



Kensington and Chelsea Local Area
**Special Educational Needs
and Disabilities (SEND)**
Self-Evaluation Framework

Quarter 1 and 2 2025/26
(April-September)



Welcome!

Our SEND Strategy

It is now 10 years since the introduction of the Children and Families Act. In that time, partnerships that exist across Kensington and Chelsea have matured and the way we hold each other to account is at a deeper level.

The focus of our SEND Strategy is to ensure we are helping children and young people to realise their hopes, dreams and aspirations so that they are able to live happy and fulfilling adult lives in our local area.

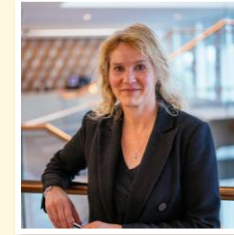
About This Report

The regular and embedded practice of updating this self-evaluation document supports reflection of areas for development and partners are open to learning from other areas. There is a willingness to be challenged (particularly through feedback from parent carer forums), to listen, respond and adapt.

Our SEND Executive Partnership and Joint Commissioning Boards are jointly chaired by the Local Authority and Integrated Care Board (ICB). There has been an embedded process of updating and publishing this local area self-evaluation document by all partners for over eight years. A multi-agency dashboard provides data to support continuous improvement and is reviewed and updated on a quarterly basis.



Sue Redmond
Chair of Full of Life,
SEND Parent Carer
Forum



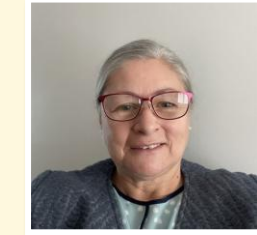
Sarah Newman
Executive Director of
Children's Services



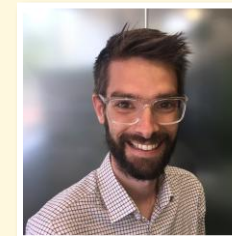
Joe Nguyen
Borough Director,
NHS North West
London



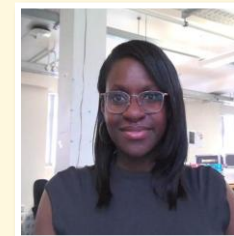
Ian Heggs
Director of Education
and Libraries



Julie Ely
Assistant Director of
SEN and School
Admissions



Steve Comber
Head of SEND Local
Offer and SEN
Outreach



Kirby Mukwenda
Designated Social
Care Officer



Natasha Patten
Designated Clinical
Officer, NHS North
West London



Summary

Our Schools

Children and young people with SEND growing up in Kensington and Chelsea are far more likely to go to a good or outstanding school, have smaller attainment gaps and achieve educational outcomes above the national average. Children in the area have their needs identified early and a range of services are ordinarily available to support their teachers and parents remove barriers to their learning. Those children and young people whose needs call for specialist provision benefit from timely statutory assessments and a broad range of Short Breaks.

Reducing wait times for diagnosis of autism and ADHD is a priority for the area and plans are in place to achieve this alongside a high-quality offer of support for children and young people who are waiting. Local schools have adopted SCERTS, our overarching model for supporting autism. We have rolled out training for this, alongside other relevant training, across education, health and social care services.

Our families

The services we design and deliver through open and honest conversations are increasingly wrapped around our local families' lives.

Parents and carers are involved in decisions that affect their children. They also sit on high-level boards and influence strategic decision making.

Co-production is embedded into structures and everyday practice with regular Parent Reference Group meetings and there is a dedicated post focused on capturing the voice of children and young people.

SEND
Local Offer



THE BOROUGH EDUCATION TRUST
KENSINGTON
AND CHELSEA

Scan the codes to hear the voices of our children and young people and where they want to be in five years' time

From the [Children and Young People's Plan 2023-2026](#)



Summary

A Systemic Approach

There is a whole-system approach to meeting speech language and communication needs and an ambitious project to support transformation of the delivery of the occupational therapy services, including a planned pilot with schools this autumn, is underway across health and education to strengthen universal, targeted and specialist support.

A joined-up approach to earlier intervention for mental health needs means there is an offer in place within both community and school settings, with Mental Health Support Teams based in almost all schools.

Active listening and compassion have supported NHS trusts as they recovered from the impact of Covid, managing increasing demands on services, and have supported the partnership to take a holistic approach to meet the needs of families. Systemic practice, supported by a comprehensive training programme, influences the way in which we deliver support for families.

Governance

There is strong leadership across the LA and ICB, NHS Trusts and other partners, supporting aspirational ambitions for our children and young people with SEND.

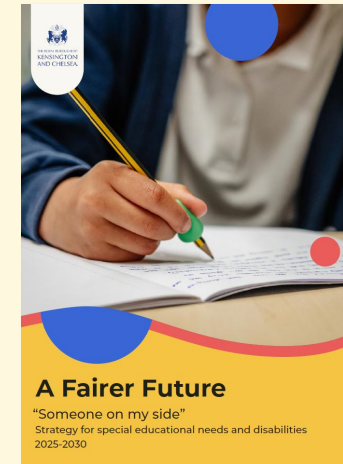
Joined up leadership has ensured that wider council departments, such as Libraries, our Music Hub, Economic Development and Leisure, recognise their role in ensuring that Kensington and Chelsea is a great place to live if you are a child or young person with SEND.

There is strategic agreement of borough-based partnership priorities for children and young people's health and well-being, robust joint governance processes, and an integrated model for early years linked to family hubs.

