs capital will enable physical adaptations, equipment and assistive technology through the Hampshire Approach Inclusion Base Fund and wider capital routes. Subject to Member approval, this fund will launch from 2027/28, supporting up to 20 schools annually (approximately 200–600 children), with flexibility to align to future DfE guidance.

Specialist Bases will be Local Authority commissioned provision embedded in mainstream settings and colleges, prioritised by need and geography, particularly for ASC and SEMH cohorts. Over 560 new specialist base places will be delivered over three years through High Needs Provision Capital Allocation (HNPCA), strengthening pathways between primary, secondary and post-16 phases while reducing escalation to independent and out-of-area placements (SPP04, SPP06).

Post-16 sufficiency is a strategic priority within Hampshire's inclusion-led approach. Capital investment will support the expansion of specialist bases within further education colleges, specialist post-16 provision where required by need, accessibility improvements, specialist teaching environments, independent living facilities, employability provision, supported internship pathways and wider Preparation for Adulthood (PfA) infrastructure. Investment priorities will be informed by analysis of Year 9-14 EHCP cohorts, participation rates, destination data, transition trends and projected demand for education and training up to age 25. Hampshire will increase local post-16 capacity through a combination of specialist bases, mainstream further education provision and specialist pathways, reducing reliance on independent specialist colleges and improving access to provision closer to home. Expected outcomes include increased participation and retention in education and training, improved progression to

employment and adulthood outcomes, growth in supported internships and employment-focused programmes, reduced travel requirements and improved value for money across the high needs system.

Expansion of specialist provision, including special schools or specialist post-16 institutions, will only occur where there is a clear, evidence-based rationale demonstrating that need cannot be met through mainstream provision, Alternative Provision or inclusion bases. Decisions will require assurance that expansion reduces reliance on independent provision, addresses geographic inequities, and delivers value for money, including travel impact (SPP05, SPP06, SPP07).

Hampshire will also maximise opportunities created by falling rolls to repurpose surplus accommodation using established data-led planning and reporting approaches. Repurposed accommodation will be considered as a resource to address identified gaps in early years, Alternative Provision, inclusion base and post-16 capacity where this supports local sufficiency priorities.

Reducing travel distances remains a key outcome. All capital business cases will include locality access and transport considerations, with benefits tracked through strengthened data systems and governance (SPP03, SPP07).

Innovative investment, including assistive technology, will further enhance inclusion within mainstream environments. Overall, this strategy ensures that capital funding delivers sustainable system change, embedding inclusion, improving local access, strengthening early intervention, supporting effective pathways to adulthood and creating a more equitable and efficient SEND system.

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

   Please outline how the local area partnership plans to engage system partners and stakeholders to develop and implement the plan – include planned engagement with schools and early years settings, alternative providers, FE and post-16 providers

(including those your young people attend that are not within your local area), Parents and Carers and children and young people with SEND, with reference to the core minimum requirements. Consider changing roles and responsibilities in the context of the Schools White Paper and how you work collaboratively to manage the transition. Please indicate where additional support is required to engage partners or stakeholders - senior officials at the Department for Education will be available to contribute to summer term events with education leaders and parent carer forum leaders.

System partner engagement, stakeholder participation and meaningful co-production are central to Hampshire's Local Area SEND Reform Plan. The plan has been informed through partnership activity across the local area, including the Maturity Matrix Event, which brought together education, including maintained schools and multi-academy trusts, health, social care, the Parent Carer Forum, children and young people, and wider partners to develop a shared understanding of strengths, priorities, and areas for improvement. The plan has also been considered through the Local Area Partnership Board, with partners contributing to priority setting through identified workstreams.
Building on established engagement arrangements, the LAP is committed to collective ownership of reform, ensuring that CYP with SEND, parents and carers, education providers, health partners, social care and the voluntary sector are active partners in shaping priorities, implementation and review. This will be supported by transparent governance, regular reporting, published updates and accessible communication through the Local Offer and wider partnership channels, so stakeholders understand how decisions are made and how their contributions inform delivery.

