Tameside SEND 0-25 Improvement Plan







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Introduction and Overview

In Tameside, we know that many families have faced real challenges in accessing the right support for their children with special educational needs and disabilities. That experience has often been frustrating, and at times deeply disheartening. We want to be honest about that — and clear that we are working hard to change it.

This SEND Improvement Plan sets out how we're doing that. It brings together the Local Authority's Priority Action Plan, published in September, and the wider programme of work taking place across education, health, and care services. It's a plan built on partnership — with schools, professionals, and most importantly, with families. We've already made progress. Some of the changes are beginning to make a difference, and we're proud of the work that's been done so far. But we know there's still a long way to go. Improving SEND services is complex, and it takes time to get things right. We're committed to doing that work — not just quickly, but thoroughly and sustainably.



Our Ambition

Our ambition is simple and shared:

We want every child and young person with SEND in Tameside to get the support they need, when they need it, and to thrive

— in their education, in their communities, and in their lives beyond school



What This Plan Covers

This document begins with an overview of the plan, the outcomes we are working towards, and the risks we foresee in delivering this work. It then moves into the Priority Action Plan — the core set of actions we are focusing on right now. Following that, we outline the wider SEND Improvement Plan, which includes the broader improvements and developments that are underway across the system.

We recognise that the document is long, and that the scale of the work may feel daunting. Our priority is the Priority Action Plan — that's where our immediate energy is focused. But we want you to understand that behind it, a great deal of work is already happening.

We are moving forward on multiple fronts, and we are doing so with care, collaboration, and determination.



Risks and Challenges

We are realistic about the challenges ahead. Improving SEND services involves changing systems, cultures, and relationships — and that takes time. We know there are risks: limited capacity across services, workforce pressures, and the need to rebuild trust with families who have experienced disappointment.

We also know that sustaining momentum and ensuring consistency across settings will be critical. These are not small challenges, but we are approaching them with honesty, transparency, and a commitment to doing things properly.



PAP: Priority Actions following inspection (Priority Action Plan)

Priority Action 1

As a Partnership, we will urgently strengthen our joint strategic approach by ensuring clear governance, aligned commissioning, and effective implementation and monitoring. This will enable us to deliver better outcomes for children and young people with additional needs.

What does good look like for Tameside Children and Young People:

Young people with SEND will experience joined-up, timely support that reflects their needs and aspirations, with their voices heard and outcomes improved through coordinated services.



What difference will this make for Tameside Children and Young People, and their families:

Children and young people in Tameside will benefit from earlier, more coordinated support that meets their individual needs, helping them thrive in education, health, and life. Families will feel listened to, involved, and supported by services that work together, communicate clearly, and are accountable for making a real difference.



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PAP 1:1	Develop a coproduce SEND strategy where we engage with CYP and their families to ensure the lived experience of people with SEND is supported.	1:1a - Develop our partnership vision for SEND in Tameside Engage with Stakeholders/ partners regarding the overarching priorities for the SEND strategy	Head of SEND	Nov-25	A clear and inclusive partnership vision for SEND in Tameside is co-produced through meaningful engagement with a wide range of stakeholders, including children, young people, families, education, health, and care partners. The vision and overarching priorities reflect local needs and aspirations, are widely understood, and have collective ownership and endorsement across the partnership.	In Tameside, a co-produced SEND partnership vision will establish a strong foundation for inclusive practice. Through meaningful engagement with children, young people, families, and professionals across education, health, and care, the vision will reflect local needs and aspirations. It will be widely understood and collectively owned, fostering trust, collaboration, and shared accountability. This unified approach will drive improved outcomes, more responsive services, and a culture of continuous improvement across the borough.	% of children, young people, families, and professionals reporting they feel heard and involved in SEND decision-making, measured by a survey of parents/carers. Baseline: Parent/Carer questionnaire Nov 24 26.8% are satisfied that they can support the improvement of services for SEND in Tameside (Q16) Number of organisations formally endorsing the vision through a shared Tameside agreement. Baseline: Currently zero, as the work to coproduce and endorse this vision has not started.		12/11/2025
		all stakeholders. Appropriate governance of the overarching SEND strategy guidance, local priorities and reflects the learning and recommendations from the most recent Ofsted inspection. The strategy includes clear objectives, measurable outcomes, and incorporates the		and accessible SEND strategy is developed that aligns with national guidance, local priorities, and reflects the learning and recommendations from the most recent Ofsted inspection. The strategy includes clear objectives, measurable outcomes, and incorporates the voices of children, young people, families, and	The new SEND strategy will set a clear, shared direction for inclusive improvement across Tameside. It will align with national guidance, reflect local priorities, and respond to Ofsted recommendations. By embedding the voices of children, families, and professionals, it will ensure services are consistent, responsive, and empowering. The strategy will lead to better outcomes, stronger collaboration, and a culture where every child with SEND is supported to thrive.	Increase in parent/carer satisfaction "I feel listened to and involved" 10% increase from baseline gathered through a survey of parents/carers. Baseline: From PCFS survey August 2025: 102 23.7 % of parents stated Yes 329 76.3% of parents stated No Reduction in formal complaints related to SEND by 20% over 12 months, and an increase in compliments. Baseline:These are total numbers from 1 August 2024 to 31 July 2025. Stage 1 complaints 92 Stage 2 complaints 32 Compliments 0		12/11/2025	



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PAP 1:2	1:2 Partnership Governence	1:2a - Develop an improvement- focused Local Area Board to oversee all improvement activity. Ensuring the board supports co-production of key areas of development and strategic priorities. And that this board is a mechanism to drive forward urgent improvements in services in Tameside.	AD Education/ ICB lead	July-25- to see operational activity April 26- to show impact	An effective SEND Local Area Improvement Board (SLAIB) is established with a clear remit to oversee all SEND improvement activity. The board includes representation from key partners, operates with transparency, and drives improvement forward at pace through focused leadership, timely decision-making, and a strong culture of accountability and collaboration.	A SEND Local Area Improvement Board (SLAIB) will be established to provide strategic oversight and drive system-wide improvement across education, health, and care. The board will include representation from all key partners, including parent/ carer forums, and will operate with transparency, shared accountability, and a commitment to co-production. Through strong leadership, timely decision-making, and a relentless focus on improving experiences and outcomes for children and young people with SEND, the SLAIB will ensure that the local area meets its statutory responsibilities and delivers sustained, evidence-based improvement.	At least 2 coproduced areas are developed through the improvement planning and SLAIB monitoring process with parent/carer forum and CYP reps engaging in 90% of SLAIB meetings. Baseline: 100% of CYP/PCFS reps engaged in the first SLAIB meeting. No co-produced areas of work have been completed at present. 80% of SLAIB-agreed actions implemented within 3 months Baseline: No SLAIB agreed actions at the current time.		12/11/2025
		1:2b - Secure agreement for delegated decision making through the above Local Area board	AD Education/ ICB lead	Jan-26	Clear governance arrangements are in place, with delegated decision- making powers formally agreed and documented. The SEND Local Area Improvement Board (SLAIB) is empowered to make timely, informed decisions that support and strengthen multi- agency collaboration, ensuring that SEND decisions are made efficiently, transparently, and in the best interests of children and young people.	In the future, Tameside will benefit from robust governance and empowered decision-making through the SEND Local Area Improvement Board. This will lead to faster, fairer decisions, stronger multi-agency working, and improved outcomes for children and young people. Families will experience greater transparency and trust, while professionals will be supported to collaborate confidently and effectively—creating a more inclusive and responsive SEND system across the borough.	SLAIB decisions aligned with local SEND strategy and priorities to ensure the actions required from the inspection are the priorities for the LA. Baseline: No SLAIB decisions have been agreed at the current time. 80% of SLAIB decisions made within agreed timeframes Baseline: No SLAIB agreed actions at the current time.		12/11/2025



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		1:2c - Secure the PCFss as a effective and valued strategic partner who supports the local areas' co-production with CYP and their families ensuring services are effective in meeting their SEND needs. Ensure all PCFss groups are represented in Tameside around key decisions.	Strategic Director of Childrens Services/ Deputy Place Based Lead	Sep-26	Tameside Parent Carer Forum are recognised and embedded as a valued strategic partner within the SEND system. Structures are in place to ensure their meaningful involvement in decision- making, co-production, and strategic planning. In addition, the views of other parent carer organisations are actively sought to ensure that a diverse range of voices are heard and reflected in strategic decisions.	Tameside will establish a SEND system in which multiple Parent Carer Forums and a broad spectrum of parent carer voices are recognised and embedded as valued strategic partners. Clear structures will ensure their meaningful involvement in decision-making, co-production, and strategic planning. This inclusive approach will actively seek and reflect the views of diverse parent carer organisations and individuals, ensuring that strategic decisions are shaped by a wide range of lived experiences. As a result, SEND services will become more responsive, equitable, and aligned with the real needs of children, young people, and families across the borough.	Engagement at strategic meetings by parent carer representatives, at all local area strategic discussions. Ensuring that the voice of the CYP and families in Tameside is evident in strategic documents. Baseline: PCFS representatives have been involved in the development of: • the improvement plan • the updated SEND strategy • LA Scrutiny of these documents. • PINS/ND in schools. Annual results from parent carers measuring: Satisfaction with involvement opportunities. Perceived influence on decision-making. eg no of engagements with changes to policy, strategy and service structure Baseline: Not currently measured; baseline will be collected by November 2025.		12/11/2025



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PAP 1:3	Develop a comprehensive all-age commissioning strategy for CYP with SEND across the local area partnership	1:3a - Recruitment to the Children's Commissioning team	Assistant Director for all age commisioning	Dec-25	Key roles within the Children's Commissioning Team are successfully recruited, ensuring the team has the capacity, skills, and expertise to lead and deliver strategic commissioning priorities for children and young people with SEND.	A dedicated Children's Commissioning Team is established to build strategic capacity for commissioning services for children and young people with SEND. A comprehensive review of current provision identifies strengths, weaknesses, and	80% of SEND services evaluated against quality and outcomes criteria with a rating of at least satisfactory. Baseline: There is no commissioning quality and outcomes framework in place at the current time. PCFS report engagement and views heard/ their views influenced the plan. Baseline: Feedback loop to be in place for work completed with PCFs and parent engagement groups. This is to be in place by Nov 2025.		12/11/2025
		1:3b - Review and create a protocol for joint commissioning arrangements with support from DFE SLIP partner, ensuring joint commissioning plans align with the areas identified for improvement in the SEND strategy.	Assistant Director for all age commissioning	Jan-25	A joint commissioning protocol is developed with support from the DfE SLIP partner, clearly outlining shared responsibilities and processes. It is agreed by all partners, embedded in practice, and used to guide collaborative commissioning decisions.	gaps, forming the foundation for a co-produced Joint Commissioning Strategy. Once approved, the strategy enables more coordinated, needsled, and outcome-focused services, improving support and outcomes for children, young people, and their families.			12/11/2025
		1:3c - Review current SEND provision – identify what works well, what doesn't work well. Identify gaps in provision	Assistant Director for all age commissioning	Jan-25	A comprehensive review of current SEND provision is completed, the review clearly identifies strengths, areas for improvement, and gaps in provision, providing a robust evidence base to inform future commissioning decisions				12/11/2025



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		1:4d - Co-produce joint commissioning strategy Approve Joint commissioning strategy	Assistant Director for all age commissioning	Jan-26 Publication Feb-26	A Joint Commissioning Strategy is co-produced with partners, including health, education, social care, and parent carers. The strategy is informed by the provision review and reflects shared priorities, clear outcomes, and agreed responsibilities. The strategy is formally approved and adopted across relevant agencies, with a clear implementation plan in place.				12/11/2025

Not yet started: The action is planned as part of expected delivery timescales, but is not yet due and/or is dependent on preceding actions.

On track: The action has started, is on track for completion, and there are no issues raised requiring escalation.

Vulnerable: Action looks unlikely to be achieved, or timescales met, as planned and this may have implications on improvements, so requires escalation.

At risk: There is a risk that this action will not be completed, and escalation is required and a plan to mitigate risks must be implemented.

Complete: Action fully completed and intended impact/outcome is evident.



Priority Action 2

We will improve our systems and processes for information sharing across education, health, and care. By embedding effective joint working, we will support professionals to collaborate more effectively and improve the experiences of children and young people. We will also implement and monitor the effectiveness of these improvements through shared performance measures, regular multi-agency reviews, and feedback from professionals and families to ensure sustained impact.

What does good look like for Tameside Children and Young People:

Children and young people in Tameside will experience more joined-up support as professionals share information effectively and work together to meet their needs. The impact of this collaboration will be monitored and improved through shared measures, regular reviews, and feedback from families and practitioners.

What difference will this make for Tameside Children and Young People, and their families:

Children and young people will experience more consistent, timely, and personalised support, helping them to achieve better outcomes in education, health, and wellbeing. Families will feel more supported and reassured, as services communicate clearly, work together effectively, and respond to their feedback to make lasting improvements.



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PAP 2:1	An integrated data system with shared partnership working	2:1a - Identification and procurement of new Management Information System for the service (or significant improvements made to the current system) with emphasis on accessibility and transparency for partner agencies and parents	Head of Business Intelligence	Dec-25	A secure and user-friendly integrated data system is developed and adopted across partner agencies. The system enables real-time information sharing, supports joint decision-making, and enhances the coordination of support for children and young people with SEND.	Tameside will implement a secure, integrated data system that enables realtime information sharing across agencies. This will improve coordination, reduce complaints, and allow services to self-serve accurate data. Data quality will improve, statutory returns will be	80% of families reported improved communication and transparency via the parent/carer survey Baseline: Parent Survey 2024 EHCP students 55.3% of parents felt listened to when developing plans and provision for their child (Q39)		12/11/2025	
		2:1b - Continue to develop Children's Data Warehouse and roll out initial suite of Power BI reports, to provide constant feedback for managers and workers.	Head of Business Intelligence	Dec-25	Service sees improved engagement and transparency via MIS change and hence reduced number of queries and complaints.	statutory returns will be automated, and support for children and young people with SEND will be better informed and more timely.	for children and young people with SEND will be better informed and more	65.3% of parents felt it was easy to contact the person they need (Q33) 78.5% of parents stated they were spoken to and listened to respectfully (Q36) We currently do not measure around transparency of information a baseline will be collected by November 2025.		12/11/2025
		2:1c - Onboard data engineering posts (initial focus for these is around Children's Services) to support implementation of modern cloud-based Data Platform	Head of Business Intelligence	Dec-25	Service can self-serve data and has confidence in its accuracy and integrity.		90% of staff reporting confidence in data accuracy (via survey) Baseline: Staff Survey August 2025. I have confidence in the accuracy of the date I am given: 21% I do not have confidence in the		12/11/2025	
		2:1d - Construct 'single view' datasets incorporating SEND data with information primarily from Education and Social Care systems. Scope will broaden over time.	Head of Business Intelligence	Sep-26	Data quality improvement identified (% of records with missing or incomplete/inaccurate info reduced) and a cycle of constant improvement in this area is established. Statutory return production significantly simplified through automation and data accuracy		accuracy of the data I am given: 79% 100% of partner agencies actively using the IDOX EHCP system, the impact of this is an improvement in the transparency of information and overall efficacy of communication. Baseline: IDOX implementation is ongoing. Should see impact after implementation (Planned October 2025)		12/11/2025	