SEND
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Our SEND Strategy 2025–2030 (A Fairer Future – ‘Someone on my side’) sets out our vision for children and young people with SEND in Kensington and Chelsea to access ambitious, high-quality education and timely, co-produced support that is tailored to their needs.



THE ROYAL BOROUGH OF
KENSINGTON
AND CHELSEA

Our [Bi-borough Place Based Partnership](#) has agreed priorities for children and young people that align with our SEND Strategy

Highlight



Our local area partnership

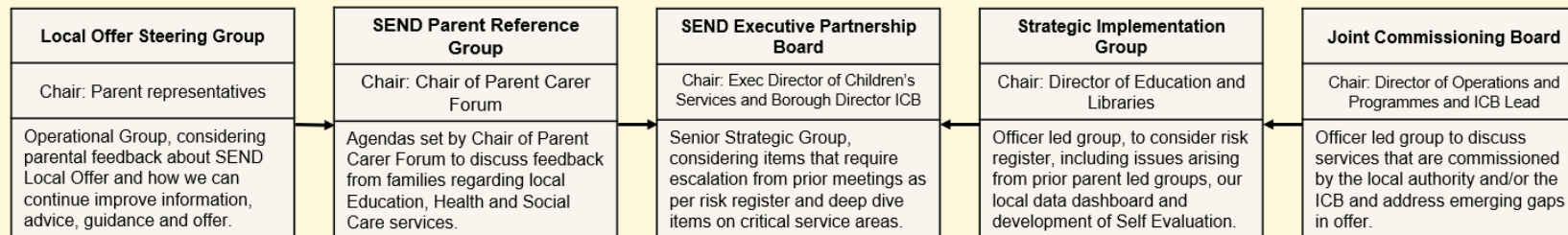
We have a **strong and mature local partnership** to support children and young people with SEND and prepare them for their adult lives. Parents and carers are involved in decisions that affect their children's lives, sit on our high-level boards and influence strategic decision making. There is strategic agreement of borough-based partnership priorities, which are overseen by robust joint governance processes.

Our **SEND Executive Partnership Board** includes parent representatives from our Parent Carer Forum, Full of Life, and partners. It is co-chaired by the Executive Director of Children's Services from Kensington and Chelsea Council and the Borough Director of North-West London (NWL) Integrated Care Board (ICB).

Co-production is embedded into structures and everyday practice with regular parent reference groups and a specific role to lead on outstanding work to capture the voice of children and young people.

There is **strong leadership across the LA and ICB, NHS Trusts and other partners**, supporting aspirational ambitions for our children and young people with SEND. Our SEND Executive Partnership and Joint Commissioning boards are jointly chaired by the LAs and ICB.

ALL FOR YOUTH
Owners: Children and Young People
Regular newsletter by children and young people with SEND for children and young people with SEND, ensuring their voices and experiences are heard and acted upon – published bi-monthly.



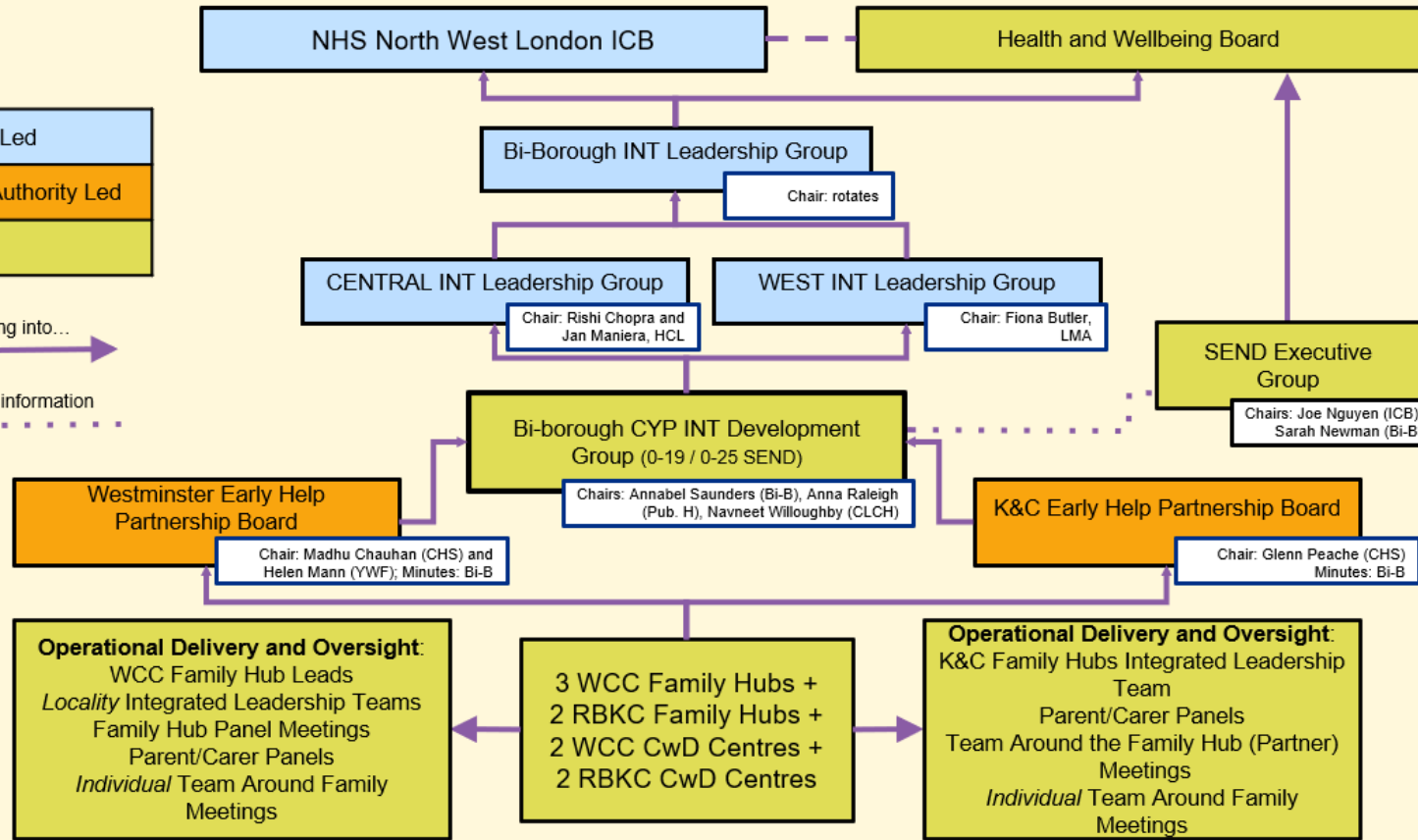
Integrated Neighbourhood Teams (INT)