The partnership recognises that meaningful participation requires stakeholders to be able to engage in ways that are accessible, flexible, and responsive to their needs. As part of implementation, the partnership will work with children, young people, parents and carers, education settings, and wider partners, to better understand their preferred methods of engagement and participation. This will inform the ongoing development of engagement approaches and help ensure opportunities are inclusive, proportionate and reach a broad range of voices. Alongside formal governance arrangements, engagement will be delivered through a range of methods including surveys, focus groups, workshops, listening events, locality-based forums, targeted stakeholder reference groups, and education setting-based participation activity. These approaches will provide multiple opportunities for stakeholders to engage with participation activity. The partnership will regularly review engagement activity, participation levels and stakeholder

feedback to identify gaps in representation and adapt approaches where required, supporting continuous improvement in co-production and engagement across the local area.

Engagement will be delivered through strengthened governance arrangements, including the LAPB, multi-agency reference groups, education forums and dedicated participation mechanisms for CYP and parents. Representation from the HPCN, SENDIASS and the SEND Youth Forum is embedded within governance to ensure that lived experience informs decision-making. The partnership will maintain a clear governance framework and use, “You Said, We Did”, reporting to demonstrate impact, accountability and responsiveness.

CYP with SEND will be engaged through a strengthened SEND Youth Forum and participatory activity across the partnership. Contributions will inform guidance, pathway development and accessible information. The partnership will extend participation, reduce duplication and ensure that CYP’s views are reflected in decision-making, particularly at transition points and in service review activity.

Educational engagement will be central to delivery. Early Years providers, maintained schools, and multi-academy trusts will be engaged through established and emerging networks, headteacher and leadership forums, clusters and school improvement structures. These mechanisms will support the co-development, implementation and review of key systems, including OAP guidance, the Hampshire Approach to Inclusion and the Universal Offer. AP providers and specialist outreach services will contribute to graduated pathways, supporting the use of alternative provision as part of an inclusive and preventative system response. Further education and post-16 providers, including those attended by Hampshire young people outside the local area, will be engaged through targeted working groups and stakeholder reference arrangements to strengthen transition pathways, preparation for adulthood and post-16 participation.

Parents and carers will be engaged through a strong, independently operating Parent Carer Forum embedded within governance and workstreams. Surveys, workshops and locality-based engagement activity will inform priorities and quality assurance. Co-production will be reflected through structured involvement in service design, review and assurance, supported by consistent feedback loops and a focus on hearing a broad range of parent and carer voices. Across all partners, this approach supports evolving expectations for system leadership in line with Every Child Achieving and Thriving white paper, including stronger collaboration, inclusion and shared responsibility across education and local partners.

10. **Risks and Mitigations**

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

Risk	**Impact**	**Likelihood**	**RAG**	**Mitigation**	**Residual RAG**
RAG (%) values represent the estimated probability of each risk occurring, derived from the programme risk matrix and aligned to defined likelihood ranges and associated Red-Amber-Green ratings.					
National workforce supply constraints across SEND, therapy and specialist education limit the local system's ability to mobilise sufficient capacity to deliver early intervention and inclusion at scale, increasing reliance on high-cost placements and agency staffing and placing sustained pressure on the High Needs Block. This also includes LA capacity to mobilise building works through LA property services workforce.	Critical**:** Inability to scale early intervention and inclusive practice across the 0–25 system, leading to increased escalation to statutory assessment, higher demand for specialist and out-of-area placements, and material financial pressure on the High Needs Block.	Likely	80%	• Phase the rollout of the SEND workforce, focusing first on high-demand areas to deliver early intervention. • Use the Experts at Hand model to extend specialist expertise through advice, consultation and support to settings. • Use of cross-system opportunities with training, qualifications and progression routes allowing practitioners to develop and grow in the system that values and rewards them. • Deliver a joint SEND training programme to build confidence and skills in mainstream staff, including enabling non-specialists to support SEN needs. • Use data to target specialist staff to the highest-need children and settings so support has the greatest impact. • Use agency staff where needed to maintain key services and ensure delivery continues. • Put in place staff retention and development activity to maintain workforce stability across key SEND roles. • Align workforce planning with sufficiency and capital programmes so staffing matches new provision. • Prioritise staff deployment to support early intervention and reduce reliance on specialist and out-of-area placements. • Monitor workforce capacity through governance, using data to	65%