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PAP 2:2	Implement systems and processes to enable Multi Agency Disciplinary Team working	2:2a - Establish Multi-Agency Disciplinary Team Steering Group - Form a multi-agency leadership team with clear roles and responsibilities.	Assistant Director - Early Help and Family Help Transformation	Oct-25	Clear systems and streamlined processes are established to support effective Multi-Agency Disciplinary Team working. These processes enable timely information sharing, joint planning, and coordinated interventions, ensuring that professionals can work collaboratively and efficiently.	Children, young people, and their families in Tameside will benefit from a more coordinated, responsive, and transparent system of support. Clear systems and streamlined processes will ensure timely information sharing, joint planning, and consistent decision-making	Case studies and Multi Agency audits show: How integrated working led to earlier identification of needs How coordinated support improved outcomes for a CYP and their family, using key indicators before and after the multi-agency working that is being audited to show the		12/11/2025
		2:2b - Define Governance Structure – Set up decision- making protocols, escalation routes, and accountability frameworks.	Assistant Director - Early Help and Family Help Transformation	Dec-25	Success will be evident when decision-making protocols are consistently followed, escalation routes are clearly understood and effectively used, and accountability frameworks are embedded in day-to-day operations, with roles and responsibilities clearly owned and documented.	across services. Families will experience fewer delays, reduced duplication, and more equitable access to help. Professionals will work collaboratively through shared tools, referral pathways, and assessment frameworks, leading to earlier intervention and improved outcomes. A co-			12/11/2025
		2:2c - Design Early Years Support Hub Model – Identify core services and professionals to be co-located or virtually integrated.	Assistant Director - Early Help and Family Help Transformation	Apr-26	A clear model is established, detailing core services and professional roles. Services (e.g. health, early years, SEND, voluntary sector) are co-located or virtually integrated through shared systems and joint working. Multi-agency protocols, referral pathways, and data-sharing agreements are in place and actively used. Professionals report improved communication, joint planning, and shared responsibility. Evidence shows better outcomes—earlier support, reduced escalation, and stronger family engagement. The model aligns with Families First for Children reforms and local early help priorities	produced vision and shared priorities will drive collective responsibility, and family voice will be embedded in service design and delivery. Ultimately, this model will build trust, strengthen relationships, and ensure that support is tailored, trauma-informed, and effective.			12/11/2025

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		2:2d - Develop Shared Vision and Objectives - Co-create a mission statement and shared outcomes across agencies.	Assistant Director - Early Help and Family Help Transformation	Dec-25	A co-produced mission statement is agreed upon and endorsed by all key stakeholders (e.g. Early Help, Early Years, Health, Education, Voluntary Sector, and Social Care), There is a clearly defined set of shared outcomes and priorities, All partners understand, own, and can articulate the shared vision and objectives, reinforcing a collective responsibility for improving outcomes for children and families. The vision and objectives are embedded into service plans, Partnership meetings and workstreams are structured around the shared objectives		What are your confidence levels in the following services to support CYP with SEND: Paediatrics Yes 60.2% No 36.1% (Q9) ISCAN Yes 44.6%		12/11/2025
		2:2e - Implement Secure Digital Platform - Select and configure a GDPR-compliant system for case management and information sharing.	Head of Business Intelligence	Apr-26	We will know the secure digital platform is successfully embedded in our multi-agency teams when professionals consistently use it to share information, coordinate support, and manage cases in a timely, GDPR-compliant manner. Evidence of success will include improved communication across disciplines, reduced duplication, and clearer, joined-up planning for children and young people with SEND. Families will experience more seamless support, and staff will report increased confidence in collaborative working.		Yes 44.6% No 48.2% (Q10) Children's Social Care Yes 9.7% No 83.1% (Q11) Family Hubs and Parenting Yes 7% No 83 (Q12)		12/11/2025
		2:2f - Create Unified Referral and Triage Process - Design a single referral form and triage criteria for all partner agencies.	Assistant Director - Early Help and Family Help Transformation	Apr-26	We will know the unified referral and triage process is successfully implemented when all partner agencies consistently use a single referral form and shared triage criteria. Referrals are processed more efficiently, with fewer delays and clearer decision-making. Professionals report improved clarity and confidence in the process, and families experience a more streamlined and coordinated response to their needs. Data shows increased consistency in referral quality and timeliness across services.		Early Help Yes 23.2% No 73.1% (Q13)		12/11/2025



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		2:2g - Develop Joint Assessment Framework - Agree on a common assessment tool and thresholds for intervention.	Assistant Director - Early Help and Family Help Transformation	Apr-26	We will know the joint assessment framework is successfully developed when all partner agencies use a common assessment tool and agreed thresholds for intervention. Assessments are consistent, transparent, and lead to timely, appropriate support. Professionals report greater confidence in decision-making, and families experience more equitable access to services.				12/11/2025
					Data shows improved alignment in multi-agency responses and reduced variation in outcomes.				
		2:2h - Deliver Multi-Agency Training – Provide joint training on safeguarding, trauma-informed practice, and data sharing.	Assistant Director - Early Help and Family Help Transformation	Apr-26	Training attendance and completion records, facilitator feedback, Participation feedback, Increased confidence and competence, Staff report feeling more equipped to handle safeguarding and trauma-informed cases, Feedback from families indicating improved support and understanding from professionals, Case audits evidence trauma-informed and safeguarding principles are being applied.				12/11/2025
		2:2i - Engage Families in Co-Production - Set up parent/ carer panels and feedback mechanisms to shape services.	Assistant Director - Early Help and Family Help Transformation	From Sept-25 Impact to be measurable by April -26	Parent/Carer Panels are established, Terms of reference are clearly defined and agreed upon, Feedback mechanisms are in place and active, Family Input influences decision-making, satisfaction and trust levels improve, representation and inclusion are prioritised.				12/11/2025
		2:2j - Early Years Support Hub – Launch the hub in a selected locality with clear entry and exit criteria.	Assistant Director - Early Help and Family Help Transformation/ Designated Clinical Officer/ Designated Social Care Officer	Sep-26	Hub is operational in the selected locality, Clear entry and exit criteria are defined and used, Referral and case data are being captured, stakeholder awareness and involvement, and Monitoring and evaluation are in place. Family feedback confirms impact.				12/11/2025

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		2:2k - Monitor and Evaluate Efficacy - Track KPIs such as referral response times, family satisfaction, and service outcomes.	Assistant Director - Early Help and Family Help Transformation	Ongoing from Sept- 26	A clearly defined set of KPIs has been agreed upon (e.g., referral response times, family satisfaction scores, outcome measures). Baselines and targets for each KPI are set, Systems are in place to collect data routinely, Data is updated and reported at agreed intervals, Referral Response Times Are Measured and Reported, Surveys, interviews, or feedback forms are regularly completed by families, Outcomes such as developmental progress, family wellbeing, or access to services are tracked, Before/ after comparisons are available to show impact, KPI dashboards or reports are regularly reviewed by leadership				12/11/2025
		2:2I - Refine Model Based on Feedback – Use evaluation data to improve processes and address gaps. Plan for Wider Rollout – Develop a roadmap for scaling the MADT model to other age groups and services.	Assistant Director - Early Help and Family Help Transformation	April-27	We will know the model is being refined effectively when evaluation data is actively used to improve processes, address gaps, and respond to feedback from families and professionals. Changes are clearly documented, and teams report improvements in clarity, efficiency, and impact. A roadmap for wider rollout is in place, with clear milestones for extending the MADT model to other age groups and services. Stakeholders are engaged in planning, and early implementation sites show readiness and positive outcomes.				12/11/2025



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		2:2m - Secure Long-Term Funding and Resources - Identify sustainable funding streams and workforce capacity.	Assistant Director - Early Help and Family Help Transformation	April-27	We will know long-term funding and resources are secured when sustainable funding streams are identified and embedded into strategic planning, and workforce capacity is aligned to support delivery. Multi-agency teams report confidence in the stability of the model, and recruitment and retention data reflect a resilient, well-supported workforce. Financial planning shows clear investment in the MADT approach, enabling continuity and growth.				12/11/2025
		2:2n - Communicate Progress and Impact - Share successes and lessons learned with stakeholders and the wider community.	Assistant Director - Early Help and Family Help Transformation	Sep-27	We will know progress and impact are being effectively communicated when stakeholders and the wider community are regularly informed of successes, challenges, and lessons learned. Updates are shared through accessible channels, and there is evidence of increased engagement, trust, and shared ownership of the MADT model. Feedback loops are in place, and stories of positive change are used to celebrate impact and drive continuous improvement.				12/11/2025



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PAP 2:3	Develop Multi Agency Disciplinary Team (MADT) working arrangements to support individual CYP and their families	2:3a - Co- locate- locate personnel from different service areas and specialisms within locality SEND hubs Identified lead practitioner/ single point of contact for key CYP Commissioning of school based education leads for each SEND locality	Assistant Director - Early Help and Family Help Transformation	Sep-27	Multi-Agency Disciplinary Team (MADT) arrangements are fully embedded, with clearly defined roles, responsibilities, and communication pathways. Teams work collaboratively to provide holistic, person-centred support to children, young people, and their families, ensuring their needs are met in a timely and coordinated way.	In the future, families in Tameside will experience a more seamless and supportive journey when accessing services for their children. Multi-Agency Disciplinary Team (MADT) arrangements will be fully embedded, with professionals working collaboratively across education, health, and social care. Clear roles and communication pathways will ensure that families no longer face delays or confusion. Instead, they will receive timely, coordinated, and person-centred support tailored to their child's unique needs. As a result, children and young people will thrive in environments that understand and respond to their whole selves, and families will feel empowered, respected, and confident in the support they receive.	Increased % of cases with a shared multiagency plan in place so that there is a holistic understanding of needs, challenges and support required, with suitable actions being taken to improve outcomes. Baseline: Currently, O% of cases have a shared multi-agency plan of the type described, although many CYP have multi-agency input; this data is not currently recorded. A baseline will be calculated by November 2025. 80% of cases referred in receive support within statutory or locally agreed timeframes to show improved outcomes through timely support being provided for identified needs. Baseline: This data is not currently recorded. A baseline will be calculated by November 2025.		12/11/2025

Not yet started: The action is planned as part of expected delivery timescales, but is not yet due and/or is dependent on preceding actions.

On track: The action has started, is on track for completion, and there are no issues raised requiring escalation.

Vulnerable: Action looks unlikely to be achieved, or timescales met, as planned and this may have implications on improvements, so requires escalation.

At risk: There is a risk that this action will not be completed, and escalation is required and a plan to mitigate risks must be implemented.

Complete: Action fully completed and intended impact/outcome is evident.



Priority Action 3

As a Partnership, we will take decisive action to reduce delays and close gaps at all stages of the pathway and service provision to meet the neurodevelopmental care and support needs for children and young people with SEND.

What does good look like for Tameside Children and Young People:

Children and young people in Tameside will access the right support more quickly, with fewer delays and clearer pathways—especially for neurodevelopmental needs—ensuring no one is left waiting for the help they need.

What difference will this make for Tameside Children and Young People, and their families:

Children and young people will receive the right support sooner, helping them to thrive and reducing the frustration of long waits. Families will feel more reassured and empowered, knowing that services are working together to close gaps and respond quickly to their child's needs.





	Target	Activity to achieve the target	Owner	Timescale for completion	Outcomes for success (how we know it's achieved)	Impact (the difference this will make/ has made)	Evidence of how impact is measured (how we show this, including baseline)	RAG	SLAIB SIGN OFF DATE and RAG
PAP 3.1	Children, young people and families will have a strong voice in the transformation programme of Neurodivergent pathways.	3.1a Programme of stakeholder events held quarterly dedicated update sessions with CYP and families.	CYP MH Commissioner (MH)	Sep-25	CYP and families report they feel supported and listened to. The views and experiences of CYP & families inform the ongoing transformation. Named owners of content	Parent carers have a clear understanding of what to expect for their child and where to access support and the local area can be assured that this is having an impact high quality data on increased uptake across partnership.	Increased hits on website shows that families' needs are being met at a universal family support level. There will be a "you said, we did" section for feedback plus annual family meeting with Comm's team. Baseline: Increase in parent care satisfaction will		12/11/2025
		3.1b Co-design and production with the SEND youth council / PCFss on ND pathway model.		Apr-26	supported by dedicated communications officer within the LA Feedback from stakeholder events reflects improved communication.	Trusted and up to date Local Offer page with robust links to Statutory and VCSE provision.	show that families feel listened to and involved 10% increase from baseline gathered through a survey of parents/carers. Baseline: Increased satisfaction reported by children		12/11/2025
		3.1c Improve visibility and accessibility of support through the local offer and other channels, such as provider websites.		Sep-25	The Tameside offer is designed to be accessible to the Tameside families through being designed in a child and parent friendly manner.	Families/Carers/CYP engaged in the development of the early help support offers – building trust between statutory services, VCSE and families.	and young people on feeling listened to. 10% increase from baseline gathered through survey of SEND youth council Baseline: Family feedback gathered through Local Offer reported to Local Area Improvement		12/11/2025
		3.1d Co-produce and publish a universal ND support offer for families and professionals, including early help strategies, resources, and signposting to services.	ND Pathway Programme Manager & Head of Service for Early Help	Sep-26	Co-Produced resources accessible to all	Communication and Co- Production sub-group will build on work with Parent Carer Forums as well as the wider VCSE providers in Tameside and GM. Families, carers and Children and young people engaged in the development of the early help support offers, ensuring that the services are accessible and meet the needs of our families.	Board Baseline: Satisfaction measures in service KPIs reported through monthly data set (linked to 3.2c) Baseline: CYP and family experiences shared at ND Programme Board quarterly. Baseline: A co-produced support offer is on the local offer and made available in community settings with uptake audited and reported to the local area partnership Baseline:		12/11/2025

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PAP 3.2 Children and Young people and families have access to support pathways when they need it.	3.2a Transform the current ND pathway and system from diagnosis led to needs led model of care. - Implement the ND pathway redesign programme with an enhanced neurodivergent support offer for CYP and families which can be accessed without diagnosis across Tameside - Implement the 'hub' approach with a one stop approach for early help - Review and bring together all existing SEN support offers to create a suite of tools for schools, practitioners and CYP&families - Roll out digital front door and single point of access in place as part of the ND hub through the local offer and work with partners and new VCSE provider to ensure the site is: easy to use, up to date, needs led aligned to the thrive model elements 'early help and getting help' - Introduce or enhance pre & post diagnosis workshops, advice lines and parent support groups to reduce pressure on clinical services and empower families - Ensure families, PCFs and young people are involved in the transformation programme and meetings (linked to 3.1)	ND Pathway Programme Manager & Head of Early Help & AD Education	Pilot phase one Oct 25 Roll out from April 26 - Dec 26	New VCSE Navigation service via the new ND hub operational. Training programme in place that is evidence based with clear suitability and access criteria. Review of Tameside ND core offer against the ICB vision shows compliance and improvement towards best practice in its multi-disciplinary approach and its delivery of early help and support. Families, users and practitioners can access and navigate the pathways more easily to support children and young people to receive help and support to meet their needs.	Earlier and Improved access to assessment and diagnostic pathway support for children and young people and reduction in rejected referrals. Reduction in reported parental frustration at current complex route through early help and support. Joined up and holistic approach to assessment ensuring children and young people are not sitting on multiple waiting lists or on the 'wrong' waiting list. Therefore, reducing delays and multiple appointments / assessments. Those with the most complex need are seen in a timely manner by the most appropriate professional/ service. Families' needs being met through access to neurodiversity support at the earliest opportunity to available to them. Families/Carers understanding of ND needs and confidence in managing ND needs of their child/ren is improved.	Referral acceptance rates for assessment are increased. Baseline: Increased uptake in prediagnostic support (uptake audited and reported to LAP) Baseline: Parent carer forums report higher satisfaction and less complaints from families on navigating ND pathways. Baseline: Achievement of navigation service KPl's reported to LAP and Children's Improvement Board and GM ND programme Board. Baseline: Improved positive Professional and Practitioner feedback on the accessibility and ease of navigation of services gathered through baseline and quarterly survey. 10% improvement by April 26. Baseline: Review of audit demonstrates improved outcomes for children and young people accessing early help and support. Baseline:		12/11/2025