Key



Reporting into...
→

Shared information
- - - - -



Where it makes sense to integrate services, that is the goal of system partners, with joint management and co-location as the embodiment of the model. **The integrated neighborhood model for children and young people aims to deliver the right help at the right time**, through the establishment of effective partnerships, good system management, MDTs and integrated services and support based in a particular locality.

Purpose of the model

- Focus on ensuring children, young people and their families get the right support at the right time
- Ensuring 0-5 year olds meet social, health, emotional and psychological potential and are school ready
- Focus on preventing unwarranted A&E and GP attendance
- Focus on early identification of emerging health conditions
- Focus on prevention of developing health conditions or poor social situations.
- Focus on preventing CYP entering the Youth Justice System, supporting families to minimise the need to take CYP into care, reducing the vulnerability of CYP to being exploited by gangs.
- Ensuring all CYP are in education, training and employment from age 16, to 25 with SEND

Recent achievements

Some of our achievements towards our SEND strategy priorities:



1. Ensuring our Local Offer is Inclusive

We offer a range of inclusive services which can be found on our [Local Offer](#) website.

We have made excellent progress on good emotional well-being, the whole system model on speech-language communication needs (SLCN) and our amazing parent champions.

[The Bi-Borough Emotional Wellbeing and Mental Health Plan 2022-24](#) outlines the strategic direction of the local authority, the local ICB and its partners in delivering services.



2. Intervening Early

Our four Family hubs (Holmfield House, Clare Gardens, Cheyne and St Cuthberts with St Matthias) enable effective multi-agency practice to offer multiple opportunities to identify need and provide an integrated response across that age span.

Integrated Neighbourhood Teams are in place, building on the existing integrated structures within our Family Hubs to provide joint working between local authority and health services for children and young people.



3. Preparation for Adulthood (PFA) at Every Stage

We work closely with other council departments such as the Economic Development Team, local employers, and our local colleges to provide an excellent offer for post-16 education and employment pathways, including our council-led Supported Internship Programme.

We work closely with our parent-carer forum to ensure there is a smooth transition for children and young people to adulthood.



4. Support for Parents and Carers

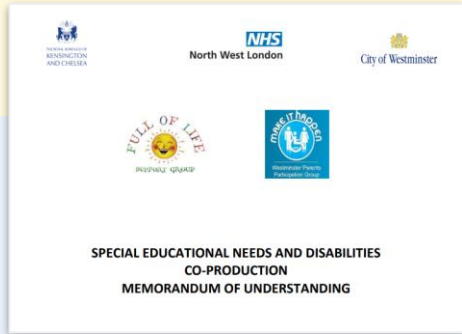
Our Local Offer Steering Group is co-chaired by parents, and we have representatives from our Parent-Carer forums attending our Board meetings and contributing to our decision-making processes.

We ensure that the health and wellbeing of parents is recognised alongside assessment for services, which includes the completion of a carers assessment.

The ICB commission Parent Carer support for those who have a young person under 25 with SEND, and who are struggling with their child's diagnosis.

Co-Production

Children, young people and their families participate in decision-making about their individual plans and support



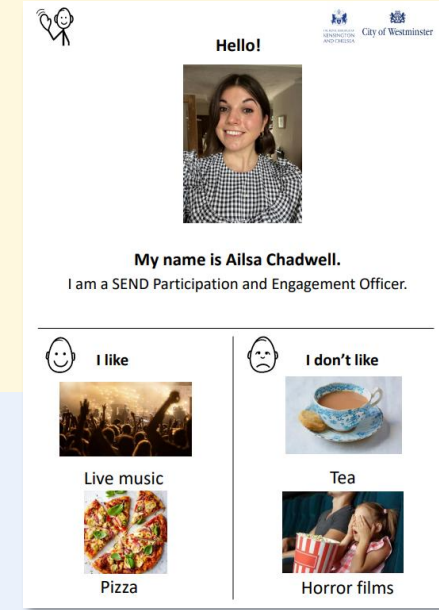
Co-Production MoU

We have a Co-production Memorandum of Understanding, which has been signed off by our SEND Executive Partnership Board, representing the Local Authority, the Integrated Care Board (ICB), partners and parent groups.



Full of Life

[Full of Life](#) is Kensington and Chelsea's Parent Carer Forum. They are involved in all aspects of strategic work, from joining interview panels for SEND service staff appointments to training officers. 'Full of Life' has trained a Local Offer Parent Champion, who jointly leads our SEND Local Offer Steering Group delivers training and works with individual families.