				respond quickly to emerging pressures. • Coordinate workforce deployment across education, health and social care partners to support delivery of SEND reform. • Streamline approval and development processes to speed up delivery of capital and sufficiency programmes. • ICB-led work with local universities to strengthen the pipeline of speech and language students, aligned to local workforce need. • Despite these mitigations, residual risk remains due to ongoing national workforce shortages and increasing demand, which may continue to limit the pace of workforce expansion. • If capacity cannot be increased as planned, delivery will prioritise highest-need cohorts and settings, with greater use of cluster-based support, temporary agency capacity and phased implementation of services to maintain early intervention. • This risk is interdependent with demand and financial pressures, as reduced workforce capacity would limit early intervention and increase escalation to statutory and higher-cost provision.	
Increasing SEND demand and complexity continues to increase during the transition to a more preventative model, outpacing system capacity in the short term. Delivery at the scale and pace described is dependent on sustained revenue and capital funding (including pump-priming investment), and there is a risk that insufficient or short-term funding constrains the system's ability to invest in early intervention, workforce and provision during the transition period.	Crisis: Inability to deliver early intervention at scale, leading to sustained growth in EHCP demand, increased reliance on specialist and high-cost placements, and escalating pressure on the High Needs Block.	Likely	85%	• Prioritise early identification and needs-led support through the Universal Offer and Experts at Hand to reduce escalation at the earliest stage. • Phase delivery of SEND reforms, focusing first on the highest-impact groups and pathways to stabilise demand during transition. • Deliver a programme that invests in early intervention and inclusive provision to reduce reliance on high-cost placements over time. • Use shared dashboards to monitor demand, escalation and capacity in real time, enabling early identification of pressure points and targeted system response. • Increase local sufficiency and inclusive provision, including inclusion bases and specialist capacity, to reduce reliance on independent and out-of-area placements. • Align demand management, workforce deployment and sufficiency planning through governance to ensure a coordinated system-wide response. • Maintain ongoing financial oversight through governance, including	70%

				regular review of funding assumptions, delivery costs and realised savings, enabling adjustment to delivery pace and sequencing where required. • Despite these mitigations, residual risk remains due to continued growth in demand and complexity, particularly during the transition period before early intervention and inclusive practice are fully embedded across the system. • Despite these mitigations, residual risk remains due to continued growth in demand and complexity, particularly during the transition period before early intervention and inclusive practice are fully embedded across the system. • This risk is closely linked to workforce and financial pressures, as sustained increases in demand without corresponding capacity will limit early intervention and increase reliance on high-cost placements.	
Local Government Reorganisation introduces new structures, governance and ways of working across local authorities, creating a risk of misalignment between system partners and disruption to delivery of SEND reform.	Critical: Disruption to delivery, delayed implementation of reform activity and reduced ability to realise planned cost avoidance, alongside additional transition and implementation costs. Success relies on agreement across the new footprint.	Very Likely	91%	• Engage early with Integrated Care Board partners to align key reform workstreams and identify risks and dependencies. • Escalate Local Government Reorganisation risks through formal governance structures, including LGR programme boards and working groups, to ensure visibility and coordinated mitigation. • Put in place clear and consistent information-sharing across new local authority structures to support continuity of delivery and decision-making. • Review and adapt delivery plans, governance and timelines to align with existing and emerging LGR structures and support flexible implementation. • Align SEND reform governance and delivery with LGR transition planning to reduce duplication, maintain accountability and ensure continuity of services. • Despite these mitigations, residual risk remains due to the scale and complexity of Local Government Reorganisation, including differing timelines, governance arrangements and decision-making processes across emerging structures, which may continue to affect pace and consistency of delivery.	50%

				• If disruption is greater than anticipated, delivery will prioritise critical reform elements, maintain core governance through existing partnership structures and adapt delivery sequencing to ensure continuity of early intervention and support for children and young people. • This risk is closely linked to governance, workforce and delivery risks, as misalignment across new structures could impact decision-making, resource deployment and the pace of system reform.	
Variation in capacity, capability and engagement across early years, schools, alternative provision and post-16 settings leads to inconsistent implementation of SEND reform priorities, resulting in uneven experiences and outcomes for children and young people and reduced confidence among families.	Moderate: Inconsistent delivery of early intervention and inclusive practice across the system, leading to uneven outcomes, reduced effectiveness of the graduated approach, increased escalation to statutory support and higher-cost provision, and reduced system efficiency.	Likely	60%	• Deploy Experts at Hand outreach, coaching and advice to settings to build capability and improve consistency of practice. • Use cluster and group-based delivery models to support smaller or higher-pressure settings and reduce variation across local areas. • Provide clear and consistent communication of SEND pathways, expectations and the Universal Offer so all providers understand roles, thresholds and support. • Use data to identify variation in practice and target support to settings with lower SEN Support quality or weaker outcomes. • Strengthen co-production through structured engagement with Parent Carer Forums and children and young people to inform service design, delivery and review. • Share effective practice, impact data and case studies across the system to improve consistency, build confidence and support peer learning. • Despite these mitigations, some residual variation is expected during the transition period as practice and capability embed at different rates across localities and phases. • This risk is closely linked to workforce and partnership engagement, as variation in capacity and confidence across settings may impact the consistency and pace of implementation.	40%
Delays in improving data quality, integration and analytical capability limit the system's ability to track delivery, evidence impact	Moderate: Reduced ability to demonstrate value for money, learn from	Possible	59%	• Develop and implement proportionate data capture aligned to reform priorities, ensuring key performance measures are available from early stages of delivery. • Use and optimise existing data systems and integrated care data	40%