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		3.2b Implement the local profiling tool to support identification of needs and appropriate support.	ND Pathway Programme Manager & Head of Early Help & AD Education	Apr-26	Introduction of a ND profiling tool in Tameside – monitored and managed via the new ND hub – monitoring will be number of profiles completed and user satisfaction review.	ND profiling tool is in use and supporting families to access help and support – pathway is clear in relation to NP tool and triage/MDT approach established. Children and young people can get the right support, right time to be happy, healthy and able to achieve their ambitions.	Increased utilisation of ND Profiling tool. Increase in early access to therapy services as evidenced through the dashboard. Baseline: Reported improvement in parent & professional satisfaction with this as a supportive tool through annual parent satisfaction survey. Baseline:		12/11/2025
		3.2c Develop a single data set for all ND pathways to monitor activity.	ND Pathway Programme Manager	Jun-26	Clear reporting in place for oversight of activity across ND pathways that demonstrates timely access to services and support for families	Clarity on reporting of activity across all ND pathways supports the system to identify blockages and delays in a timely manner and to jointly commission services to meet the needs of children, young people and families and ensure Children and young people experience high quality and timely services which they have co-designed.	Data set reported at Local Area Partnership Improvement Board, Children's Improvement Board, Tameside Locality Committee and GM SEND and provider oversight forums. Baseline:		12/11/2025
		3.2d Work with partners to encourage and see an increase in Early Help, "Whole Family" strength-based assessments being completed in Early Years 0-5 years as soon as they are identified as having neurodevelopmental needs or emerging SEND.	ND Pathway Programme Manager & Head of Early Help	Jun-26	An MDT approach is adopted across early years and health services to support children and young people to access the MCR Early Years pathway and ND early help offers.	Increased early health assessments conducted will help mitigate parenting capacity or environmental factors being a contributing factor to child development delay. Enabling children to have support at a much earlier time and support school readiness.	Increase in early help assessment rate. Baseline: Increase rate in school readiness (as reported through LAP) Baseline:		12/11/2025



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		3.2e Provide training for education, health, and care professionals to support identification and early response to neurodiverse needs within universal settings.	ND Pathway Programme Manager & AD Education	Apr-26	Children have timely assessments and an offer of support which is accessible through family hubs.	Children and young people will benefit from earlier identification of need and earlier access to support packages and assessment pathways where required. Parent carers have a clear understanding of what to expect for their child and families are equipped with skills and knowledge to support them in achieving their ambitions.	Schools and professionals report improved confidence in supporting children and young people with ASC through access to training and resources. Baseline: Reported number of training sessions delivered and positive outcomes reported through training session feedback and evaluation. Baseline:		12/11/2025



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PAP 3.3	Children and young people and families will receive more timely access to	3.3a Establish monthly partnership forum where education, health, and social care partners meet to review pathway performance, troubleshoot delays, and improve integration of services.	Head of CYP and Mental Health	Dec-25	The neurodiverse pathways are fully embedded within the broader neurodevelopmental model, ensuring joined-up care and consistency across services.	ND programme group and sub-groups fosters integrated partnership working across locality. Improved ASC/ADHD pathway will lead to faster early help assessments, earlier access to support, and clearer guidance for families. Lack of diagnosis will no longer be a barrier to accessing support therefore can access support dependent on individual need. Support will be tailored to individual need. Improved access to a range of support offers.	Reduction in the rate of complaints to services relating to delays in accessing services. Baseline: Improved feedback of CYP and parent carers on experience of ND assessment and diagnostic process via annual family Survey. Baseline: Children and young people report access to effective support post-		12/11/2025
		3.3b Implement systems to track waiting times, assessment outcomes, and uptake of universal support to inform planning and resource allocation.	TBC	Jun-26 Clear reporting in place for oversight of activity across ND pathways Families/Carers understanding of ND needs and confidence in managing ND needs of their child/ren is improved. Improved experience for CYP and families from referral and throughout their assessment. Services have less complaints relating to timely access to services as children have access to timely and appropriate support.	diagnosis (via baseline survey). Baseline: Increase in early help assessment rate. Baseline: Waiting times for ND services presented to LAP on a monthly basis.		12/11/2025		
		3.3c Review implementation of quality first teaching for neurodiversity across the local area partnership through the Ordinary available Framework and reasonable adjustments.	AD Education	Mar-26	A clear and accessible universal support offer is in place, providing early help, classroom strategies, and family advice before and after diagnosis.	Effective prioritisation for those most in need or at highest risk. Universal support is reviewed and embedded consistently across settings, building a strong foundation for early help and inclusion. Families experience a more transparent, equitable journey, and professionals are supported by systems that enable effective, joined-up care. Pre-school age children are assessed using a multi-Agency model/one stop clinic model. Reduced waiting times and clinic appointments for families. Shared learning and better partnership working for professionals.	Baseline: PINS data presented to LAP on a quarterly basis. Baseline:		12/11/2025



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		3.3d Engage with Schools as specialist supporters of children with ASC through PINS and Neurodiversity in schools' programmes. Ensure TSOSS and EPS service training packages include specialist training for areas that are part of the ASC triad of needs/spectrum e.g. anxiety, sensory needs	Principle Psychologist	Sept 26	Families report improved access to timely advice, intervention, and ongoing support, regardless of diagnosis status. PCFss are involved in the implementation and roll out of the PINs programme				12/11/2025
		3.3e Link to Strategic Priority 7- Balanced SALT system / Commissioned health services for children and young people with SEND	CYP Commissioner (health)	TBC	Service gaps are identified and addressed, joint commissioning aligns resources to need, and triage processes are fair and responsive.				12/11/2025



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Pap 3.4	Children and young people and families will receive more timely access to diagnostic and assessment services	3.4a Establish Integrated ND assessment and diagnosis pathway programme with GM, VCSE, Education, community paediatrics and CAMHS providers to ensure the assessment and diagnostic pathway provides right input in right setting. - implementation of screening and high-quality triage at the start of the pathway to ensure clarity, reduce inappropriate referrals and fast-track the most urgent cases (April 26) - Identify and mitigate gaps in commissioned service for assessment and diagnosis of ASD/ADHD to ensure demand meets trajectory (Dec 25) - work with current provision to incrementally address transition from CAMHS only assessment and diagnosis to an integrated model, starting with early years through a Child Development Unit partnership approach (Sept 26)	GM Strategic Commissioning Lead / ND Pathway Programme Manager / GM Strategic CYP Commissioning Lead	April 26	The commissioned assessment and diagnostic service meets current and future demand. Tameside assessment and diagnostic pathway will be in line with all other localities within the Pennine Care Footprint. Waiting times for assessments are reduced through targeted investment and pathway improvements. Referral pathways and criteria are streamlined and well-communicated across education, health, and care services. Improved timeliness and reduced burden in making referrals. Pilot CDU model in place final quarter of 25/26 working with existing resource whilst commissioning of new model provides funding for further development in 2026.	Support CYP and families to gain a diagnosis and where appropriate access treatment such as medication for ADHD. Clearer pathways of support, assessment and diagnostics with increased capacity to provide timely care through MDT approach. Family's needs are being met through access to neurodiversity support at the earliest opportunity.	Reduction in the number of children and young people waiting longer than 12 months for initial assessment (15% reduction in waits for initial assessment above 12 months by September 26) Baseline: Reduction in number of young people waiting longer than 12 months from initial assessment to diagnosis (10% reduction by September 26) Baseline: Parent Carer forums report higher rates of satisfaction and reduction in complaints from families accessing ND assessment services Baseline: Improved positive professional and practitioner feedback on the accessibility and ease of navigation of assessment and diagnostic processes gathered through baseline and quarterly survey (15% improvement in positive responses by September 26) Baseline:		28/08/2025



Ref	Target	Activity to achieve the target	Owner	Timescale for completion	Outcomes for success (how we know it's achieved)	Impact (the difference this will make/ has made)	Evidence of how impact is measured (how we show this, including baseline)	RAG	SLAIB SIGN OFF DATE and RAG
		3.4b Review community Paediatric service specification including requirements for CY&P with ND needs, with input from professionals and families, children and young people.	GM Strategic Commissioning Lead / ND Pathway Programme Manager / GM Strategic CYP Commissioning	Sep-26	Service gaps are identified, joint commissioning aligns resources to need, and plans are in place and responsive to mitigate gaps and make best use of	Gaps in provision are understood and available resources are directed to meet the care requirements of those children and young people with the greatest need. Children and young people	Strategic commissioning intentions in place which detail intention to enhance services to meet need Baseline:		12/11/2025
		3.4c Undertake full strategic commissioning review of the community paediatric services following review and ensure health priorities are reflected in the Joint Commissioning Strategy for SEND and commissioning intentions of the GM ICB	Commissioning Lead	Apr-27	system resources to best meet the needs of the SEND community.	with SEND have a full range of support and intervention services available to them in Tameside that ensure they are able to thrive, be happy and fulfil their ambitions.			12/11/2025
		3.4d Time limited delivery of additional activity through increased clinics, recruitment of specialist staff, or working with partner providers to reduce existing wait times.	AD CAMHS	Dec-25	Children and young people who have been waiting excessive periods of time will receive assessment and diagnostic input to enable them to receive appropriate care and achieve their potential.	Those children and young people that have been on waiting lists for in excess of 2 years will be prioritised for assessment and diagnosis based on clinical assessment of need. Children and young people who are transitioning from one educational setting to another or into adulthood will be prioritised for assessment and diagnosis.	Reduction in the number of children and young people waiting longer than 24 months for initial assessment (20% reduction in waits for initial assessment above 24 months by June 26) Baseline: Reduction in number of young people waiting longer than 24 months from initial assessment to diagnosis (10% reduction by June 26)		12/11/2025
							Baseline: Parent Carer forums report higher rates of satisfaction and reduction in complaints from families accessing ND assessment services Baseline:		



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		3.4e Ensure the 16–18 age group has full access to assessment and support in line with younger children, with appropriate transition planning into adult services.	AD CAMHS & MH commissioner	Apr-26	Young people aged 16–18 have full and timely access to ASC/ADHD assessment and support as part of the neurodevelopmental pathway.	All children and young people regardless of age will have access to the full range of ND services	Increased utilisation of ASD/ADHD services by 16-18 year olds as evidenced through the performance dashboard. Baseline: Reported improvement in parent & young person's satisfaction as reported through SEND youth council satisfaction survey. Baseline: Reduction in number of children and young people aged 16-18 awaiting assessment for over 12 months (20% reduction by June 26) Baseline:		12/11/2025
		3.4f Link to Health Provision workstream.	CYP Commissioner (health)	Apr-27	Service gaps are identified, and plans are in place through strategic commissioning plans to provide services to meet need.	Wider health provision is in place and accessible for children and young people to ensure they have access to care and support that enables them to reach their full potential	See Priority 7		12/11/2025

Not yet started: The action is planned as part of expected delivery timescales, but is not yet due and/or is dependent on preceding actions.

On track: The action has started, is on track for completion, and there are no issues raised requiring escalation.

Vulnerable: Action looks unlikely to be achieved, or timescales met, as planned and this may have implications on improvements, so requires escalation.

At risk: There is a risk that this action will not be completed, and escalation is required and a plan to mitigate risks must be implemented.

Complete: Action fully completed and intended impact/outcome is evident.



Tameside SEND Plan on a Page

Ref	Workstream	Lead group	Leads	System change	Desired outcome	Key risk/s
Strategic Priority areas	Priority Actions following inspection (Priority Action Plan)	PAP Steering Group	PAP 1- Tracey Harrison (AD for all Age Commissioning) Sally Atkinson (Head of Start Well) PAP 2- Elaine Bentley (AD for Early and Family Help) Maria Palma (Service Manager CWD and DSCO) PAP 3- Stephanie Sloan (Deputy Place Based Lead) Clare Woodford (ND pathway project lead)	As a Partnership, we are committed to transforming the way we support children and young people with additional needs. By strengthening our joint strategic approach, we will ensure clear governance, aligned commissioning, and effective implementation. This will lead to more coordinated services and better outcomes. We will improve how information is shared across education, health, and care, enabling professionals to work together more effectively. Through shared performance measures, regular reviews, and feedback from families, we will monitor progress and ensure lasting impact. Decisive action will be taken to reduce delays and close service gaps—particularly in key areas like neurodevelopmental support—ensuring timely, responsive care for every child.	The Partnership aims to create a cohesive, child-centred system where education, health, and care services work seamlessly together. Through strengthened governance, aligned commissioning, and improved information sharing, we will reduce delays, close service gaps, and ensure timely, effective support. Our goal is to improve outcomes and experiences for children and young people with additional needs, ensuring they receive the right help at the right time, every time.	Lack of Shared Ownership Across Partners: Risk that agencies may not fully commit to joint governance or aligned commissioning, leading to fragmented delivery. Insufficient Capacity and Resources: Limited staffing or funding could hinder the implementation of system changes and timely service delivery. Data Sharing Barriers: Legal, technical, or cultural challenges may delay the development of effective information-sharing systems. Resistance to Change: Professionals or organisations may be reluctant to adopt new ways of working, slowing progress. Inconsistent Implementation: Variability in practice across services or localities could lead to unequal experiences and outcomes for children and families. Lack of Sustained Monitoring and Accountability: Without robust performance tracking and feedback mechanisms, improvements may not be maintained or scaled effectively.

Ref	Workstream	Lead group	Leads	System change	Desired outcome	Key risk/s
Priority workstream 1	Enabling Inclusion in Education	P1 Steering Group	Hilary Cook (Head of SEND) Erica Douglas Osborn (Principal EP)	Tameside is transforming its SEND system to ensure children and young people receive timely, high-quality support tailored to their individual needs. This change is driven by a commitment to listen to families, improve trust, and deliver better outcomes. By strengthening placement processes, adopting the GM ordinarily available provision, embedding a consistent graduated approach, and enhancing the Local Offer, Tameside aims to create a more inclusive, transparent, and responsive SEND system where families feel informed, involved, and supported every step of the way.	Children and young people with SEND in Tameside will receive the right support at the right time, in high-quality settings that meet their individual needs. Families will feel listened to, informed, and actively involved in shaping services. As a result, outcomes for children will improve, inclusion will increase, and trust in the SEND system will be restored and strengthened.	Lack of Parental Trust and Engagement: If families continue to feel unheard or excluded, efforts to co-produce services may be undermined, limiting the effectiveness of reforms. Inconsistent Implementation Across Settings: Without strong oversight and training, the GM ordinarily available provision and the graduated approach may be applied unevenly, leading to variable support for children and young people. Insufficient Capacity in High- Quality Provision: A shortage of suitable placements could delay support or result in inappropriate settings for children with complex needs. Poor Communication and Visibility of the Local Offer: If the Local Offer remains difficult to access or unclear, families may struggle to find the support they need, increasing frustration and dissatisfaction. Limited Workforce Capacity and Skills: Staff shortages or lack of training could hinder the delivery of timely, high-quality support and the consistent application of SEND processes. Weak Partnership Accountability: Without clear roles, responsibilities, and accountability across the partnership, system-wide improvements may stall or be inconsistently delivered.

Ref	Workstream	Lead group	Leads	System change	Desired outcome	Key risk/s
Priority workstream 2	Pathways to adulthood	P2 Steering Group	Sarah Jamieson (Head of Employment and Skills) Catherine Thompson (Deputy Head of SEND)	In Tameside, children and young people with SEND will experience smooth, well-supported transitions at every stage of their journey—from early years through to adulthood. A strong, collaborative approach across education, health, and care will ensure that planning is joined-up, proactive, and focused on long-term success. By working together strategically, partners will help young people build confidence, develop independence, and achieve meaningful outcomes. Families will feel reassured knowing that support is consistent, aspirations are nurtured, and every transition is a step forward toward a fulfilling future.	Children and young people with SEND in Tameside will experience seamless, well-coordinated transitions throughout their education and into adulthood. Through strong, strategic collaboration across education, health, and care, they will be supported to achieve greater independence, pursue their aspirations, and reach positive long-term outcomes. Families will benefit from more joined-up services, clearer planning, and a consistent focus on preparing for adulthood.	Lack of Strategic Alignment Across Partners: Without a shared vision and coordinated leadership, services may continue to operate in silos, leading to fragmented support for young people with SEND. Inconsistent Transition Planning: Variability in how transitions are planned and managed across settings could result in gaps in support, particularly at key life stages (e.g., moving from school to college or into adult services). Insufficient Workforce Capacity or Training: Staff across education, health, and care may lack the time, resources, or training to effectively support transition planning and preparation for adulthood. Limited Engagement with Young People and Families: If young people and their families are not meaningfully involved in planning, services may fail to reflect their aspirations, needs, and lived experiences. Data Sharing and Communication Barriers: Challenges in sharing information across agencies can hinder timely, coordinated support and reduce the effectiveness of transition planning. Funding Constraints: Financial pressures may limit the ability to invest in new approaches, staff development, or enhanced services needed to support smooth transitions.