SEND Participation Officer

Supporting local professionals to more effectively engage with young people with SEND, delivering a range of events to capture the views of children and young people with SEND and implementing reporting that ensure that the views of children and young people with SEND are communicated to Senior Leaders across the Local Area.

Key areas that are working well

- Our local Bi-borough **Place Based Partnership** has agreed priorities for children and young people for Speech Language and Communication Needs, Mental Health, Autism, Occupational Therapy, Asthma Friendly Schools and Early Years. In addition, as part of the local development of **Integrated Neighbourhood Teams**, there is a focus on the development of Family Hubs and the links to wider health provision for 0-5s and beyond.
- **Children in the area have their needs identified early and plans to enable them to thrive are made at pace.** 100% of Education Health and Care Plans were produced within 20 weeks, meeting statutory timescales in 2024, well above national averages. Our **EHCP quality assurance framework** is driving up the quality of plans. The oversight and drive provided by senior leaders has led to significant improvements in case management and data quality.
- **School leaders have access to support services for children and young people with SEND to ensure needs are met effectively.** Schools and nursery settings have access to a wide range of networks and professionals to support them in identifying and meeting needs, including Educational Psychology, specialist teachers, accredited SEND courses, SENCO forums and the Education Partnership Board which looks at disproportionality and equality, diversity and inclusion.
- **We have placed significant focus on developing our offer for children and young people with SEND needs below the threshold for an Education, Health and Care Plan.** We have developed successful whole system approaches for speech, language and communication needs (SLCN), mental health and autism.

- **Leaders have agreed thresholds for children and young people with SEND to access statutory support from social care** which are appropriate, well understood and work well. When children and young people and are no longer in need of this help, targeted support continues. Families will be signposted to take up support through the family hubs. They will have access to universal and targeted offer depending on family circumstances and needs and are guided through the process.
- **55% of children and young people with an EHCP in Kensington Chelsea have their needs met in mainstream provision**, compared with the London average of 51% and national average of 44%, while the percentage of students at SEN Support and with an EHCP who achieve the expected standard at Key Stage 2 and Key Stage 4 is above national and inner London averages (equal to inner London average for EHCP cohort at Key Stage 2).
- **Our [Bi-borough Inclusion Service](#), comprising advisory teachers for autism and specialist teachers for sensory impairment, and occupational therapists, plays a key part in our workforce development to support effective inclusion in schools and settings.** We continue to develop and enhance our workforce and to support all educators to have the capacity to intervene earlier and the skills to provide the targeted and additional specialist help that may be needed.

Key areas that are working well

- Our [Alternative Provision Commissioning Plan](#) outlines how we work in partnership through the Joint Commissioning Board and other forums to ensure the health needs of children in alternative provision are met. This has resulted in effective joint working practices that ensure children are referred to the most appropriate service for their needs/presentation, to reduce risk of suspension and exclusion.
- Our **Designated Social Care Officer (DSCO)** is connecting our teams across SEN, Virtual School, Social Care, School Standards and Short Breaks to ensure our approach for children and young people with SEND is consistent, meaning that our local processes can be streamlined and our children and young people living outside of the borough, including those who are looked after, can be well supported. In our recent ILACS inspection, Ofsted inspectors commented that “relationships with partners are well embedded. The DSCO role provides a secure relationship between services”.
- **There is a holistic approach to identifying and meeting needs within the Youth Justice Service** which includes input from Speech and Language Therapy, Educational Psychology and CAMHS. All children worked with have a screening with CAMHS specialist staff including checks which have identified children with neurodiversity.

- Quarterly meetings between the **School Health Service, Health Visiting Services, the commissioner of these services and the Designated Clinical Officer** are held to discuss pathways and troubleshoot any issues. This ensures that these universal services have deeper understanding of the SEND landscape and able to identify needs earlier and signpost to the most appropriate service for support at the earliest opportunity.
- **Whole system Emotional Wellbeing and Mental Health Services** are jointly commissioned, promoted and supported through the all-agency Emotional Wellbeing Partnership Group. Our partners carry out work to ensure appropriate step up and down of services specifically between youth mental health support workers, mental health support teams in schools and CAMHS. More information can be found in the strategy → [The Bi-Borough Emotional Wellbeing and Mental Health Plan 2025-28](#)

Key area of development

- Leaders recognise the **need to ensure that we are not complacent**, authentically holding ourselves and each other to account. The lived experiences of our parent carer forums informs our strategic board so that we continue to deliver high quality outcomes for children and young people in Kensington and Chelsea.

SEND
Local Offer



A Fairer Future ‘Someone on my side’ Our SEND Strategy

Our commitment to a “Fairer Future” means ensuring that every child and young person with SEND has someone on their side, supporting them to have a happy childhood, achieve their dreams and live fulfilled adult lives.

The new SEND Strategy 2025–2030 sets out our commitment to creating an inclusive, supportive environment for children and young people with special educational needs and disabilities (SEND) to thrive.

It focuses on early intervention, high-quality education, integrated health and social care, and preparing young people for adulthood. Developed through extensive partnership and co-production, the strategy aims to deliver fairness, improve outcomes, and ensure every child feels empowered and included.