and adapt reform activity.	delivery and provide assurance on reform effectiveness, limiting cost avoidance and reducing confidence in financial planning and decision-making.			arrangements to support reporting and reduce duplication where possible. • Embed data, insight and evaluation into governance and delivery, so performance information is routinely used routinely in decision-making. • Take an iterative approach to data development, using feedback and delivery learning to improve data capture, reporting and analysis over time. • Use performance dashboards and system-wide reporting to monitor delivery, identify emerging risks and inform targeted improvement activity. • Review and adapt mitigation actions based on performance data, delivery learning and system feedback to continuously improve data quality and use. • Despite these mitigations, residual risk remains due to the time required to improve data quality, system integration and data literacy across partners, which may limit the pace at which insight can fully inform delivery and decision-making. • This risk is closely linked to delivery, governance and workforce capability, as limitations in data quality and use may impact the ability to target support, demonstrate impact and adapt the reform programme effectively.	

11. **Dependencies**

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

- NHS reforms
- Local Government Re-organisation

- Reforms to Children's Social Care (including Family First Partnership)
- Best Start in Life, including Family Hubs
- Best Start In Life Strategy
- Curriculum and Assessment Review

Successful delivery depends on alignment with national and local reforms that affect capacity, governance, workforce resilience and financial sustainability. These dependencies create risk and opportunity; therefore, the LAP is taking a forward-looking approach to building resilience, adaptability and shared accountability.

NHS reforms

NHS reform may affect the timeliness and consistency of assessments, therapies and mental health support, affecting EHC processes and early intervention.

This is being managed through strong ICB partnership, joint governance and shared decision-making. The Experts at Hand model adds specialist capacity to support coherent SEND pathways, although some risk remains.

Local Government Reorganisation

Local Government Reorganisation may affect organisational design, leadership continuity and service boundaries. In response, the SEND Reform Plan is being embedded at whole-system level to support continuity through structural change. Local Delivery Team arrangements are aligned to proposed future unitary footprints, and core programme elements are being embedded within formal frameworks so successor organisations can build from an agreed roadmap.

Reforms to Children's Social Care

Children's Social Care reform, delivered through the Families First Partnership Programme, including greater emphasis on early help and family-based support, is closely connected to SEND reform. Delivery is aligned to the developing Early Help Strategy, which provides a shared framework across the Families First Partnership Programme and Best Start in Life Programme for prevention, early identification, family support and integrated multi-agency working. Changes to thresholds, workforce capacity and demand may affect joint delivery for children and young people with complex needs. In Hampshire,

this is supported through aligned thresholds, shared assessment and multidisciplinary decision-making, including through the Experts at Hand approach.

Best Start in Life (including Family Hubs and national strategy)

Best Start in Life, including Family Hubs, and the evolving national Best Start strategy, increase expectations around early identification, parental support and prevention, and may influence future funding and delivery models. Without alignment, there is a risk of duplication or fragmentation across universal, targeted and specialist support.

This is being addressed through service mapping, pathway integration and shared outcomes frameworks that position SEND within Family Hub delivery and align delivery with the wider Early Help Strategy and Families First Partnership Programme. Experts at Hand also strengthens early years inclusion and workforce development.

Curriculum and Assessment Review

The Curriculum and Assessment Review may change assessment, accountability and definitions of attainment, with implications for SEND identification and outcomes monitoring. The LAP will support schools to adapt inclusive practice while maintaining high expectations for participation, progress and outcomes.

Critical Dependency: Sustainable Funding and Investment

Delivery depends on sufficient revenue and capital funding across education, health and social care, including investment in workforce, early intervention, inclusive provision and capital sufficiency.