Ref	Workstream	Lead group	Leads	System change	Desired outcome	Key risk/s
Priority workstream 3	Workforce	P3 Steering Group	Hilary Cook (Head of SEND) Sarah Jamieson (Head of Employment and Skills)	In Tameside, children and young people with Special Educational Needs are supported by a skilled, connected workforce that works as one. Education, health, and care professionals share information through integrated systems, ensuring decisions are timely, informed, and focused on each child's unique needs. Families are listened to, kept informed, and involved every step of the way. This joined-up approach means smoother transitions, earlier support, and better outcomes—making sure every child has the opportunity to thrive.	Children and young people with SEND in Tameside receive timely, high-quality, and coordinated support through a skilled, collaborative workforce and integrated systems. Families feel informed, involved, and confident in a joined-up approach that ensures early intervention, smooth transitions, and decisions driven by shared data and consistent communication.	Workforce Capacity: Limited availability of trained professionals may hinder timely support. System Integration Challenges: Technical difficulties in aligning digital platforms across services. Data Sharing Barriers: Legal, ethical, or procedural constraints may delay or restrict information flow. Inconsistent Practice: Variability in how professionals apply processes and tools across settings. Change Resistance: Staff or partner organisations may be hesitant to adopt new ways of working. Sustainability: Long-term funding and resource allocation may be uncertain.

Ref	Workstream	Lead group	Leads	System change	Desired outcome	Key risk/s
Priority workstream 4	Local Statutory Framework	P4 Steering Group	Hilary Cook (Head of SEND) Keeley Schofield (SEND Team Manager)	In Tameside, children and young people with special educational needs and disabilities (SEND) are supported by a system that listens, understands, and acts. Through strong multiagency collaboration, social care professionals contribute meaningfully to Education, Health and Care (EHC) plans, ensuring they reflect the full spectrum of each child's needs. Strategic oversight guarantees that SEND provision across all educational settings is consistent, inclusive, and of high quality. Families experience timely support and clear communication, building trust and confidence. As a result, children and young people thrive—empowered to reach their full potential in a community that values every voice and every journey.	Children and young people with SEND in Tameside receive timely, holistic, and high-quality support through coproduced EHC plans and inclusive education settings. Multi-agency collaboration ensures that social care, health, and education professionals contribute meaningfully, while strong strategic oversight drives consistency and accountability. Families feel heard, supported, and empowered, leading to improved trust, better experiences, and brighter futures for all.	Inconsistent Multi-Agency Engagement: Uneven participation from professionals may lead to fragmented or incomplete EHC plans. Capacity and Workforce Challenges: Limited staffing or specialist expertise could delay or reduce the quality of support. Delayed Early Intervention: Without effective systems, early signs of need may be missed, impacting long-term outcomes. Insufficient Strategic Oversight: Weak governance structures may result in inconsistent quality and lack of accountability. Family Trust and Communication Gaps: Poor communication or unclear processes may reduce family confidence and engagement. Data Sharing and Integration Issues: Inadequate systems for sharing information across agencies may hinder holistic planning. Financial Constraints: Budget limitations could restrict the implementation or sustainability of improvements.
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Ref	Workstream	Lead group	Leads	System change	Desired outcome	Key risk/s
Priority Workstream 5	Local Inclusion Partnership	P5 Steering Group	Katie Twigg (Head of ACCESS) Tracy O'Doherty (Senior Education Welfare Officer)	In Tameside, children and young people with SEND are supported by a partnership that leads with compassion and purpose. Through collaborative leadership, a clear and inclusive Alternative Provision (AP) strategy ensures that every child receives the right support tailored to their needs. At the same time, services work together to identify and protect those at risk of exploitation, acting early and effectively. This joined-up approach keeps children safe, engaged in learning, and empowered to thrive. Families are active partners in a system that listens, responds, and delivers.	Children and young people with SEND in Tameside benefit from a unified, proactive partnership that delivers inclusive education and robust safeguarding. A well-led AP strategy ensures access to the right support and learning environments, while coordinated action across services protects those at risk of exploitation. Families feel confident, supported, and assured that their children are safe, valued, and given every opportunity to succeed.	Lack of Shared Vision Across Partners: Without a unified understanding, the AP strategy may become fragmented. Inadequate Identification of Exploitation Risk: Signs of exploitation may be missed due to inconsistent training or awareness. Limited Capacity in Alternative Provision: Insufficient or unsuitable AP placements may fail to meet diverse needs. Poor Information Sharing Between Agencies: Delays or gaps in communication can hinder early intervention and safeguarding. Lack of Family Engagement: Families may feel excluded from planning or decision-making processes. Inconsistent Safeguarding Responses: Variability in practice across services may lead to missed opportunities for protection. Leadership Turnover or Instability: Changes in leadership could disrupt momentum and strategic direction.

Ref	Workstream	Lead group	Leads	System change	Desired outcome	Key risk/s
Priority Workstream 6	Role of the independent sector	P6 Steering Group	Sally Atkinson (Head of Start Well) Catherine Thompson (Deputy Head of SEND)	In Tameside, children and young people with SEND benefit from a well-connected system where local and independent providers work together to deliver high-quality, inclusive support. Strategic partnerships and robust commissioning ensure that services across education, health, and care are sustainable, responsive, and aligned to individual needs. Families feel reassured knowing that wherever support comes from, it meets consistent standards and contributes to better outcomes, smoother transitions, and a stronger sense of belonging.	Children and young people with SEND in Tameside have access to a diverse, high-quality range of provision—local and independent—that is inclusive, well-coordinated, and sustainable. Strategic partnerships and commissioning arrangements ensure consistent standards, improved outcomes, and a more confident, supported experience for families.	Fragmented Service Delivery: Lack of coordination between local and independent providers may lead to inconsistent experiences for children and families. Variable Quality Standards: Without clear expectations, the quality of provision across sectors may be uneven. Weak Commissioning Oversight: Insufficient monitoring may result in services that do not meet needs or deliver value for money. Limited Market Capacity: A shortage of suitable independent providers could restrict choice and responsiveness. Poor Communication with Families: Families may feel confused or uncertain about the role and quality of independent provision. Inflexible Contracts or Arrangements: Rigid commissioning models may limit the ability to adapt to changing needs. Lack of Shared Outcomes Framework: Without common goals, it may be difficult to measure impact or drive improvement across sectors.

Ref	Workstream	Lead group	Leads	System change	Desired outcome	Key risk/s
Priority Workstream 7	Health Provision	P7 Steering Group	Steph Sloan (Deputy Place Based lead) Mina Warden (Pathway Lead for ISCAN)	By reducing unreasonable waiting times, the system will prevent needs from escalating and ensure children and young people with SEND receive timely, appropriate support. This change means families no longer face long delays or uncertainty—instead, they experience a responsive, joined-up system that acts early, supports effectively, and improves outcomes for all.	Children and young people with SEND receive timely, appropriate support, with gaps in services filled and full access to health interventions ensured. Families feel supported and less stressed, navigating a system that is clear, responsive, and joined-up. Services are equipped with systems that support capacity, enabling them to meet demand efficiently and fairly—so no child is left waiting for the help they need to thrive.	Insufficient workforce capacity: Services may not have enough trained staff to meet increased demand, even with improved systems in place. Incomplete or delayed data sharing: Lack of integration between education, health, and care systems could slow down assessments and interventions. Unclear roles and responsibilities: Ambiguity between agencies may lead to duplication, missed steps, or delays in support. Funding constraints: Limited or short-term funding could affect the sustainability and reach of improvements. Digital and system limitations: Existing IT infrastructure may not support the level of coordination or tracking required. Inequitable access: Some groups, such as home-educated children or those from disadvantaged backgrounds, may still face barriers to timely support. Resistance to change: Cultural or operational resistance within services could slow implementation or reduce effectiveness. Unrealistic expectations: Families and professionals may expect immediate results, leading to frustration if change takes time.

SEND Wider Improvement Plan

P1 Enabling Inclusion in Education

What does good look like for Tameside Children and Young People:

Children and young people with SEND in Tameside will receive timely, high-quality support in settings that meet their needs. A consistent graduated approach will ensure early help, families will be informed through an improved Local Offer, and their voices will shape services. This will lead to better outcomes, greater inclusion, and stronger trust in the SEND system.

What difference will this make for Tameside Children and Young People. and their families:

tailored support in high-quality settings that meet their needs. Families will feel heard, informed, and involved in shaping services. With clearer information and more consistent support across settings, outcomes will improve and trust in the SEND system will grow.



Ref	Target	Activity to achieve the target	Owner	Timescale for completion	Outcomes for success (how we know it's achieved)	Impact (the difference this will make/has made)	Evidence of how impact is measured (how we show this, including baseline)	RAG	SLAIB SIGN OFF DATE and RAG
1.1	Review of outreach and specialist services to create an offer of Holistic universal outreach support	Review and evaluation of all outreach services including HI/VI service delivery. Engagement around how this supports inclusion in schools and supports a graduated response. MOU for service delivery co-produced using support from the SLIP partner to ensure support for the implementation of the graduated response is fully embedded.	JCH (Teacher in charge of TSOSS)	Dec-25	A comprehensive mapping of current outreach and specialist services is completed, identifying strengths, gaps, and duplication. Stakeholder engagement informs the design of a new, coordinated outreach offer that meets the needs of schools and settings. A clear, accessible, universal outreach offer is developed and communicated to all stakeholders. Pathways for accessing outreach and specialist support are streamlined and transparent. Evidence of improved early intervention and preventative support is gathered through feedback and data.	Result in a coordinated, streamlined offer of universal holistic support. Schools and settings will have clearer access to the right support at the right time, leading to earlier intervention, improved inclusion, and better outcomes for children and young people with SEND.	85% of schools/settings engaged with the universal outreach offer within the first year. Baseline: Not available 300+ children and young people supported via outreach interventions annually. Baseline: Not available Increase in pupils supported at SEN Support at SEN Support stage by 20%, reducing pressure on EHCP applications. Baseline: Not available 90% of referrals actioned within a 4-week target		12/11/2025
		Staffing structure and succession planning for the service will be implemented to meet this MOU.	СТН	Sep 26	Roles, responsibilities, and funding arrangements across services are clarified and agreed to support long-term sustainability.	ements across services are d and agreed to support	timeframe. Baseline: Not available		12/11/2025



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1.2	a universal system of support system across the Local Area to ensure consistent, tiered support for children and young people with sensory difficulties, aligning services from early identification to specialist intervention, and ensuring	Joint planning between education, health, and social care includes sensory provision. Sensory support is embedded within whole-school/setting policies. Leaders understand the impact of sensory needs on learning and participation. Specialists (e.g., OT, VI/HI teachers) are involved in capacity building, not just direct delivery. Reflective practice and supervision models include sensory strategies. Early identification processes include sensory screening tools or checklists are developed.	HCO (Head of SEND)/ Sensory project staff/ PCF's HCO (Head of SEND)/ Sensory project staff/ PCF's	Apr 26	Education, health, and social care jointly plan for sensory provision. Whole-school policies reflect an understanding of sensory needs and their impact on learning. Leaders prioritise inclusive practice, supported by specialists who build staff capacity. Reflective practice and supervision include sensory strategies to ensure consistent, informed support. Early identification processes incorporate well-developed sensory screening tools or checklists that are systematically implemented, ensuring timely recognition of sensory needs in children.	Children and young people with sensory difficulties will receive timely, appropriate, and coordinated support through a clearly organised universal system of support. This will lead to improved outcomes in communication, independence, and social participation, with stronger collaboration between families, schools, and professionals in meeting their needs.	Reduction in wait times for sensory interventions, with 90% of children receiving support within agreed timeframes from referral. Baseline: Not available Improved access to services, with 95% of children and young people with identified needs receiving the correct level of support at each stage of the graduated response. Baseline: Not available Increase in the		12/11/2025
	seamless access to appropriate resources and support.	All staff receive training on identifying and responding to sensory processing differences. Sensory needs are consistently identified in EHCPs, IEPs, or support plans. Families and young people are involved in the identification process.	HCO (Head of SEND)/ Sensory project staff/ PCF's	Apr 26	All staff are trained to identify and respond appropriately to sensory processing differences. Sensory needs are clearly and consistently documented in EHCPs, IEPs, or support plans. Families and young people are actively involved in the identification and planning process, with particular attention given to supporting parental understanding of sensory processing and its impact on learning and behaviour.		number of successful referrals to appropriate services, with 85% of children referred being successfully linked to the correct interventions and resources. Baseline: Not available Satisfaction with service delivery, with 85% of families reporting that services are delivered in a timely, accessible, and transparent manner. Baseline: Not available		12/11/2025



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		Clear pathways for assessment and referral to specialist services. Intervention is implemented at: Universal, targeted, specialist level with resource focused on early intervention	MW		Clear and accessible pathways are in place for the assessment of and referral to specialist communication services. Intervention is delivered across universal, targeted, and specialist levels, with a strong emphasis on early identification and timely support.				12/11/2025
					Resources are strategically allocated to ensure early intervention is prioritised, reducing the need for more intensive support later on				



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a sy si ac Li to co ci tic fo ci di al	Co-develop a universal system of support system across the Local Area to ensure consistent, tiered support for children and young people with communication difficulties, aligning services from early identification to specialist intervention, and ensuring seamless access to	Joint planning between education, health, and social care includes sensory provision. Communication-friendly practice and oracy is embedded within whole-school/setting policies. Leaders understand the impact of communication needs on learning and participation. Specialists (e.g., SALT/EP/TSOSS) are involved in capacity building, not just direct delivery. Reflective practice and supervision models include communication-friendly classroom strategies.	MW/HS	September 2027	Education, health, and social care jointly plan for communication support. Whole-school policies reflect an understanding of communication difficulties and their impact on learning. Leaders prioritise inclusive practice, supported by specialists who build staff capacity. Reflective practice and supervision include communication strategies to ensure consistent, informed support.	Children and young people with communication difficulties will receive timely, appropriate, and coordinated support through a organised universal system. This will lead to improved outcomes in communication, independence, and social participation, with stronger collaboration between families, schools, and professionals in meeting	Reduction in wait times for SALT interventions, with 90% of children receiving support within agreed timeframes from referral. Baseline: Not available Improved access to services, with 95% of children and young people with identified needs receiving the correct level of support at each stage of the graduated response.		12/11/2025
		Early identification processes including checklists are developed.	ation processes including MW/HS Early identification processes include their needs.	their needs. Baseline: Not Increase in the number of suc referrals to app services, with 8	Baseline: Not available Increase in the number of successful referrals to appropriate services, with 85% of children referred being		12/11/2025		
	appropriate resources and support.	All staff receive training on identifying and responding to communication differences. Communication needs are consistently identified in EHCPs, IEPs, or support plans, with clear universal strategies outlined. Families and young people are involved in the identification process.	MW/HS		All staff are trained to identify and respond appropriately to communication differences. Communication needs are clearly and consistently documented in EHCPs, IEPs, or support plans. Families and young people are actively involved in the identification and planning process, with particular emphasis on supporting parental understanding of communication development and how it affects learning, social interaction, and emotional wellbeing.		successfully linked to the correct interventions and resources. Baseline: Not available Satisfaction with service delivery, with 85% of families reporting that services are delivered in a timely, accessible, and transparent manner. Baseline: Not available		12/11/2025



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		Clear pathways for assessment and referral to specialist services. Intervention is implemented at: Universal, targeted, specialist level with resource focused on early intervention	MW/HS	April 2026	Clear and accessible pathways are in place for the assessment of and referral to specialist communication services. Intervention is delivered across universal, targeted, and specialist levels, with a strong emphasis on early identification and timely support.				12/11/2025
					Resources are strategically allocated to ensure early intervention is prioritised, reducing the need for more intensive support later on				