Key areas that are working well

- Leaders across education, health and social care ensure that, where necessary, the annual review process results in amended Education Health and Care plans that **reflect the children and young people's current needs, aspirations and objectives**. Completion timelines for issuing amended Education, Health and Care Plans have **started to improve**.
- **The SEN Service continues to offer 'next steps' meetings to parents when an EHC needs assessment has been declined** and schools are welcome to attend these with parental permission. There is a high take up of the next steps meeting and positive feedback has been received from parents, schools and parental support groups.
- The rollout of the **WellComm assessment and Progression tools** in local schools and early years settings is having a direct impact on the way they identify speech and language development needs and support individual children and their families prior to the need for an Education Health and Care Plan. This means that children have access to earlier interventions, and they are more school ready before moving to the next phase in education.
- Children and young people continue to be seen quickly for initial assessments by **physiotherapy**. The average wait times during Q2 were 3.7 weeks at ChelWest and 3.1 weeks at Imperial.

- Our **Dynamic Support Register** for children and young people with autism or/and learning disabilities maintains strong relationships between partners reduce escalation of crises and the risk of admission to hospital.
- There are **strong arrangements in place for the identification of SEND in children who are electively home-educated**. We have produced an Information Guide for Home Educators which includes details of the SEND services and the SEND Local Offer. Educational Psychologists visit and review the progress of home-educated children with EHC Plans. → [Information Guide for Home Educators](#)
- Through our Healthy Child Programme, the service ensures that expectant mothers receive the **mandated ante natal contact**, with 100% being contacted and seen when expected, ensuring early identification of any emerging needs. Universal antenatal contacts are offered online via the Preparation Recovery, Inspiration and Support during Motherhood (PRISM). PRISM an online integrated antenatal class from 28 weeks' gestation.
- All nurseries have a **link Community Nursery Nurse** from a Health Visitor team in order to undertake integrated 2-2.5-year development assessments.

Key areas that are working well

- Specialist **SEND Health Visitor** is in post and delivers supervision and teaching to Health Visitor teams and partners. They are also aligned to the local authority and partner providers and ensure a robust, seamless pathway is in place to support children and their families.
 - The **Health Visiting 'duty function'** has been aligned to the 0-5 Single Point of Access which has led to an increase in clinical capacity and ensure families and professionals have direct access to a health visitor.
 - With the **co-location of Health Visiting and Early Help teams**, if any concerns are raised at the 2-2.5 development assessment by the Health Visiting Service, they can liaise directly with the Early Help Service and discuss in clinical supervision or case discussions.
 - Saturday clinics for 2.5yr checks have been introduced for parents to allow flexibility. There were initiated in Q1 2024/25 to **improve accessibility for working parents to take up the 2-2.5 development checks**. In Q2 25/26, the uptake has exceeded our target of 70%, with an overall uptake of 76%.
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- The **School Health Service (School Nursing)** offers universal contact to all children starting school, providing an opportunity to identify needs. The service undertakes screening for hearing and vision for all children in line with the National screening guidelines. It works in a variety of settings in addition to schools including family hubs, youth clubs and community and faith venues. The school health team includes specialists in mental health, safeguarding and relationship, health and sex education and works closely with the local Healthy Schools Partnership and Special Schools.

- **Our Early Years Speech and Language Therapy service have seen 95.7% and 94.2% of children and young people for initial assessment within 12 weeks of referral in Q1 and Q2, respectively in 25-26.** The Early Years Speech and Language Therapy service has continued offering **drop-in assessments in Family Hubs and face-to-face groups in community settings** as well as online parent group sessions. This has resulted in more children being seen sooner for follow-up support.
 - **Children waiting for an assessment** at the child development service who are known to both Music Therapy and Early Years SLT are invited to jointly run groups, to ensure support is provided at the earliest possible opportunity.
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- **Family Hubs are represented within the developing Integrated Neighbourhood Teams across Westminster and Kensington and Chelsea**, building on the existing integrated structures within the Family Hubs to demonstrate effective joint working for children and young people. The **Speech, Language and Communication and Midwifery Teams are now co-located as part of the integrated management team**. Our Family Hubs interface with our Primary Care / Child Health Hubs and our Children with Disabilities Centres to ensure that multidisciplinary teams collaborate around families.

Highlight



Integrated Neighbourhood Teams

Local partners have been working together to develop a multi-disciplinary Integrated Neighbourhood Team that collaborates around the needs of families.

For the majority of children coordination will take place within our Family Hubs, and if there are complex socio-economic needs they will be picked up by Family Hub multi-disciplinary team meeting.

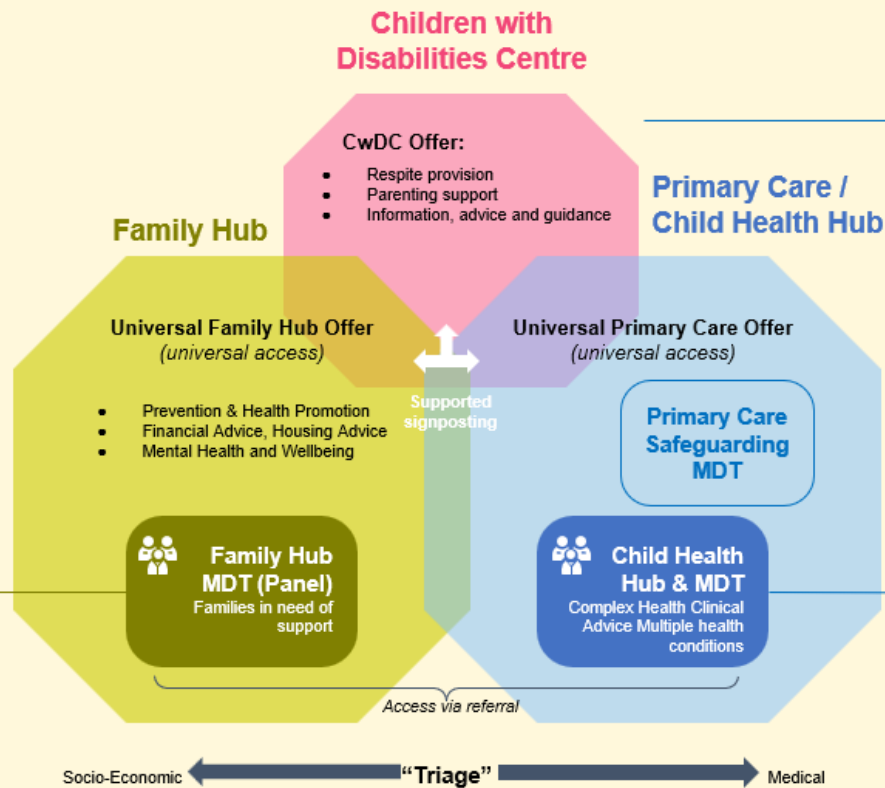
However, for those with more complex health issues, a referral to GP Practices and the Child Health Hub multi-disciplinary teams is recommended.