While the LAP will maximise available resources, delivery at the scale and pace described depends on sustained national funding and multi-year certainty.

If funding is insufficient, the pace and sequencing of delivery will need to be prioritised within available resources.

Managing dependencies

The LAP will manage these dependencies through adaptive delivery, supported by governance, performance dashboards and implementation learning. Operational intelligence, participation and resolution data will be used to identify pressures early and support timely adjustment, maintaining resilience and focus on improved outcomes. Where significant external changes occur, the partnership will use scenario planning, phased implementation and risk-based prioritisation to sequence delivery and maintain progress against the reform plan. Cross-system governance arrangements will be used to identify emerging interdependencies, agree mitigations and reallocate resources where required to support delivery.

Section 3 – Monitoring and Evaluation

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

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

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

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

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

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

Progress against the SEND Reform Plan will be monitored through a shared performance and assurance framework, combining integrated data, routine reporting and structured feedback loops to track delivery milestones and ensure responsive, evidence-led delivery (PPR09).

A centrally governed KPI dashboard (Power BI) will provide a single, quality assured source of insight across partners. This is used systematically to track demand, service delivery, service quality and outcomes, enabling timely, transparent decision-making.

Growth is monitored through core indicators including:

- EHCNA EY request data (Goal 3)
- Prevalence and profile of need by age, phase and locality (Goal 3)

These metrics assess whether strengthened SEN Support and early intervention are reducing escalation into statutory processes.

Service delivery is tracked through capacity, activity and sufficiency measures, including:

- Deployment of specialist workforce (EP, in house SaLT, OT, Specialist Teachers) (Goal 1)
- Experts at Hand activity (reach, timeliness, proportion pre-statutory support) (Goal 1)
- Capital and sufficiency delivery (places created, utilisation, % local placements, NMSS growth, transport distance/cost) (Goal 3)

These indicators evidence whether investment is shifting the system toward prevention and local inclusion.

Service quality is assessed through both quantitative and qualitative insight, including:

- Parental and carer satisfaction (surveys, SENDIASS intelligence) (Goal 2)
- Mediation timeliness and outcomes (Goal 2)
- Complaints and tribunal trends (rate, resolution, themes) (Goal 2)
- Evidence of co-production (“You Said, We Did”) (Goal 2)

This ensures consistency, confidence and quality of decision-making across the system.

Outputs and outcomes focus on impacts for children and young people (Goal 1), including:

- Attendance, persistent absence and exclusion rates (Goal 1)
- Educational outcomes (GLD, KS2, KS4 and NEET) (Goal 1)
- INMSS placements (Goal 3)

These measures ensure system performance translates into improved inclusion and life outcomes.

Performance is reviewed at multiple levels:

- **Fortnightly:** operational teams will review live data to identify trends (e.g. EHCP requests, attendance risk) and take immediate action.
- **Monthly**: Programme boards reviews KPIs to inform prioritisation, resourcing and corrective action.
- **Bi-Monthly** – Local Area partnership board review KPIs, impact data, risks, mitigations and actions.
- **Quarterly**: formal reporting provides transparent progress updates, confidence statements and audit trails for DfE assurance.

Data definitions, quality assurance and partner inputs will be coordinated through the SEND Reform Data Working Group, ensuring consistency and integrity across all datasets.

Feedback and adaptation mechanisms are embedded throughout. Practitioner feedback is gathered through operational forums and used to refine tools, processes and delivery approaches. Lived-experience feedback from children, young people and families is captured through participation networks, SENDIASS intelligence, mediation and complaints analysis, and triangulated with performance data. Clear “You Said, We Did” loops demonstrate how feedback informs change.

Where data highlights under-performance, variation or unintended consequences, clear escalation routes ensure issues are addressed through governance forums, with actions tracked and reviewed in subsequent cycles. This ensures continuous adaptation, strengthening delivery and maintaining a clear line of sight from data to improved outcomes.

Together, this monitoring approach ensures that delivery is actively managed, risks are identified early, and implementation is continuously refined, maintaining delivery confidence and ensuring that planned reforms translate into measurable improvements in outcomes.

13. **Reporting to DfE**

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

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

INSERT DOCUMENT UPLOAD LINK SEE DOCUMENT FILE AND PPR09 (APPENDIX 4).

Section 4 – Governance

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

Please outline the governance structures in place to oversee delivery. Clearly set out who is responsible for overseeing reform delivery, what each governance group or individual is accountable for, and how these arrangements ensure progress

is monitored and decisions are made transparently. Please identify where the named SRO for the Local SEND Reform Plan sits within the governance structure and ensure your response incorporates the core minimum requirements.