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1.4	Strengthen co-production with parents, carers, and young people by embedding their voices in strategic planning, service design, and review processes.	Strengthen co-production with parents, carers, and young people by embedding their voices in strategic planning, service design, and review processes. Deliver a programme of co-production workshops across the year to involve parents, carers, and young people in shaping services, policies, and decision-making. Develop and implement a local co-production strategy that sets out clear principles, expectations, and standards for how services will work in partnership with families and young people.	HCO	Sept 2026	We are committed to embedding the voices of parents, carers, and young people at the heart of our services. Through a structured programme of co-production workshops delivered throughout the year, we ensure that families are actively involved in shaping policies, services, and decision-making. This work is underpinned by a co-produced local strategy that clearly defines the principles, expectations, and standards for how services will work in genuine partnership with families and young people, ensuring their contributions are valued, visible, and impactful.	By embedding family and young people's voices in planning and decision-making, we will create more inclusive, transparent, and responsive SEND services. Co-production, clear communication, and regular feedback will build trust, improve support, and ensure services reflect real needs and drive meaningful change.	% of co-production events with family and CYP participation Baseline: Not available Number of service or policy changes directly linked to co-production input Baseline: Not available Number of "You said, we did" actions completed Baseline: Not available Increased Net Promoter Score (NPS) for co-production activities		21/10/2025
		Establish and promote co-produced projects, ensuring families are engaged from the earliest stages of planning through to evaluation.	HCO	Sept 2026	Families are engaged from the very beginning of project planning through to evaluation, ensuring that services are built with—not just for—them.		Baseline: Not available		21/10/2025



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1.5	Improve communication and transparency across all SEND services, ensuring families understand what support is available, how to access it, and what they can expect.	Develop and publish a Communications Strategy for 'SEND is everyone's business', ensuring inclusive, transparent, and accessible messaging that reflects CYP and family voice.	KJO	April 2026	We develop and share a communications strategy for 'SEND is everyone's business' that ensures all messaging is inclusive, transparent, and reflects the voices of children, young people, and families. The Communications Strategy for SEND is implemented and understood by professionals across education, health, and care. A reduction is seen in complaints related to lack of information or poor communication from SEND services.	Improved communication will help families feel informed and supported, leading to stronger trust, fewer complaints, and quicker access to the right support—improving outcomes for children and young people with SEND.	At least 60% of families report receiving clear and timely information about SEND services in the area satisfaction survey by July 2025, increasing to 70% by July 2026. Baseline: Not available Quarterly newsletters reach a minimum of 2,000 families, with an email open rate of at least 40% and a click-through rate of 15% or more. Baseline: Not available Event attendance at family information sessions or engagement events increases to at least 100 attendees per term by early 2026.		21/10/2025
		Build strong and systematic mechanisms to capture feedback from parents and carers at key stages of the EHCP process, including request, draft, and annual review. Launch a Children and Young People's Survey to gather their experiences of SEND support, planning, and provision.	KJO/ transformation team	Sept 2026	We capture feedback from parents and carers at key EHCP stages and gather children and young people's views through a dedicated survey to inform improvements in SEND support and planning.	-	Baseline: Not available Communication-related complaints reduce by 15% year-on-year, tracked through the complaints system from a 2024 baseline. Baseline: Not available Case study examples of improved family experience as a result of clearer communication. Baseline: Not available		21/10/2025



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		Ensure feedback gathered through surveys and workshops is analysed and feeds directly into service reviews and commissioning priorities. Create feedback loops so that families and young people are regularly informed about how their input has influenced change.	KJO/ transformation team	Sept 2026	Feedback from families and young people is analysed and used to shape services, with clear feedback loops in place to show how their input drives change. Feedback gathered through surveys and engagement is acted upon and followed up with clear "you said, we did" responses.				21/10/2025
		Ensure wider communication is clear and accessible for families, giving useful information to support families with SEND CYP. Launch a Children and Young People's Survey to gather their experiences of SEND support, planning, and provision.	KJO	Sept 2026	Regular and accessible updates are shared with families through multiple channels, including newsletters, websites, and social media.				21/10/2025



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1.6	Deliver a clear, consistent Local Offer that is well-publicised, regularly updated, and co-designed with families to reflect needs and lived experiences.	Develop local offer content with stakeholders to ensure the local offer is user friendly and a 'one stop shop' for all information around SEND. Review and update the Local Offer to ensure it accurately reflects available services, eligibility criteria, referral processes, and key contacts. Simplify and improve the layout of the Local Offer website to enhance accessibility, including mobile compatibility and translation options. Ensure all service information is written in clear, jargon-free language and is regularly reviewed for accuracy and clarity.	КЈО	Sept 2026	Families know how to access information about SEND services and support, including the Local Offer and EHCP processes. Professionals are confident in explaining SEND processes to families and routinely signpost to the Local Offer and support services.	Families will have easier access to clear, up-to-date SEND information through a more user-friendly and accessible Local Offer. Increased promotion and professional training will raise awareness and improve signposting. Regular reviews, feedback tools, and data monitoring will ensure the Local Offer stays accurate, relevant, and responsive to local needs.	80% of frontline professionals across education, health, and care receive training on the SEND Communications Strategy and Local Offer signposting by December 2025. "You said, we did" logs demonstrating how family feedback led to service changes Baseline: Not available Number of website visits per month (with breakdown by device type and location) Baseline: Not available		21/10/2025
		Promote the local offer via the following routes: Develop a promotional campaign to raise awareness of the Local Offer, using schools, early years settings, health providers, and community venues to reach a wide audience. Create printed and digital materials that explain what the Local Offer is, who it is for, and how families can use it to find support. Provide training and briefing sessions for professionals across education, health, and social care on how to navigate and signpost to the Local Offer.	KJO	Sept 2026	We will deliver a targeted promotional campaign through schools, early years settings, health providers, and community venues to increase awareness of the Local Offer. Accessible printed and digital materials will be developed to clearly explain what the Local Offer is, who it is for, and how to use it. Training and briefing sessions will be provided to professionals across education, health, and social care to ensure they can confidently navigate and signpost families to the Local Offer.		Readability scores (e.g. Flesch-Kincaid) for key pages Baseline: Not available Frequency of content updates (e.g. % of pages reviewed/updated quarterly) Baseline: Not available		12/11/2025

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		Regular improvement cycle for local offer: Set up a regular review cycle to check and update Local Offer content, involving service leads and communications teams to ensure accuracy. Introduce user feedback tools on the Local Offer website to gather views on its content, usability, and accessibility. Use website analytics and survey data to monitor how families are using the Local Offer and identify areas for improvement. Share regular updates and improvements to the Local Offer with families through newsletters, websites, and local forums to demonstrate transparency and responsiveness.	KJO		We will establish a regular review cycle for the Local Offer, working with service leads and communications teams to ensure content remains accurate and up to date. User feedback tools will be embedded into the website to gather views on usability and accessibility. Website analytics and survey data will be used to monitor usage and identify areas for improvement. Updates and changes will be shared regularly with families through newsletters, websites, and local forums to promote transparency and responsiveness.				12/11/2025



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1.7	Improve Identification and Assessment of Needs	Embed universal screening tools in early years and schools to identify emerging needs. Use data tracking to highlight early indicators and inform targeted support. Provide regular staff training on early signs of SEND and clear referral pathways.	JCH TSOSS EPS service ISCAN services	September 2026	We ensure that all early years settings and schools consistently use universal screening tools to identify emerging needs at the earliest possible stage. These tools are embedded into everyday practice, enabling staff to recognise developmental concerns early and respond with appropriate support. We use robust data tracking systems to monitor pupil progress and behaviour, allowing us to identify early indicators of SEND. This includes making more effective use of Section 23 data to target support where it is most needed. Our data-informed approach ensures that interventions are timely, targeted, and tailored to individual needs, improving outcomes for all learners. We provide regular, high-quality training for all staff to help them recognise the early signs of SEND and understand how to access clear, effective referral pathways. This empowers staff to act confidently and swiftly, ensuring every child's needs are identified and supported.	We embed universal screening tools in early years settings and schools to identify emerging needs quickly, enabling timely support and better outcomes for children. By using robust data tracking systems, including Section 23 data, we can spot early signs of SEND and target interventions effectively. Regular staff training ensures early identification is consistent, and clear referral pathways mean children receive the right support at the right time—creating a more inclusive and responsive education system.	% of children screened using universal tools within the first term of entry. Baseline: Not available Use of Section 23 data: number of cases where Section 23 data informed support decisions. Baseline: Not available Reduction in escalation to EHCP (Education, Health and Care Plan) requests due to earlier support. Baseline: Not available		12/11/2025



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		Standardise assess-plando-review processes with templates and guidance. Improve access to specialist input through triage systems and professional drop-ins. Strengthen the quality of EHCP applications with exemplar packs and SENCO training.	JCH TSOSS EPS service ISCAN services	April 2026	Assess-Plan-Do-Review Processes Are Standardised Consistent use of templates and guidance across settings to support effective SEND practice. Access to Specialist Input Is Improved Triage systems and professional drop-in sessions are established and actively used to support timely intervention. Quality of EHCP Applications Is Strengthened SENCOs are supported through exemplar application packs and targeted training, leading to more robust and successful submissions.				21/10/2025



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1.8	Increase Availability of Suitable Provision	Conduct a strategic review of existing special school provision, mapping current specialisms (e.g. ASD, PMLD, SEMH) against pupil need data and projected demand. Identify gaps in provision (e.g. complex SEMH at KS3, dual diagnosis, girls with ASD) and areas of over/under-capacity across phases and localities. Develop a future-proofed commissioning plan that balances special schools, resource bases, and inclusive mainstream pathways. Establish a phased programme for opening resource bases in mainstream settings, with clear links across key stages (EY to post-16). Align new bases with identified gaps, ensuring specialist support for underrepresented need types or underserved local areas. Design each base with clear entry/exit criteria, curriculum adaptation models, and reintegration or onward progression routes. Secure capital investment and long-term funding models to ensure sustainability of all new provision. Implement robust monitoring of all provision, including placement success, outcomes, progression, and parental satisfaction.	HCO/KTW	September 2026	A clear and current sufficiency strategy is in place and regularly updated using accurate data and forecasting. Provision across education, health, and care reflects the diverse needs of children and young people with SEND in the local area. There is a reduction in out-of-area and independent placements due to improved local offer. Timely access to appropriate placements is ensured, reducing delays in provision.	Improved planning and provision will ensure more children access suitable education locally, with reduced reliance on out-of-area placements. Addressing gaps and expanding resource bases will improve progression from early years to post-16. Targeted actions will reduce EHE, EOTAS and NEET, supporting early intervention and sustained engagement. More young people will remain in education, achieve better outcomes, and transition successfully into adulthood.	15% reduction in out-of-area placements over the next 12 months. Baseline: Not available 10 new resource bases established in mainstream schools over the next 2 years, with linked primary-to-secondary pathways. Baseline: Not available 95% of EHCPs naming a local suitable provision (mainstream, base, or special school) by end of next academic year. Baseline: Not available 20% reduction in EHE cases where SEND was cited as a contributing factor, within 18 months. Baseline: Not available 10% of EOTAS packages reviewed termly, with transition planning in place for all pupils. Baseline: Not available 10% reduction in NEET among young people with SEND aged 16–18 within 2 years. Baseline: Not available 85% parental satisfaction rate with new provision, based on annual survey. Baseline: Not available		12/11/2025

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		Strengthen post-16 strategic planning, aligning provision with EET (education, employment, training) outcomes and needs identified in EHCPs. Collaborate with FE colleges, supported internship providers and employers to diversify and expand suitable pathways.	HCO Post 16 Heads group	September 2026	A clear and current sufficiency strategy is in place and regularly updated using accurate data and forecasting. (Post 16, Y14) Provision across education, health, and care reflects the diverse needs of children and young people with SEND in the local area. (Post 16, Y14) There is a reduction in out-of-area and independent placements due to improved local offer. (Post 16, Y14) Timely access to appropriate placements is ensured, reducing delays in provision. (Post 16, Y14)				12/10/2025
		Publish a local Special School and Inclusion Provision Map, including specialisms, criteria, and transition pathways from early years to post-16.	HCO Special Heads Group	April 2026	The Local Special School and Inclusion Provision Map is published and accessible online, clearly detailing each setting's specialisms, admission criteria, and defined transition pathways from early years through to post-16, with input from stakeholders and updated annually.				12/11/2025



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		Develop targeted actions to minimise EHE, EOTAS and NEET, including early identification of at-risk pupils, reintegration pathways, and tailored post-16 provision.	KTW TOD	September 2026	Commissioned provision is responsive, high quality, and includes specialist and flexible options (e.g. resource bases, AP, therapeutic support). Stakeholder feedback (from families, CYP, and professionals) shows improved satisfaction with available provision. Provision development is aligned with needs identified in EHCP data, trends, and demand forecasts.				12/11/2025



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1.9	Strengthen Placement Decision-Making Processes	Create and share a consistent framework for making placement decisions, informed by data and statutory guidance. Ensure TOR are clear to all, support from SLIP partner to be utilised. Review and analyse relevant academic, behavioural, and wellbeing data to support informed and transparent decisions. Involve multidisciplinary teams, families, and pupils in the decision-making process to ensure well-rounded input.	KS	April 2026	Placement decisions are made using a consistent, transparent framework across all cases. Relevant data (academic, behavioural, wellbeing) is routinely collected and effectively used to inform decisions. Parents, carers, and pupils report feeling included and heard in the placement process. Multidisciplinary professionals regularly contribute to and support placement decisions. Staff involved in placement processes report increased confidence and clarity in decision-making.	Placement decisions are timely, evidence-based, and consistently lead to settings that meet pupils' individual needs, resulting in improved educational experiences and long-term outcomes.	95% of placement decisions made within 20 working days of referral. Baseline: Not available 100% of staff involved in placement decisions receive annual training on the updated framework. Baseline: Not available Reduction in placement breakdowns by 20% year-on-year. Baseline: Not available Case studies demonstrate how multi-agency collaboration led to successful placement. Baseline: Not available Staff report increased confidence and clarity when making or		21/10/2025
		Regularly dip sample/review placement outcomes and refine processes based on findings and feedback. Multi-agency audits implemented will inform this.	KS	April 2026	Audits show an improvement in the appropriateness and stability of placements over time.		contributing to placement decisions. Baseline: Not available Parents/carers share positive experiences of being involved and listened to in the process. Baseline: Not available		21/10/2025



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1.10	Embed a consistent, area- wide graduated approach through clear guidance, training, and quality assurance, ensuring all settings provide timely, high- quality support with shared expectations and meaningful family involvement.	Develop and publish a clear, area-wide Graduated Approach Framework co-produced with schools, settings, and partners. Including the GM adopted ordinarily available provision. Provide consistent training and guidance to all settings on applying the graduated approach, including assessplan—do—review cycles. Embed local exemplars and case studies that show what good practice looks like at each stage of the graduated response. Ensure multi-agency alignment so that education, health, and care professionals use shared language and expectations.	EDO	Graduated approach resource draft Autumn term 2025 / Formal launch and feedback January 25 alongside the GM ordinarily available provision/ implementation workshops of both spring/summer 2026 Work embedded Sept 2026	GAR to be part of EHC referral processes; Requests for EHCP to be reduced; SENCOs/school/setting staff to voice that they feel more supported by LA SEND processes	Improved SEND practices across Tameside settings/ schools; Requests for EHCP to be reduced; SENCOs/ school/setting staff to voice that they feel more supported by LA SEND process; Parents/carers to voice that they feel their child has access to greater support in setting/school	Numbers of EHCP requests; SEND surveys to school staff to gather their views; SEND survey to families to voice that there is more support available at SEND Support Baseline: Not available		21/10/2025



Ref	Target	Activity to achieve the target	Owner	Timescale for completion	Outcomes for success (how we know it's achieved)	Impact (the difference this will make/has made)	Evidence of how impact is measured (how we show this, including baseline)	RAG	SLAIB SIGN OFF DATE and RAG
		Establish SEND support audits or self-evaluation tools to help settings benchmark and improve their graduated approach delivery. Monitor and quality assure how the graduated approach is applied across settings, providing targeted support where gaps are identified. Promote peer moderation and collaboration between settings to share effective inclusive practices and support consistency. Involve parents and carers in understanding and contributing to the graduated approach from early support through to EHCP if needed.	EDO	July'26 - via Workshops rolled out Dec'25-July'26 to support staff; SENCO networks; head teachers' briefings Complete by Dec 2026	A shared graduated approach framework is published, understood, and used across all settings. Staff across education, health, and care demonstrate consistent understanding and application of the assess–plan–doreview cycle. Training on the graduated approach and the GM ordinarily available provision is widely accessed and positively evaluated by practitioners. Settings report increased confidence in identifying and meeting needs without delay or over-reliance on EHCPs. Variability in provision reduces, with improved consistency in SEND support across the local area. Quality assurance activities show evidence of effective graduated responses in practice. Families report clearer understanding of the support available and feel more involved in the process.	There will be greater consistency in SEND provision across the local area, with reduced reliance on EHCPs, improved learner progress and wellbeing, and increased confidence among families and practitioners in the support system.	95% of schools and settings will have received and implemented the area-wide graduated approach framework within 12 months. Baseline: Not available 90% of key staff, SENCO's will complete graduated approach and the GM ordinarily available provision training within the first year. Baseline: Not available 80% of settings will demonstrate consistent use of the assessplan-do-review cycle through quality assurance visits by the end of the academic year. Baseline: Not available Termly moderation sessions will be established to support peer learning and reduce inconsistency across settings. Baseline: Not available		21/10/2025

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On track: The action has started, is on track for completion, and there are no issues raised requiring escalation.