Multi-disciplinary team members are able to refer to each other. The specialist provision for Children with Disabilities works closely with both the other hubs.

Family Hubs:
Integrated service located in the most deprived areas, supporting families with a wide range of needs. Operated via Local Authorities

FH MDT membership:

- Family Hub leads
- Health Visitors
- 0-5 CAMHS service
- 0-18 CAMHS Early Intervention Service
- Family Navigators
- VCS representatives
- LA Early Help and social care colleagues
- SLCN colleagues
- Maternity colleagues
- Perinatal MH



Children with Disabilities Centres and Family Help Service:
A multi-agency service that includes Family Help Practitioners, Social Workers, Occupational Therapists and Systemic clinicians.

Child Health Hubs:
Specialist clinics and MDTs, focusing on complex child health issues, serving GP practices within a defined PCN area. Operated by NHS.

CHH MDT membership:

- Acute Paediatrician
- GP(s)
- PCN manager
- Allied Health Professionals
- Health Visitors / School Nurses
- LA Early Help and social care colleagues
- CYP MH workers
- Family Navigators / ARRS link workers
- Family Hub Leads

Key areas that are working well

- The Council commissions Central London Community Healthcare NHS Trust (CLCH) to deliver statutory Speech and Language Therapy (SALT) Education Services in Kensington and Chelsea. There are **strong outcomes for children and young people receiving SALT support**, the percentage of children and young people who meet their therapy goals was 95.2% in Q1 and 100% in Q2 2025/26.

- **Parent/Carer SLCN Champions** have been trained to support families to navigate and make use of online resources on our Communication Hub following GP assessment. In Q2 they have worked with the SLT team to produce some pre-recorded webinars for parents. → [Communications Hub](#)

- **For children and young people with sensory impairments, our specialist teachers provide direct support and equipment from birth to 25 years, often within days of diagnosis.** This is largely due to the very good working relationship with the local hospital trusts in the London area and further strengthened by the Children Hearing Services Working Group and the Special Educational Needs Joint Initiative for Vision Impairment.

- We are actively planning for the **implementation of the Best Start in Life programme**, which aims to ensure 75% of five-year-olds reach a good level of development by 2028. Our strategy for this, due to be live from March 2026, will focus on workforce development and delivery of effective interventions across our Family Hubs and local Early Years Provision, as well as ensuring we have a designated SEND Officer based within our Family Hubs to support this.

- Kensington and Chelsea Council have **successfully delivered DBV workstreams** as part of the deficit management plan.



- **All parents of children and young people on the waiting list for autism diagnosis** at our Child Development Services are signposted to appropriate internally and externally delivered services, which they can access while waiting, including our 'Support Well whilst Waiting' offer and the Bi-borough Inclusion Service who provide advice to schools for children awaiting assessment. → **Child Development Service Waiting Well Offer**
- We have processes to identify families with the most need while waiting. Woodfield Road Child Development Service have finalised Local Information Leaflets to promote the offer.
- Cheyne Child Development Service deliver extra **post-diagnostic 'Understanding Autism'** groups to ensure all those who receive a diagnosis through diagnostic outsourcing receive local support.

- Following requests from school leaders regarding the need for a unified approach to supporting autistic children, we have focussed on delivering **SCERTS training across Education, Health and Social Care Services**. Two dedicated training days were delivered with c.500 attendees per session, which have been accompanied by access to an online teaching platform. Detailed implementation work is being delivered, including intensive work with a small group of settings from early years, school-age and post-16 phases, from which the outcomes are being recorded, and learning being shared. → **SEND Local Offer - SCERTS**

- In 24/25, there was an uptake of **84% of annual health checks for young people (14-25) on the Learning Disability Register** (against a target of 75%), for those registered with a Central London GP.
- Work continues to be undertaken to ensure that 14–25-year-olds with learning disabilities are correctly identified and the GP notified through validation of the registers.
- Specific support is available from the Learning Disabilities Health Service on a practice and network level where there are challenges in the delivery of both the quantity and quality of annual health checks for people with learning disabilities.