Governance Mechanism *This may be a governance group, or an individual (e.g. SRO).*	**Purpose/ Responsibilities** *What is the function of this governance mechanism? What are they accountable for overseeing? What information is reported to this governance mechanism?*	**Membership** *Who does this governance mechanism comprise of? What stakeholders are represented at this governance mechanism? Please indicate who chairs this.* *(Include n/a if an individual).*	**Cadence** *How regularly does this governance mechanism meet?*	**Decision Rights** *What decisions can this governance mechanism make?*	**Escalation Route** *Where can this governance mechanism escalate issues or decision to?*
Children and Young People Select Committee	Provides strategic democratic oversight of SEND Reform Plan and wider children's services. Considers escalated issues, system risks or strategic decisions arising from SEND scrutiny.	• Elected members. • Chaired by Member Cllr Terry Norton.	Formal select committee cycle with reports from SEND Scrutiny held annually.	Scrutiny and recommendations to Cabinet / Executive.	Cabinet or full Council governance where required.
CYP SEN Scrutiny (working alongside the LGA to set up for 2026/27) *	Deep dive into key SEND areas or themes. Including but not exclusively the SEND Reform Plan.	• Elected Members. • Chair TBC	Cadence currently being worked through as part of committee set up with democratic services and LGA. However, this is envisioned to be	Scrutiny and recommendations to CYP Select	CYP Select.

			quarterly focusing on key identified areas.		
Local Area Partnership Board (LAPB)	Holds strategic oversight and shared system leadership for SEND Reform, including the SEND Reform Plan. Holds joint accountability across education, health and care. Ensures reform delivery remains aligned to local priorities, national SEND reform expectations and learning from delivery. Monitors progress, risks and system-level issues by receiving RAG-rated performance dashboards, risk registers, and milestone tracking reports to provide assurance on delivery confidence and impact.	• Senior leaders from local authority • ICB (co-chaired) • Education partners • Parent Carer voice • Charity sector. • Co-chaired by DCS and Deputy Chief Delivery Officer Mental Health, Learning Disabilities & Autism and Childrens Care Director	Meets every two months as part of established partnership governance.	Strategic decisions relating to SEND reform priorities, coordination across partners, and system-level responses to risk or challenge.	Escalation to Corporate Management Team (CMT), political governance (Cabinet) or DfE where issues cannot be resolved locally.
Corporate Management Team (CMT)	Provides corporate oversight and assurance for SEND reform delivery, including the SEND Reform Plan. Maintains visibility of delivery confidence, system	• Chief Executive and senior officers • Chaired by Chief Executive Hampshire County Council.	Bi-monthly reporting or sooner if risks or issues raised.	Corporate decisions relating to resources, cross-directorate action, and strategic risk management.	Escalation to political leadership or external partners (LABP) as required.

	risks, workforce and financial implications, ensuring reform remains a corporate priority aligned to wider council objectives. Receives RAG-rated performance dashboards, risk registers and milestone tracking reports to monitor progress and inform corporate decision-making on delivery, resources and risk.				
Children's Services Departmental Management Team (DMT)	Provides directorate oversight of SEND Reform Plan delivery. Ensures alignment between reform activity and statutory SEND services, workforce capacity and operational priorities. Reviews risks and interdependencies impacting service delivery through RAG-rated performance dashboards, risk registers and milestone tracking reports, to monitor progress and inform directorate decision-making and	• DCS and ADs across Children's Services. • Includes education and social care. • Chaired by Steph How - DCS.	Plan will report quarterly to DMT and more frequently where issues / risks are raised.	Directorate level decisions relating to operational alignment, resource prioritisation and risk mitigation within Children's Services.	Escalation to Corporate Management Team (CMT) or SRO when interlinked with cross-council or system-level issues.