Vulnerable: Action looks unlikely to be achieved, or timescales met, as planned and this may have implications on improvements, so requires escalation.

At risk: There is a risk that this action will not be completed, and escalation is required and a plan to mitigate risks must be implemented.

Complete: Action fully completed and intended impact/outcome is evident.



P2 Support for Young Adulthood

Leaders across the partnership should work collaboratively to ensure that young people with SEND benefit from a well-thought-out, strategic and coordinated approach to prepare them for adulthood and when transitioning between phases of education.

What does good look like for Tameside Children and Young People:

Children and young people with SEND in Tameside will experience smooth, well-supported transitions at every stage of their journey—from early years through to adulthood. A clear, strategic approach across education, health, and care will ensure they are prepared for the future with a focus on independence, aspiration, and meaningful outcomes. Strong partnership working will mean services are joined-up, proactive, and responsive, giving young people the confidence and support they need to thrive.

What difference will this make for Tameside Children and Young People, and their families:

Children and young people with SEND in Tameside will move through education and into adulthood with greater confidence and support.

Transitions will be smoother, services more joined-up, and planning more focused on independence and long-term success.



Ref	Target	Activity to achieve the target	Owner	Timescale for completion	Outcomes for success (how we know it's achieved)	Impact (the difference this will make/has made)	Evidence of how impact is measured (how we show this, including baseline)	RAG	SLAIB SIGN OFF DATE and RAG
2.1	Develop and implement a coordinated, multi-agency transition strategy across all phases of education, ensuring early planning, consistent pathways, and personalised support are in place to improve outcomes and experiences for children and young people with SEND at every key transition point.	Map existing transition processes across early years, primary, secondary, post-16, and into adulthood to identify gaps and inconsistencies. Co-produce a local transition protocol with schools, colleges, early years settings, parents/carers, and young people to set out clear, consistent expectations at each phase. Introduce transition planning timelines that begin early (e.g. Reception for primary, Year 5 for secondary, Year 9 for adulthood), with clear roles and responsibilities. Strengthen multi-agency involvement (e.g. health visitors, SENDIASS, social care, post-16 providers) in transition planning from early stages. Establish a cross-agency task force to coordinate transition planning and ensure collaboration between education, health, social care, and employment services. Hold joint planning meetings between agencies to ensure aligned, consistent transition plans.	SJA/CTH	April 2026	Transition planning is consistently included in EHCP annual reviews, starting from early years and aligned with Preparation for Adulthood outcomes. Children, young people, and families feel informed, involved, and supported during key transition points. A clear, co-produced transition protocol is in place and used across all settings and phases.	Children and young people with SEND will experience smoother transitions, with better support at each stage. This will lead to improved outcomes in education, independence, and community involvement, while families will feel more informed and supported.	80% of EHCP annual reviews will include transition planning linked to Preparation for Adulthood outcomes from early years through to post-16. Baseline: Not available 70% of children and young people will report feeling prepared and supported during key transitions, as measured by annual surveys. Baseline: Not available 90% of settings will adopt and implement the co-produced transition protocol by the end of the first academic year. Baseline: Not available 60% of families will feel more involved in transition planning, based on feedback from annual surveys or focus groups. Baseline: Not available Case studies documenting successful transitions, particularly		12/11/2025
		Use and promote person-centred transition tools (e.g. one-page profiles, learner passports, visual supports) from early years through to post-16. Involve children, young people, and families in co-planning and reviewing transition arrangements to ensure they feel prepared and supported. Monitor and evaluate the quality and impact			Evidence of Consistent Use of Person-Centred Tools Across All Phases Positive Feedback and Improved Outcomes from Children, Families, and Settings		where early years involvement or PFA planning made a difference. Including parent and family testimonials sharing positive experiences of the transition process, particularly around communication, support, and involvement. Baseline: Not available		12/11/2025
		of transitions through pupil/family feedback, destination tracking, and review data.							P

Ref	Target	Activity to achieve the target	Owner	Timescale for completion	Outcomes for success (how we know it's achieved)	Impact (the difference this will make/has made)	Evidence of how impact is measured (how we show this, including baseline)	RAG	SLAIB SIGN OFF DATE and RAG
2.2	Develop and implement a cross-agency strategy for preparing children and young people with SEND for adulthood, ensuring clear pathways for education, employment, health, independent living, and community participation are integrated from early years through to post-19.	Map existing services across education, health, social care, and employability sectors for young people with SEND and identify gaps. Co-develop and embed a shared framework for Preparing for Adulthood (PFA) outcomes in EHCPs from early years to post-19. Integrate PFA outcomes into early years education, ensuring early skills development in independence, employability, and community participation. Provide life skills and employability training across all ages and stages, with links to local businesses for work experience opportunities. Partner with housing providers and independent living services to prepare young people for independent living post-school. Promote community participation through social activities, voluntary work, and opportunities to engage with local groups. Gather feedback from young people, families, and professionals to evaluate the strategy and adjust based on needs.	SJA	Sept 2026	A clear map of existing services across education, health, social care, and employability is available. Gaps in provision are documented with plans to address them. Integrate PFA outcomes into early years education, focusing on independence, employability, and community participation. Hold joint planning meetings between agencies to align transition plans for each young person. Age-appropriate training is embedded in the curriculum from early years to post-16 and beyond. Partnerships with local businesses are in place and regularly reviewed. A range of meaningful work experience opportunities are offered and accessed by learners. Formal links with housing providers and independent living services are established. Young people regularly participate in community activities, voluntary work, or local group events. Regular feedback is collected from young people, families, and professionals. Regular feedback is collected from young people, families, and	Young people with SEND will experience a more coordinated and effective transition into adulthood, with clear pathways for education, employment, health, independent living, and community participation. This will lead to improved outcomes, greater independence, and better integration into society, while ensuring families and professionals are supported throughout the process.	Develop and embed a shared framework for PFA outcomes in EHCPs Baseline: Not available Implement joint planning meetings between all agencies at least quarterly. Baseline: Not available Establish partnerships with housing providers and independent living services, ensuring 100% of young people nearing adulthood have guidance on living arrangements. Baseline: Not available Ensure 80% of young people with SEND engage in at least one community activity, social program, or volunteer opportunity annually. Baseline: Not available Conduct annual surveys to collect feedback from young people, families, and professionals, ensuring at least 75% satisfaction with the transition process. Baseline: Not available		12/11/2025
	l				professionals.				



Ref	Target	Activity to achieve the target	Owner	Timescale for completion	Outcomes for success (how we know it's achieved)	Impact (the difference this will make/has made)	Evidence of how impact is measured (how we show this, including baseline)	RAG	SLAIB SIGN OFF DATE and RAG
2.3	Define roles, responsibilities, and measurable outcomes across agencies to ensure effective coordination, monitoring, and accountability in delivering support for young people's transition into adulthood.	Identify all relevant agencies involved in the transition process (e.g., education, health, social care, employment services) and assign clear roles for each agency in the transition planning and support process. Create a shared framework for roles and responsibilities, clearly outlining each agency's contribution to PFA outcomes, including measurable goals and timelines for each role, ensuring alignment with key transition stages (e.g., 14, 16, 18).	SJA	Sept 2026	All relevant agencies are identified and assigned specific roles in the transition process. A shared framework outlines each agency's responsibilities, with measurable goals and timelines aligned to key transition stages (e.g., 14, 16, 18). Agencies actively contribute to transition planning and support, as evidenced by joint meetings, shared documentation, and coordinated actions. Progress toward Preparing for Adulthood (PFA) outcomes is regularly reviewed and adjusted collaboratively.	Transitions for young people with SEND will be more coordinated and effective, leading to smoother pathways into adulthood and improved outcomes in education, employment, and independent living.	90% of agencies will have clearly defined roles and responsibilities documented and understood by all stakeholders within the first 6 months. Baseline: Not available 80% of transition case officers in SEND will report regular, effective communication and coordination between agencies within 3 months. Baseline: Not available 85% of transition EHCP's will be tracked using a progress monitoring system, with updates provided at least quarterly.		12/11/2025
		Establish communication protocols for sharing information and updates between agencies, ensuring transparency and consistency, and set up regular multi-agency meetings to review progress, discuss challenges, and adjust plans as needed. Designate a transition coordinator in each agency to oversee and ensure the implementation of the transition strategy, with coordinators meeting regularly to discuss individual cases, share insights, and ensure alignment.	SJA	Sept 2026	A shared tracking system is used by all agencies to monitor each young person's progress against their transition plan. Regular reviews (e.g., annually or at key transition stages) are conducted to update goals and ensure coordinated support. Communication protocols are in place and followed, with regular multi-agency meetings held to review progress and address challenges.		Baseline: Not available 75% of young people and families will report satisfaction with the transition process, based on feedback surveys. Baseline: Not available 90% of relevant staff will complete joint training sessions on transition planning and PFA outcomes within the first year. Baseline: Not available		12/11/2025



Ref	Target	Activity to achieve the target	Owner	Timescale for completion	Outcomes for success (how we know it's achieved)	Impact (the difference this will make/ has made)	Evidence of how impact is measured (how we show this, including baseline)	RAG	SLAIB SIGN OFF DATE and RAG
		Develop a tracking system to monitor the progress of each young person against their transition plan, ensuring all agencies input and update relevant information, with regular reviews (e.g., annually or at key stages) to track progress and update goals. Set clear, measurable outcomes for each stage of the transition, aligned with the PFA outcomes (education, employment, health, independent living, and community participation), ensuring these outcomes are specific, quantifiable, and tracked through agreed-upon data points. Hold regular reviews to assess whether roles and responsibilities are being met across agencies and develop a system for reporting progress and challenges, with clearly assigned accountability for each agency's involvement. Offer joint training opportunities to ensure all agencies are familiar with each other's roles, the transition process, and best practices for supporting PFA outcomes, with ongoing professional development to ensure staff are equipped to meet the needs of young people with SEND.			Each agency has a designated transition coordinator who meets regularly with others to align efforts and share updates on individual cases. Measurable PFA-aligned outcomes (education, employment, health, independent living, community participation) are set for each transition stage and tracked using agreed data points. Roles and responsibilities are regularly reviewed, with a reporting system in place and clear accountability assigned to each agency. Joint training sessions are delivered to ensure all agencies understand each other's roles and the transition process. Ongoing professional development is provided to equip staff with best practices for supporting young people with SEND.		Case studies documenting successful transitions where clear agency roles and responsibilities led to smooth, effective outcomes for young people. Including testimonials from families and young people sharing positive experiences about the clarity and effectiveness of the transition process. Baseline: Not available		

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Vulnerable: Action looks unlikely to be achieved, or timescales met, as planned and this may have implications on improvements, so requires escalation.

At risk: There is a risk that this action will not be completed, and escalation is required and a plan to mitigate risks must be implemented.

Complete: Action fully completed and intended impact/outcome is evident.



P3 Workforce

Develop a skilled, collaborative workforce supported by integrated systems to deliver responsive, high-quality SEN services—ensuring consistent communication, data-driven decision-making, and coordinated support across all partners.

What does good look like for Tameside Children and Young People:

In Tameside, a skilled and collaborative workforce, supported by integrated digital systems, ensures that children and young people with Special Educational Needs receive timely, high-quality support. Professionals across education, health, and care work together seamlessly, using shared data and consistent communication to make informed decisions. This joined-up approach enables early intervention, smooth transitions, and tailored support that puts the needs and voices of children and families at the heart of every action.

What difference will this make for Tameside Children and Young People, and their families:

By strengthening our workforce and systems, children and young people with SEND in Tameside will benefit from clear, consistent communication and joined-up support. Families will feel heard, informed, and involved at every step. Professionals will share information effectively, reducing delays and confusion, and ensuring that support is timely, coordinated, and centred around each child's needs.



Ref	Target	Activity to achieve the target	Owner	Timescale for completion	Outcomes for success (how we know it's achieved)	Impact (the difference this will make/has made)	Evidence of how impact is measured (how we show this, including baseline)	RAG	SLAIB SIGN OFF DATE and RAG
3.1	Implement a new SEND case management system	Different case management systems are evaluated and considered to support service delivery and implementation considerations, a system to support productivity and more transparent information sharing to be considered	нсо	September 2025	A documented and approved scope statement that outlines what the system will and won't do, including key features, data types, user groups, and integration points. A validated set of functional and non-functional requirements gathered from all relevant stakeholders (e.g., local authorities, schools, families, IT teams). A realistic delivery roadmap including timelines, resources, risks, and dependencies, supported by a business case or discovery report.	A SEND case management system will streamline processes, improve communication, and ensure statutory deadlines are met. It will reduce administrative burden and support timely, coordinated provision for children and young people with SEND.	% plans completed within 20 weeks increase towards statutory compliance Baseline: Not available Average completion time of an EHCP decreases towards the national figure (24 weeks) Baseline: Not available % annual reviews increase towards statutory compliance Baseline: Not available 90% of CYP have an annual review within the last 12 months		21/10/2025
		Procurement and governance for new product, IT implementation of product into service. Data Cleanse from CAPITA Departmental implementation of product, and engagement with wider stakeholders.	HCO	Aug-26	The new SEND case management system is fully implemented and operational across all relevant teams. All staff are trained and confidently using the system to manage and track casework effectively. The system improves the accuracy, accessibility, and timeliness of case information and communication. Data reporting and workflow management are enhanced, supporting better decision-making and performance monitoring. The system is embedded into daily practice and supports compliance with statutory timescales and processes.		Baseline: Not available Clear data dashboard that supports strategic and operational activity Baseline: Not available		12/11/2025



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3.2	Build Wider Workforce Capacity	Map current workforce and identify key gaps in skills and capacity across education, health, and care. Recruit, retain, and support key specialist roles (e.g. EPs, SEND officers) with clear career pathways. Review other service structures and plan	HCO/VJ	Apr-26	Workforce gaps are identified and mapped with a clear plan in place to address them. A comprehensive review of at least 3 comparable service structures from	Remove gaps and overlaps, improve efficiency, and ensure all key functions are clearly supported. This will lead to faster, more consistent service, better outcomes for families, and a more focused, motivated team	100% of key functions (e.g., casework, EHCP processing, tribunal support, transitions, etc.) are accounted for in the new structure. Baseline: Not available Service delivery KPIs (e.g., EHCP timeliness, response times) improve by 10% within 6 months of implementation.		12/11/2025
		a service redesign to ensure we have a structure that supports all key functions of the SEND team, ensuring SMART working and removing gaps and overlap in the service.			other local authorities or relevant organisations is completed. A clear map of current SEND team functions is created, identifying overlaps, gaps, and inefficiencies. A proposed new service structure is developed that aligns with statutory responsibilities and team objectives.		Baseline: Not available		



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		Deliver targeted, high-quality CPD aligned with SEND priorities and inclusive practice. Establish peer networks and SEND champions to share expertise and support ongoing learning. Develop leadership capacity among SENCOs and inclusion leads to drive strategic change.	EDO	Sept-26	Staff in key roles have completed relevant CPD aligned with SEND priorities. Peer networks or SEND champions are active across schools and settings. Staff report increased confidence and capability to meet the needs of children and young people with SEND.	Children and young people with SEND are supported by a confident, skilled, and well-resourced workforce across education, health, and care. Through targeted development, leadership support, and effective collaboration, the workforce is empowered to deliver inclusive, high-quality provision that meets diverse needs and improves outcomes.	80%+ of staff in key roles (e.g. SENCOs, SEND Officers, EPs) have completed targeted SEND CPD within the year. Baseline: Not available At least 75% of schools/settings have an active SEND champion or are part of a peer support network. Baseline: Not available 100+ multi-agency training sessions delivered annually, reaching staff across education, health, and care sectors. Baseline: Not available 5+ case studies per year demonstrating how CPD or leadership development improved outcomes for individual learners. Baseline: Not available Staff testimonials showing how training increased their confidence and improved inclusive classroom practices. Baseline: Not available School leaders report improved collaboration due to active participation in SEND networks or peer groups. Baseline: Not available Parents/carers share positive stories of how workforce improvements led to better communication or outcomes for their child. Baseline: Not available		12/11/2025

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On track: The action has started, is on track for completion, and there are no issues raised requiring escalation.