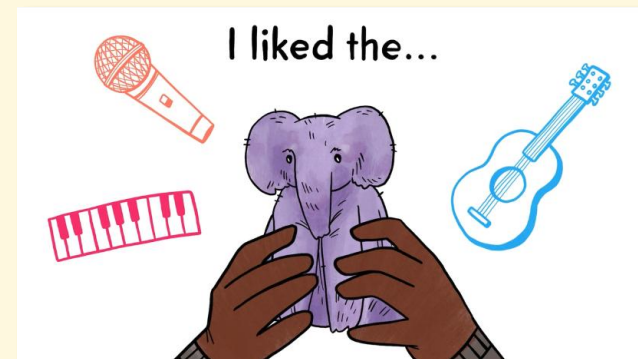




Unconditional Music Making: Alternative Provision Pilot

In collaboration with The O2, the tri-borough music hub ran a music education pilot programme in four Alternative Provision settings in West London earlier this year.

The project delivered seven weeks of sessions in each setting, engaging with young people through personalised, flexible, and responsive music-making experiences.



→ [Please click here for a video showcasing the project](#)

Key findings from the pilot indicate that music sessions in AP settings:

- Provide valuable opportunities for self-expression and emotional regulation
- Foster improved self-esteem and confidence among participants
- Create spaces for positive relationship-building and social skills development
- Offer meaningful engagement for students who struggle with conventional classroom structures
- Support the development of creative skills and musical abilities in accessible formats

Feedback forms from sessions found high rates of observed engagement in creative musical activities (92% of sessions), improved self-expression (94% of sessions), and enhanced social interaction between participants (84% of sessions).

Key areas that are working well

- **Mental Health Support Teams** are linked with 29 Kensington and Chelsea Schools. They deliver evidence-based CBT-informed interventions for mild-moderate mental health difficulties, 1:1 parenting support in primary schools for children with common behaviour challenges or anxiety (5-11 years old), 1:1 support for young people in secondary schools and colleges with low mood or anxiety (11-18 years old).
 - Screening appointments are scheduled within 2 weeks of referral being received and up to 8 weekly sessions of 1:1 support provided.
 - The teams work closely with Designated Mental Health Leads to ensure the service is tailored to each school's need including identifying referrals, planning workshops and signposting to other agencies when required.
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- The **16-25 mental healthcare model** supports vulnerable children and young people who are having trouble transitioning to adult services or accessing the right services, to ensure they are supported by the most appropriate services to meet their needs.

- A **mapping document of mental health services**, structured around the NHS England '[Thrive Model](#)', has been developed by multi-agency partners for use by education settings and practitioners, this will be used to facilitate navigation around the emotional wellbeing and mental health section on the SEND Local Offer.
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- A multi-disciplinary working group led by Educational and Child Psychologists (EP) developed evidence-based interventions for **Emotionally Based School Non-Attendance** and the EP service continues to lead on bespoke training packages around this for schools. A support group for parents during 2024-2025 was positively evaluated by participants and has led to a clear delivery programme that can be bespoke training packages that can be offered to parents/carers at a school level.
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- The **CAMHS SEND newsletter** is distributed monthly, providing updates, resources and guidance to support children and young people with SEND and their families. It improves access to services, and strengthens connections between families, professionals, and support networks

Key areas that are working well

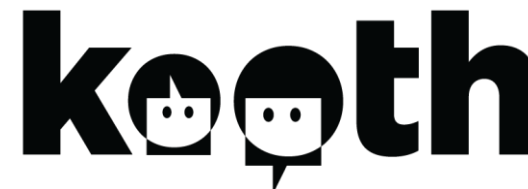
- CAMHS are working to **improve the percentage of referral to treatment delivered in under 4 weeks** by reviewing the signposting offer which includes information and advice, brief intervention, psychoeducation for children and young people and parents/carers.

- For specialist CAMHS 73.1% of children and young people received treatment within 18 weeks in Q1 and 80.5% in Q2.** Locally, we are working to a stretch target of four weeks for their first contact. 34.3% of children and young people had their first contact within four weeks in Q1 2025-26 and 44.3% in Q2.

- An easily accessible E-PEP is in place for all Looked After Children to ensure **strong information sharing between Looked After Children's Personal Education Plan (PEP) reviews and Education Health and Care reviews.**

- Our Quality Assurance framework is helping us **target improvements to EHC Plan outcomes and specificity as well as advice provided by CAMHS professionals** as part of Education, Health and Care needs assessments. Our DCO meets regularly with CAMHS SEND Leads to pick up on issues around EHC Plans and agree ways forward to resolve issues.

- Kooth, a digital offer to support children and young people's access to mental health support** has been successful in our local area for a number of years. This offer for 11-25-year-olds includes advice and support, individual counselling, peer support and moderated focus groups



133 (Q1)
109 (Q2)
Total Kooth logins

52 (Q1)
46 (Q2)
new registrations



Data highlights (Q1-Q2 25/26)



86% (Q1)
100% (Q2)
of users would recommend the service

159 (Q1)
170 (Q2)
used the messaging function



- **While waiting times are still too long for a formal diagnosis of autism**, at Cheyne, waiting times for both pre-school and school-age ASD assessments have reduced substantially following investment by NWL ICB in 2022/23. In contrast, waiting times at Woodfield Road, which are already shorter than those at Cheyne, have remained stable. Referrals for ASD assessments have also increased significantly. While waiting times have risen in response to this higher demand, they remain comparatively low. **To support children and young people while waiting**, we have co-produced a multi-disciplinary “Support While Waiting” offer, providing access to groups such as Happy Eaters, sleep and toileting support, EMBRACE family support, and pre-assessment workshops for preschool pathways. → [Support while waiting for assessment](#)
- The Designated Nurse for Looked After Children (LAC) is working with the Local Authority, Imperial College Healthcare NHS Trust and Chelsea and Westminster NHS Foundation Trust to continue to **lift performance for initial health assessments (IHAs)** for LAC to ensure they are completed within 20 days.
- Following the end of a contract for community referrals for **Ophthalmology** from Hounslow and Ealing, a decision was taken to transfer referrals to a range of acute providers in the inner cluster. This has resulted in longer waiting times. To mitigate clinical risk, the Ophthalmology Service screens and prioritises cases that are waiting. A steering group is in the process of being set up to develop a service specification for paediatrics across North West London.