	assurance on delivery confidence and impact.				
Children services Transformation Board	Receives and reviews progress, risks and delivery updates relating to the SEND Reform Plan within the wider Children's Services transformation programme. Considers high-level RAG-rated performance dashboards, risk registers and milestone tracking reports to provide assurance and challenge on delivery confidence and impact, informing escalation to directorate and corporate governance where required.	• Transformation team senior leadership across children services. • Chaired by Sarah Snowdon – Assistant Director for Shared Services (AHC & CSD)		Assurance for CMT. Scrutiny of transformation programmes.	Assurance to CMT.
ICB – MH, LDA and Children's Care Directorate Management Team	Provides health system oversight and assurance of SEND Reform delivery, including the SEND Reform Plan. Ensures health-related commitments, dependencies, workforce pressures and risks are visible and managed.	• Deputy Director MH and LDA • Deputy Director Children's Care • Finance Quality and Clinical Leads • Chaired through executive structure by the named exec – the chief Nurse.	Quarterly reporting or sooner if risks or issues raised.	Corporate decisions relating to resources, cross-directorate action, and strategic risk management.	Exec leadership or Quality, Performance and Improvement Committee

	Jointly supports shared accountability across education, health and care. Quality, performance and improvement committee has corporate oversight.				
Senior Responsible Officer (SRO) - Assistant Director Education & Inclusion (Natalie Smith)	Overall accountability for delivery of the Local SEND Reform Plan. Responsible for coordinating reform activity across workstreams, maintaining delivery confidence, managing risks and dependencies, and ensuring alignment between partnership, corporate and statutory delivery. Provides assurance on progress, learning and adaptation over time. Receives RAG-rated performance dashboards, risk registers, and milestone tracking reports to provide assurance on delivery confidence and impact.	• Named individual role. • Supported by programme management arrangements.	Monthly through all boards. Exceptions as and when required.	Day-to-day delivery decisions within the scope of the Reform Plan. Authority to escalate risks, issues or decisions requiring partnership, corporate or political consideration.	Local Area Partnership Board (strategic), DMT/CMT (corporate), ICB (MH, LDA and Children's Care Directorate Management Team) or DfE advisers where appropriate.

Transforming SEND Board (reports to LAPB)	Holds focused oversight of SEND educational continuous improvement, aligned to the SEND Reform Plan delivery. Tracks delivery of agreed actions, dependencies and enabling activity. Reviews performance data, risks and issues. Receives RAG-rated performance dashboards, risk registers, and milestone tracking reports to provide assurance on delivery confidence and impact. Ensures reform builds on, and does not duplicate, business-as-usual delivery.	• Local Authority SEND leads. • Health partners • Education representation • Chaired by Natalie Smith – AD Education Inclusion	Bi-monthly (between LABP)	Endorses strategic direction and priorities. Agrees mitigation for strategic risks. Oversees delivery performance.	LAPB for strategic decisions. SRO for resourcing or pace issues.
SEND Reform Performance Board	Holds day-to-day delivery of the SEND Reform Plan and acts as the primary coordination point for delivery. Coordinates workstreams and tracks milestones, risks and dependencies. Ensures evidence, data and success measures are	• LA SEND and programme leads. • Health colleagues • Education representatives as appropriate • PCF / CYP engagement input as part of participation workstream	Fortnightly	Manages delivery within agreed scope and timescales. Recommends changes or mitigations.	CS Transformation Board. BMT for operational issues. DMT/LAPB for strategic issues.

	in place for assurance. Receives and reviews RAG-rated performance dashboards, risk registers and milestone tracking reports to monitor progress and delivery confidence. Prepares reports and recommendations for governance boards. Endorses delivery plans, agrees mitigation for risks and recommends escalation of issues to DMT or LAPB where required.	• Chaired by SEN Specialist Transformation Lead			
SEND Capital Strategic Board	Provides strategic oversight of the SEND capital programme, ensuring investment is aligned to 0–25 sufficiency needs, inclusion priorities and the SEND Reform Plan. Oversees delivery of the capital pipeline, including feasibility, approvals, sequencing and risk management, ensuring projects are deliverable to time, cost and quality. Monitors delivery, demand, sufficiency and capital	• SEND strategic leadership (Education & Inclusion) • Sufficiency & place planning leads (0-25) • Schools Organisation and Strategic Development • Finance (High Needs / capital programme) • HCC Property Services / Land & Assets / Estates	Bi-monthly (with additional meetings aligned to capital programme milestones and decision points)	Makes strategic decisions within agreed terms of reference relating to capital investment prioritisation, programme delivery, risk management and sequencing of projects, ensuring alignment with SEND sufficiency and inclusion priorities.	Children's Services Departmental Management Team (DMT) for strategic or delivery risks, with escalation to Corporate Management Team (CMT) where required. Delivery issues impacting SEND Reform escalated to SEND Reform Performance Board and SRO where necessary.