Vulnerable: Action looks unlikely to be achieved, or timescales met, as planned and this may have implications on improvements, so requires escalation.

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Complete: Action fully completed and intended impact/outcome is evident.



P4 Local Statutory Framework

Strengthen strategic leadership across the partnership to ensure timely, high-quality, and well-governed Education, Health and Care (EHC) plans and annual reviews.

What does good look like for Tameside Children and Young People:

In Tameside, children and young people with special educational needs and disabilities (SEND) thrive in a system where their voices are heard, their needs are understood, and their support is timely and effective. Strong strategic leadership ensures that Education, Health and Care (EHC) plans are high-quality, coproduced, and delivered on time. Multi-agency teams work seamlessly, with social care, health, and education professionals contributing meaningfully to holistic plans. Families no longer face long waits for support—early intervention is the norm, not the exception. Schools and settings provide consistent, inclusive, and high-quality SEND provision, backed by robust oversight and accountability. Together, this creates a culture of trust,

empowerment, and improved outcomes, where every child and young person is supported to





Children and young people in Tameside will get the right support at the right time, with plans that reflect their full needs. Families will feel listened to, supported, and no longer face long waits or confusion. Together, this will lead to better outcomes, stronger trust, and brighter futures for all.



Ref	Target	Activity to achieve the target	Owner	Timescale for completion	Outcomes for success (how we know it's achieved)	Impact (the difference this will make/has made)	Evidence of how impact is measured (how we show this, including baseline)	RAG	SLAIB SIGN OFF DATE and RAG
4.1	Improve QA activity of component parts of and final EHCP's Finalise and	is written and signed off by SLAIB is written and signed off by Stakeholders.	Good quality health, social care and Educational Psychology advices that accurately reflects children and young people's needs.	60% of advice reports are completed and returned within the 6-week timescale across EP, Medical and Social Care. Baseline: Not available 50% of plans are Basic QA-checked before they leave the SEND department.		21/10/2025			
	LA QA strategy including the implementation of invision 360 into business as usual practice.	Regular QA carried out in line with QA strategy at multiple tiers	СТН	July-25	Invision360 is fully embedded into routine QA processes and used consistently across services. Staff are trained and confident in using Invision360 to monitor, evaluate, and improve provision. Regular QA cycles are in place, with clear evidence of impact on the quality of SEND support. Outcomes from Invision360 inform service development and are used to drive continuous improvement as part of business-as-usual practice.		10% of plans go through the full Invision QA process At least 80% of plans are satisfactory when fully QA'd on Invision 360 Baseline: Not available The team has a checklist of what makes satisfactory, good, and outstanding EHCP plans, and there is evidence of its use in case files. Baseline: Not available Stakeholder feedback around the quality of the EHCP shows that at least 80% are satisfactory. Baseline: Not available		21/10/2025
		QA data is used to support the quality of EHCP's leaving the department and to support the training of staff to understand what 'good looks like'	СТН	July-25	Outcomes from Invision360 inform service development and are used to drive continuous improvement as part of business-as-usual practice.		All staff are trained in use of invision 360, and use it on their own and others plans to understand what good looks like. Baseline: Not available		21/10/2025



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4.2	Improved Timeliness of EHC Plans	Full process review for all areas of the system to be embedded.	KS	Jan-25	A comprehensive review of all EHCP-related processes is completed, with new systems and improvements fully embedded across services.	Education, Health and Care Plans that enable earlier access to the support they need. Improved compliance with statutory timescales leads to more efficient processes, increased family confidence, and better educational, health, and social outcomes. Baseline: Not available Average completion time of ar EHCP decreases towards the national figure (24 weeks) Baseline: Not available % annual reviews increase towards statutory compliance Baseline: Not available 90% of CYP have an annual rewithin the last 12 months Baseline: Not available	weeks increase towards statutory compliance Baseline: Not available Average completion time of an		21/10/2025	
		Case officers assigned to each school / child.	KS	Sept 2025	Every school and child with an EHCP has a named case officer, with roles clearly communicated and support structures in place.		leads to more efficient processes, increased family confidence, and better educational, health, and social subsections.	national figure (24 weeks) Baseline: Not available		21/10/2025
		Tracking support and challenge system embedded.	KS	April 26	A robust system is in place to monitor EHCP timelines and quality, enabling proactive support and accountability.		90% of CYP have an annual review within the last 12 months		21/10/2025	
		Training offer implemented.	KS	Dec 25	Relevant training is provided to schools and professionals, with evidence of increased confidence and consistency in EHCP processes.				21/10/2025	
		TOR reviewed for SEND panel and clear protocols and mapping of roles for each SEND process developed using support from our DFE SLIP partner.	KS	Jan 26	The Terms of Reference (TOR) for the SEND panel are updated and agreed, ensuring clarity of purpose, roles, and decision-making processes.				21/10/2025	



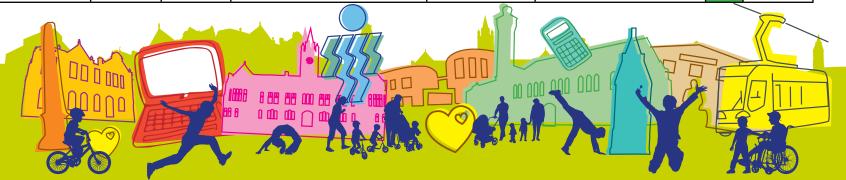
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4.3	Improve Educational Psychology sufficiency	Review and evaluation of EPS service delivery and how this supports the statutory process and wider inclusion	EDO	Apr-26	Clear understanding of current and projected demand for Educational Psychology services is established through data analysis.	Improving Educational Psychology sufficiency will lead to increased capacity, reduced waiting times, and more timely assessments and interventions. Schools	Cost of provision of service is brought into a business as usual position with clear realistic budget allocated Baseline: Not available. 90% of EPS advices are completed to timescale of 6		21/10/2025
		MOU for service delivery co-produced using support from our DFE SLIP partner and other models within local EPS services. Staffing structure and succession planning for the service will be implemented to meet this MOU.			Recruitment strategy is developed and implemented to increase capacity, including permanent and locum roles where appropriate. Service delivery model is reviewed to maximise impact and efficiency, ensuring timely support for statutory and traded work. Partnerships with training providers and universities are strengthened to support future workforce pipelines. Feedback from schools and stakeholders indicates improved access to Educational Psychology services and reduced waiting times.	and families will experience more consistent access to support, contributing to better outcomes for children and young people with SEND.	weeks. Baseline: Not available EPS services are clearly mapped as a universal support offer. Baseline: Not available		



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a consisten multi-ageno process tha ensures tim and meanin social care input into all stages of the EHC plan pathwa including	and embed a consistent, multi-agency process that ensures timely and meaningful social care input into all stages of the EHC plan pathway,	Define and communicate the role of social care in the EHCP process through updated practice standards and staff guidance. Provide co-produced training for social care professionals to develop a shared understanding of the EHCP process, including roles, thresholds, and timelines.	MP	March-26	The role of social care in the EHCP process is clearly defined and communicated through updated practice standards and staff guidance. Social care professionals receive co-produced training that builds a shared understanding of roles, thresholds, and timelines. Success will be measured by staff awareness, training completion rates, and improved quality and timeliness of social care input into EHCPs.	These improvements will ensure social care input into EHCPs is timely, consistent, and high quality. Clear roles, better coordination, and regular audits will strengthen multi-agency working, leading to more effective plans and better outcomes for children, young people, and families.	Ensure 100% of new EHCPs are informed by relevant and appropriate social care advice by March 2026. Baseline: Not available Ensure 100% of children open to an EHC needs assessment are contacted by the Early Help Access Point, receive information on the Local Offer, and are offered an Early Help Assessment.		21/10/2025
	review, and provision planning.	Assign named social care professionals to contribute to EHCP assessments and participate in multi-agency decision-making panels. Use a standardised template for social care advice within EHCPs to support consistency and quality across all cases. Implement prompts within the case management system to ensure timely social care contributions, particularly for Section D.	MP	March-26	Named social care professionals are consistently assigned to EHCP assessments and multi-agency panels, ensuring accountability and continuity. A standardised template is used for all social care advice, promoting clarity and quality. Timely contributions, especially for Section D, are supported by automated prompts in the case management system, leading to improved consistency and responsiveness across all cases.		Baseline: Not available 85% of social care advice is received within 6 weeks of request, within the statutory timeline. Baseline: Not available 85% of section H of an EHCP is judged as Silver or better on invision tool. Baseline: Not available 80% of identified actions are implemented within three months of audit completion. Baseline: Not available		21/10/2025



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		Improve coordination between Early Help and statutory assessment processes to strengthen social care input for both known and unknown cases.	MP	March-26	Improved coordination between Early Help and statutory assessment processes ensures that social care input is timely, relevant, and consistent for both known and previously unidentified cases. Clear referral pathways, shared protocols, and joint working practices are embedded, leading to more holistic assessments and better-informed EHCPs.				21/10/2025
		Conduct regular audits of EHCPs to monitor the quality, timeliness, and relevance of social care input and identify areas for improvement.	MP	April-26	Regular audits of EHCPs are conducted to assess the quality, timeliness, and relevance of social care input. Findings are used to identify trends, highlight good practice, and inform continuous improvement. Audit outcomes are shared with teams to drive accountability and enhance the consistency and impact of social care contributions.				21/10/2025
		External multi-agency audits, pupil tracking meetings completed monthly using an external lead, learning from these supports service improvement, increased multi agency working across EHC. Funding for this process will be requested through DFE Intervention Support Fund (ISF)	HCO	March-26	Monthly external multi-agency audits and pupil tracking meetings are consistently completed with an independent lead. Insights from these activities directly inform service improvements and promote stronger multi-agency collaboration across the EHCP process. Evidence of learning and action taken is documented and shared, leading to more coordinated and effective support for children and young people.				21/10/2025



Ref Target	Activity to achieve the target	Owner	Timescale for completion	Outcomes for success (how we know it's achieved)	Impact (the difference this will make/has made)	Evidence of how impact is measured (how we show this, including baseline)	RAG	SLAIB SIGN OFF DATE and RAG
4.5 Monitor and review the Suitability of Placements and the appropriateness of provision through the Annual Review Process	Apply a tiered review system: high-risk placements reviewed termly, medium-risk annually with checks, and low-risk through data/feedback only. Create uniform tools for visits, desk-based reviews, and feedback collection, using digital platforms to streamline data. Ensure all statutory annual reviews are scheduled, completed, and tracked using a central case management system.	KS	Sept-26	100% of statutory annual reviews completed within required timescales. All high-risk placements monitored termly with documented actions and outcomes.	Children and young people with EHCPs are placed in high-quality, appropriate settings that meet their individual needs, support their progress, and keep them safe. Through robust, risk-based monitoring and regular review, the Local Authority ensures that placements remain suitable, effective, and responsive — leading to improved	95%+ of EHCP annual reviews completed within statutory deadlines by end of each academic year. Baseline: Not available 100% of high-risk placements reviewed termly, 90% of medium-risk reviewed annually. Baseline: Not available 85%+ of independent/non-maintained providers visited at least once every 12 months. Baseline: Not available 80%+ of parents/carers and CYP report that placement meets needs in annual		12/11/2025
	Develop provider dashboards to track outcomes, incidents, attendance, exclusions, and highlight patterns or concerns. Run a rolling programme of quality assurance visits based on risk levels and provider types, involving QA, SEN, and commissioning teams. Collect large-scale feedback from young people, parents, and providers via surveys, interviews, and focus groups to shape provision.			Clear risk categorisation in place for all placements, reviewed and updated regularly. All placement concerns escalated and acted upon within defined timeframes Quality assurance visits completed for all independent, AP, or out-of-area placements on a rolling annual basis. Monitoring tools and templates used consistently across teams with evidence of impact. Improved outcomes for CYP with EHCPs, shown through academic progress, attendance, and placement stability.	educational outcomes, increased placement stability, and positive experiences for children, young people, and their families.	survey. Baseline: Not available 100% of provider-related concerns resolved or progressed within 10 working days of identification. Baseline: Not available 100% of monitoring activities logged using LA-standard templates or digital tools. Baseline: Not available Collect 5+ in-depth examples per year showing how monitoring led to improved outcomes or prevented placement failure. Baseline: Not available Annual summary of key themes from provider visits and family feedback (e.g. communication, support consistency, environment). Baseline: Not available		

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		Set up clear escalation routes for concerns, with the ability to intervene, issue improvement notices, or suspend placements where needed. Regularly report placement trends, quality concerns, and progress to internal panels and boards to guide commissioning and planning. Log all monitoring activities, reviews, feedback, and decisions in a centralised, secure system integrated with EHCP management tools.			Reduction in placement breakdowns or unplanned moves due to proactive monitoring and early intervention. SEN team and commissioning team use monitoring data to inform sufficiency planning and provider improvement.		Team reflections gathered termly showing how monitoring has influenced decision-making or improved practice. Baseline: Not available Evidence from focus groups or advisory boards that partners trust LA oversight of placements. Baseline: Not available External validation that monitoring and review processes are robust and child-centred (e.g. Ofsted or peer review feedback). Baseline: Not available		

On track: The action has started, is on track for completion, and there are no issues raised requiring escalation.

Vulnerable: Action looks unlikely to be achieved, or timescales met, as planned and this may have implications on improvements, so requires escalation.

At risk: There is a risk that this action will not be completed, and escalation is required and a plan to mitigate risks must be implemented.



P5 Local Inclusion Partnership working

Promote collaborative leadership across the partnership to develop and implement a well-considered Alternative Provision (AP) strategy that meets the diverse needs of children and young people with SEND.

Drive urgent, cross-partnership action to strengthen understanding of and improve responses to children and young people with SEND who are at risk of exploitation, ensuring early identification, effective intervention, and coordinated safeguarding across all services.

What does good look like for Tameside Children and Young People:

In Tameside, children and young people with SEND are thriving because services work together with purpose and compassion. Through strong, collaborative leadership, a well-designed Alternative Provision strategy ensures that every child receives the right support, in the right place, at the right time. Schools, health services, social care, and community partners act early to identify needs and risks, especially for those vulnerable to exploitation. Together, they respond swiftly and effectively, keeping children safe and engaged in learning. Families are valued partners, and young people feel heard, supported, and empowered to achieve their full potential. This is a borough where inclusion is real, safeguarding is shared, and every child has the opportunity to succeed.

What difference will this make for Tameside Children and Young People, and their families:

In Tameside, children and young people with SEND will be supported by a strong, united partnership that listens, understands, and takes action. Collaborative leadership will shape an inclusive Alternative Provision strategy that meets diverse needs and keeps children engaged in learning. At the same time, urgent, coordinated efforts will be made to identify and protect those at risk of exploitation—ensuring early intervention and safeguarding across all services. Families will feel heard, supported, and confident that their children are safe, valued, and given every opportunity to thrive.