	progress through performance and data reporting, including realisation of benefits such as increased local capacity, reduced reliance on out-of-area placements and improved accessibility of provision.	• Programme / capital delivery leads. • Chaired by Strategic Development Head of Service Engagement with schools, MATs and post-16 providers informs decision-making where capital delivery impacts the education estate and provision development.			
County wide Experts at Hand Implementation Group	Holds day-to-day operational oversight of the Experts at Hand model as part of SEND Reform Plan delivery. Responsible for implementation, workforce planning and delivery against success measures. Monitors progress, risks and performance through delivery metrics and reporting, and feeds operational intelligence into governance. Holds authority to endorse delivery plans, agree	• Multi-agency membership including LA officers, ICB representatives, EP, therapy and specialist advisory leads, education representation. • Chair: Experts at Hand Service Lead.	Fortnightly in Q2 of Year 1, monthly in Q3 and Q4 and monthly in Years 2 and 3	Operational decisions on delivery models, phasing, workforce deployment and performance improvement within agreed strategic parameters.	SEND Reform Performance Board / SRO where barriers cannot be resolved.

	mitigation for risks and escalate issues to the SEND Reform Performance Board or SRO where required.				
SEND Reform Workstream Groups (e.g. Partnerships & Participation, Inclusion, Sufficiency, Data)	Design and implement specific elements of the SEND Reform Plan, including Experts at Hand local delivery and data workstreams. Monitor progress, delivery of actions, outputs and early impact. Develop and maintain RAG-rated performance dashboards, risk registers and milestone tracking to provide assurance on delivery confidence and impact. Co-produce solutions with partners, children, young people and families, and escalate issues to the SEND Reform Performance Board or SRO where required.	• Cross-system officers and practitioners • Education, health and social care representation • PCF / CYP involvement proportionate to the workstream • Chaired by Workstream Leads	Monthly although may be more frequent during implementation phase	Makes operational decisions within agreed remit / terms of reference.	SEND Reform Performance Board / SRO where barriers cannot be resolved.
Branch Management Team (LA Education and Inclusion)	Provides operational oversight and leadership of SEND Reform Plan delivery	• Senior officers from E&I. Chaired by Natalie Smith.	Quarterly or earlier if issues arise.	Operational decisions for E&I	Escalation to SEND Reform Performance Board or DMT where required.

	within Education and Inclusion, with accountability for education elements. Monitors progress, risks and delivery at an operational level through RAG-rated performance dashboards, risk registers and milestone tracking reports, providing assurance on delivery confidence and impact.				

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

INSERT DOCUMENT UPLOAD LINK APPENDIX 4 - (PPR07)

Section 5 – Central Government Support

15. **How can we help you?**

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

This may include:

- *Access to specialist expertise or advisory support*
- *Help with workforce development or recruitment challenges*
- *Tools or templates to support data collection, reporting, or evaluation*

- *Facilitation of peer learning or regional collaboration*
- *Support with system-level coordination across education, health, and care*
- *Guidance on navigating regulatory or policy barriers*

Central government support will be critical to enabling effective implementation of the SEND Reform Plan at pace and scale. Access to specialist expertise – particularly in co-production, data analytics, demand modelling and system change – would strengthen local capacity to design and embed sustainable, evidence-led approaches across education, health and social care. Targeted advisory support would help ensure continued alignment with national policy and emerging best practice.

Support with workforce development and recruitment is essential to address capacity pressures across key areas. National programmes to support training, retention and flexible workforce models would help stabilise delivery and enable earlier intervention.

Facilitation of peer learning and regional collaboration would support sharing of effective practice, particularly in areas such as inclusion, early resolution and co-production. This would accelerate improvement and reduce variability.
In addition to the support outlined above, successful delivery of this plan is dependent on:

- Sustained and sufficient revenue funding to meet rising need across the SEND system
- Multi-year funding certainty, particularly for initiatives such as EaH, to enable long-term workforce and service planning
- Adequate high needs capital funding to deliver sufficiency, including inclusion bases and specialist provision
- National workforce strategies to address shortages in key professions (educational psychology, therapies and specialist teaching)
- Alignment across government departments (education, health and social care) to reduce system fragmentation
- Legislative and policy reform to support earlier intervention and reduce reliance on statutory processes.

The LAP will maximise the use of available resources; however, delivery at the scale described is contingent on these national enablers.

Annex B - Supporting Documents

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

Annex C – Risk Matrix

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