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5.1	Children and young people with Special Educational Needs and Disabilities (SEND) who are at risk of exploitation are identified early and receive timely, coordinated, and effective support across all services. Multiagency partnerships demonstrate a shared understanding of the specific vulnerabilities, leading to improved safeguarding responses, reduced risk of harm.	We will improve our ability to identify children and young people with SEND who may be vulnerable to exploitation by embedding clear, multi-agency pathways and training professionals to recognise SEND-specific risk factors. This will enable earlier intervention and reduce the likelihood of harm. Embed Coordinated Multi-Agency Support By aligning services around the child through integrated planning and shared safeguarding protocols, we will ensure that support is timely, joined-up, and tailored to individual needs—creating a protective network that reduces risk and improves outcomes. Develop a Shared Understanding of Vulnerabilities We will deliver joint training and development across agencies to build a consistent understanding of how exploitation may present in children and young people with SEND, ensuring that safeguarding responses are informed, inclusive, and effective. Improve Safeguarding Intelligence and Data Sharing Strengthening real-time data sharing and safeguarding intelligence across services will allow us to identify patterns, respond proactively to emerging risks, and ensure that interventions are targeted and evidence-based. Promote Resilience and Protective Factors We will work with families and young people to co-produce strengths-based support plans that build resilience, foster inclusion, and reduce vulnerability—ensuring that children and young people with SEND are empowered and protected.	Family Help Heads of Service	April 2026	Children and young people with SEND at risk of exploitation are identified earlier, with increased referrals from education, health, and social care. Multi-agency plans are in place and consistently implemented, with evidence of timely, coordinated support. Professionals across services demonstrate a shared understanding of SEND vulnerabilities, reflected in safeguarding assessments and decision-making. Safeguarding data shows reduced incidents of exploitation and harm among children and young people with SEND. Feedback from families and young people indicates improved confidence in support and safeguarding responses.	By identifying children and young people with SEND who are at risk of exploitation earlier and responding with coordinated, multi-agency support, we will reduce the likelihood of harm and improve safeguarding outcomes. Professionals will be better equipped to recognise vulnerabilities, families will feel more confident in the system, and young people will be safer, more resilient, and better supported to thrive.	Reduction in exploitation-related safeguarding incidents involving children and young people with SEND. Baseline: Not available Increase in timely multi-agency interventions following identification of risk. Baseline: Not available		12/11/2025
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Ref	Target	Activity to achieve the target	Owner	Timescale for completion	Outcomes for success (how we know it's achieved)	Impact (the difference this will make/has made)	Evidence of how impact is measured (how we show this, including baseline)	RAG	SLAIB SIGN OFF DATE and RAG
5.2	A cohesive and inclusive Alternative Provision (AP) strategy is coproduced and implemented across the partnership, ensuring that children and young people with SEND have access to high-quality, personalised education pathways that meet their diverse needs. Collaborative leadership drives a shared vision, resulting in improved engagement, attainment, and well-being for learners in AP settings.	Consult with schools, AP providers, parents and pupils. Convene a steering board for the AP Strategy to include schools, social care, SEND staff and elected members. Comms strategy to ensure all relevant parties are kept informed Commissioning of appropriate provision for AP	KTW/ HCO	Sept 2026	AP Strategy completed and shared. All AP in Tameside receive regular quality assurance. Attendance at AP for our vulnerable pupils improves	Improved attendance at AP, reduced exclusions across the authority, and better working relationships with Alternative Providers and schools. All needs catered for within the school system.	Termly attendance and exclusions measures will show an increase Baseline: Not available Ofsted reports for inspections of AP. Baseline: Not available		21/10/2025
5.3	A fully operational Local Area Inclusion Board, supported by locality-based inclusion panels, ensures strategic oversight and consistent, equitable decision-making to promote the inclusion of all learners, particularly those with SEND and additional needs. Through collaborative governance and local intelligence, the system enables early intervention, reduces exclusions, and improves access to appropriate education pathways across the area.	Consult and publish exclusions protocol, map existing services and pathways, recruitment of panel members, schedule frequent panels, establish framework, governance and referral and decision-making processes, establish budget	Katie Twigg	First panel meeting - Jan 2026, annual review Sep 2026	Reduced permanent exclusions and suspensions, improved attendance, improved timeliness on access to AP	Improved inclusion and equity Strategic oversight and intervention Improved access to appropriate pathways for children and young people Reduced exclusions and improved attendance Stronger collaboration and co-production			12/11/2025

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Vulnerable: Action looks unlikely to be achieved, or timescales met, as planned and this may have implications on improvements, so requires escalation.

At risk: There is a risk that this action will not be completed, and escalation is required and a plan to mitigate risks must be implemented.

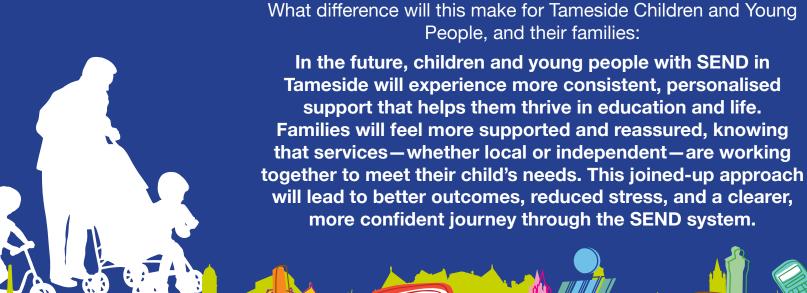


P6 Role of the independent sector

Strengthen strategic partnerships and commissioning arrangements with the independent sector to ensure high-quality, inclusive, and sustainable provision that meets the diverse needs of children and young people with SEND across education, health, and care.

What does good look like for Tameside Children and Young People:

In Tameside, children and young people with SEND will have timely access to high-quality, inclusive support from both local and independent providers. Services will be well-coordinated, with consistent standards and strong collaboration across education, health, and care. Families will feel confident in the system, and CYP will experience better outcomes, smoother transitions, and a greater sense of belonging.





Ref	Target	Activity to achieve the target	Owner	Timescale for completion	Outcomes for success (how we know it's achieved)	Impact (the difference this will make/has made)	Evidence of how impact is measured (how we show this, including baseline)	RAG	SLAIB SIGN OFF DATE and RAG
6.1	Strategic partnerships and commissioning arrangements with the independent sector are strengthened to deliver high-quality, inclusive, and sustainable education, health, and care provision for children and young people with SEND. Through collaborative planning, robust quality assurance, and shared accountability, the local area ensures that commissioned services are responsive to diverse needs, deliver positive outcomes, and represent good value for money.	Co-produce a strategic commissioning framework with stakeholders to define expectations for high-quality, inclusive, and sustainable SEND provision, ensuring alignment with local priorities and value for money. Establish multi-agency planning forums that use data and provider input to identify gaps, forecast future needs, and co-design responsive services. Implement a robust quality assurance framework that includes site visits, feedback from families, and outcome tracking to ensure continuous improvement and high standards. Introduce outcome-based contracts with clear KPIs and regular performance reviews to strengthen accountability and ensure effective use of public funds. Invest in sector-wide capacity building through joint training, shared learning, and collaborative innovation to foster strong relationships and sustainable provision.	Sally Atkinson	Sept 2026	Strategic partnerships and commissioning arrangements are successful when the majority of independent placements are consistently rated good or outstanding Children and young people with SEND are making measurable progress against their EHCP outcomes Annual reviews confirm that services are delivering strong outcomes within budget—demonstrating both quality and value for money.	By strengthening our partnerships and commissioning arrangements with the independent sector, children and young people in Tameside will benefit from more consistent access to high-quality, inclusive support that meets their individual needs. They will experience better educational, health, and care outcomes, with services that are more responsive, better coordinated, and sustainable—helping them to thrive both now and in the future.	Partnership framework and commissioning strategy completed within 3 months. Baseline: Not available 100% of commissioned providers meet agreed quality standards through regular audits and reviews. Baseline: Not available At least 70% of placements are rated good or outstanding by Ofsted or equivalent. Baseline: Not available		12/11/2025

On track: The action has started, is on track for completion, and there are no issues raised requiring escalation.

Vulnerable: Action looks unlikely to be achieved, or timescales met, as planned and this may have implications on improvements, so requires escalation.

At risk: There is a risk that this action will not be completed, and escalation is required and a plan to mitigate risks must be implemented.



P7 Health Provision

What does good look like for Tameside Children and Young People:

In Tameside, children and young people are identified early and supported quickly. Services are in place so children can access the right support at the right time. Families feel heard, involved, and confident that their child's needs are met with care, clarity, and compassion.

What difference will this make for Tameside Children and Young People, and their families:

Children and young people will get the help they need sooner, leading to better wellbeing, learning, and confidence. Families will feel supported, informed, and involved every step of the way, reducing stress and building trust in the system. Together, this creates a more responsive, compassionate, and effective system for everyone.



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HP1	Map services and pathways in Health provision for CYP 0-25 with SEND and identify gaps in commissioning and/or provision.	1.1 Undertake a review of service provision and map gaps or unclear pathways for treatment, with specific focus on those pathways highlighted through inspection of: Continence Enuresis Complex needs nursing Sleep Post 16- Neurodevelopmental pathways	Tameside CYP Commissioner ICB / Tameside CYP Commissioner TMBC / Provider Service Lead	April-26	Service specifications reviewed for the priority services by April 26 Key priorities and recommendations to support transition between paediatric and adult services are identified and shared with adult providers. Joint commissioning recommendations identified to improve the pathways where required,	Pathways will be clear, consistent, and equitable, ensuring no child is left behind due to unclear processes or service gaps. Health and Care services in Tameside will have clear access routes into locality and GM services that meet the needs of the Tameside population. Service will be informed and co-designed by Children, Young People and Families.	Action Plan in place following process mapping meetings with a clear plan to ensure actions are made. Baseline: Not available Patient stories developed and shared at meetings (evidenced through minutes). Baseline: Not available Agreed service specifications in place for priority pathways identified by OFSTED/CQC.		21/10/2025
		1.2 Establish Task and Finish group to process map each service with representation across system stakeholders including TUPCF / families 1.3 Establish links and	Tameside CYP Commissioner ICB / Tameside CYP Commissioner TMBC Tameside CYP	Dec 25	and included in the Joint Commissioning Strategy.		Baseline: Not available Gaps in the priority service areas are identified and a clear action plan is in place for the next steps Baseline: Not available		21/10/2025
		representation with Tameside Umbrella Parent Carer Forum and SEND Youth Council to ensure the voice of the child is at the core of service redesign.	Commissioner ICB / Tameside CYP Commissioner TMBC						



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		1.4 Develop recommendations for pathway redesign / strategic commissioning reviews and improvement plans	Tameside CYP Commissioner ICB / Tameside CYP Commissioner TMBC / Provider Service Lead	Feb 26					21/10/2025
		1.5 Review and implement pathways from local community paediatric services into the newly commissioned GM wide Palliative and End of Life service for CYP and	Tameside CYP Commissioner ICB / Community Paediatric Service Lead	Apr-26	Documented pathways in place for Tameside services to access GM CYP Palliative and end of life care service.	Children and young people approaching the end of their life and their families will have timely access to high quality specialist palliative and end of life professionals, improving the experience of the families and child and ensuring the child is able to receive the highest level of care and support.	GM activity data on CYP palliative and end of life care. Baseline: Not available		21/10/2025



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HP2	Develop commissioning and improvement plans to ensure health services are needs led to improve outcomes for Children and Young People with SEND	2.1 Work as local area partnership to consider opportunities for joint commissioning of services to deliver services effectively. Ensure health priorities are reflected in the Joint Commissioning Strategy for SEND. Co-produced specifications and are updated in line with gaps identified including for transition. 2.2 Identify data sources and single system method of data collection to improve communication to ensure appropriate and timely response	Tameside CYP Commissioner ICB / Tameside CYP Commissioner TMBC / Community Paediatric Service Lead Tameside CYP Commissioner ICB / Tameside CYP Commissioner ICB / Tameside CYP Commissioner TMBC / Community Paediatric Service Lead	Sept 26	A strengthened system ensures children and young people with SEND receive timely, appropriate support through clear, coordinated pathways. Service gaps are identified and addressed, joint commissioning aligns resources to need, and triage processes are fair and responsive. Universal support is reviewed and embedded consistently across settings, building a strong foundation for early help and inclusion. Families experience a more transparent, equitable journey, and professionals are supported by systems that enable effective, joined-up care. Data systems will be implemented to monitor referral volumes, waiting times, triage outcomes, and the uptake of both universal and targeted support. These systems will enable real-time tracking and analysis, supporting informed decision-making and service planning. Success will be demonstrated through improved data accuracy, regular reporting, and the ability to identify trends and respond proactively to emerging needs.	Children and young people have access to a full range of health services that are commissioned to meet identified needs, reduce duplication, and ensure CYP receive timely, appropriate support across the full treatment journey. The experience of children and young people with SEND and their families is improved through timely access to services which supports the child to meet their potential. Services are delivered at the earliest identification of need and support an increase in school readiness.	Updated service specifications taken through governance and approved. Baseline: Not available Improvement plan in place to deliver the service improvements and identified commissioning plans, overseen and monitored through the local area improvement board and Children's improvement board. Baseline: Not available Whole system data dashboard presented to local area improvement Board		21/10/2025
		2.3 Develop detailed system wide improvement plan for those services where gaps in provision or pathways are identified and where performance data identifies under achievement of KPI's	Tameside CYP Commissioner ICB / Tameside CYP Commissioner TMBC / Community Paediatric Service Lead		Stakeholders are engaged throughout, and the outcome is a clear, actionable improvement plan to strengthen access, coordination, and clarity across these critical areas of support.		Baseline: Not available		21/10/2025



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		2.4 Work in partnership to map a clear, needs led approach to supporting children and young people with early signs of a learning disability and responsibilities for diagnosis of a learning disability to ensure children with LD have access to important support, such as access to an annual health check and the Dynamic Support Register (DSR)	Principle Psychologist	Sept 26	Clear support and diagnostic pathway and responsibilities published	Children and young people with early signs of a learning disability will be supported with a needs led approach prediagnosis and will benefit from a clear pathway to diagnosis to ensure they are able to access support. Ensuring children with a learning disability do not suffer health inequalities and are able to fulfil their potential	Documented LD diagnostic pathway and process. Baseline: Not available		21/10/2025
HP3	Develop a continuum of offer for CYP with SLCN (speech	3.1 Task and finish groups established to develop the offer	Tameside CYP Commissioner ICB / Clinical Service Lead CYP SLC	Dec 25	System group in place	Children and young people will be able to access a clear universal and targeted offer to support SLC Needs.	Minutes from task and finish groups with clear action plan to evidence progress, with key stakeholder involvement and attendance.		21/10/2025
	language communication needs) in line with The Balanced System Framework	3.2 Using the Balanced System Framework to map and identify gaps in the current offer	Tameside CYP Commissioner ICB / Clinical Service Lead CYP SLC	Apr-26	Mapping completed and Universal and Targeted offer identified for all children.		Baseline: Not available Universal information and advice accessible digitally via the CYP Therapies Microsite ICFT. Baseline: Not available		21/10/2025
		3.3 Identify and engage key system wide stakeholders and opportunities for joint commissioning	Tameside CYP Commissioner ICB / Tameside CYP Commissioner TMBC / Clinical Service Lead CYP SLC	Sept 26	Jointly commissioned service specification developed		The Balanced System resources and tools are used to plan and monitor progress Baseline: Not available		21/10/2025



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HP 4	Education settings easily access timely universal support and resources from children's therapies (OT, PT, SALT)	Develop a universal training offer for the workforce in line with the graduated response that is accessible and helpful in identifying needs and strategies Develop a staff survey to measure confidence and competence and identify needs. Resources are accessible, available and promoted to families through the Local Offer and the Therapies Microsite Equipment to manage health needs in schools is provided as per legislation when identified as being required	Tameside CYP Commissioner ICB / Clinical Service Lead ISCAN and SALT	Apr-26	Education staff can access a training offer that is in place, accessible and promoted: Universal training Resources Advice and strategies	Staff in education settings are confidently able to access universal offer from children's therapies which ensures that all children with an identified need is able to receive appropriate universal support in the educational setting. Children will be supported in the education environment with appropriate intervention which will support maintained attendance and educational progress.	Increased staff confidence and competence in identifying and supporting children's needs, reported by annual survey. Baseline: Not available Hits on Therapies Microsite resource pages are monitored and can be reported through to the Local Area Improvement Board. Baseline: Not available Rates of exclusions for communication difficulties. Baseline: Not available		21/10/2025

On track: The action has started, is on track for completion, and there are no issues raised requiring escalation.

Vulnerable: Action looks unlikely to be achieved, or timescales met, as planned and this may have implications on improvements, so requires escalation.

At risk: There is a risk that this action will not be completed, and escalation is required and a plan to mitigate risks must be implemented.