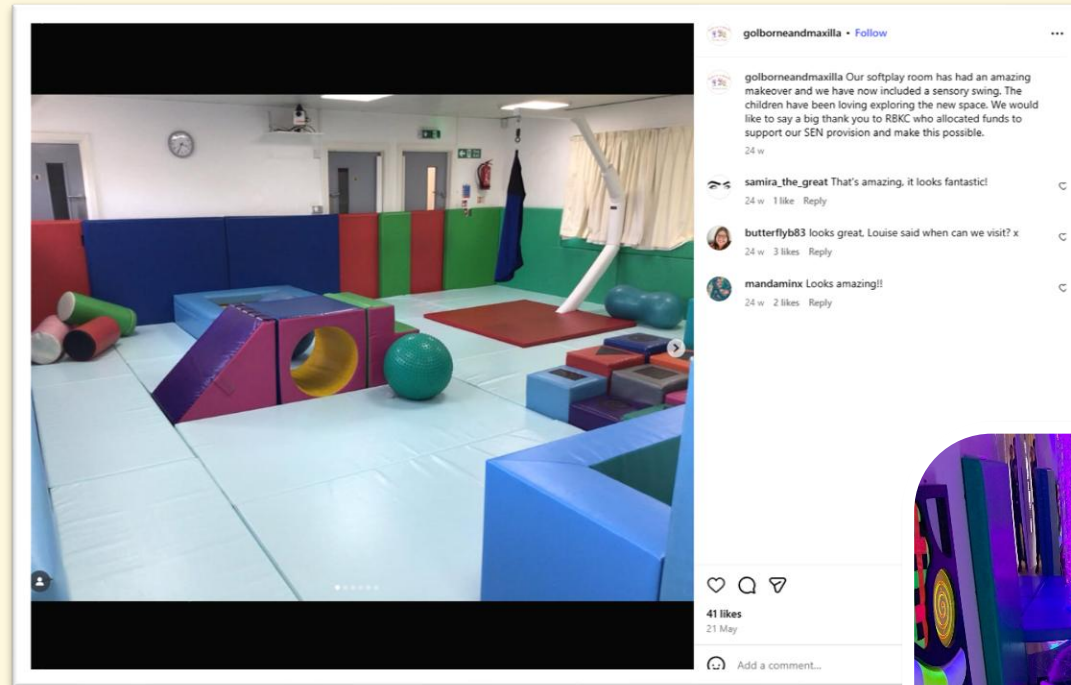
- Due to staffing gaps and rising demand, the percentage of **School Age Speech and Language Therapy EHCNA advice reports** completed in statutory timescales in Q1 was 42.1% and in Q2 was 47.8%. This is in comparison to 81.3% and 72.7% in the two quarters before. The Joint Commissioning Partnership is monitoring demand, capacity and timescales to drive improvement. We are aware that there is pressure on the service due to rising demand and we are working with the service to consider solutions. In the meantime, there is proactive communication with families, EHCNA slots are being proactively scheduled in therapist diaries and appointment planning is reviewed to re-schedule appointments not attended, in a timely manner within the 6 weeks timeframe whenever this possible. Furthermore, the LA has committed to funding additional posts for special school provision. Our Confident Communicators programme ensures earlier intervention for children with speech, language, and communication needs (SLCN) and should support a reduction in young children requiring statutory provision in the longer term.
- **Waiting times for audiology** have reduced after short-term funding was secured to reopen the Paediatric Audiology Clinic at Parkview Centre from February 2024. High-risk cases are triaged and prioritised. However, the clinic is heavily reliant on the availability of locums which has affected the ability of the clinic to run at full capacity. Longer term sustainability plans are being considered by the ICB including recommendations from the recent NHSE visit.



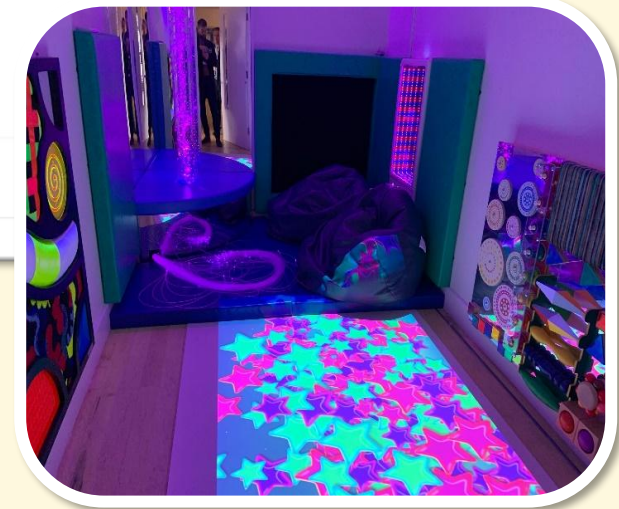
Improving and expanding provision with our High Needs Capital Allocation

We use our High Needs Capital Grant Allocation to ensure that all children and young people with SEND have access to good local provision which provide opportunities for positive outcomes

Following an analysis of our local need and discussions with our parent carer forum, we have agreed that our local priorities are to deliver better support for autistic pupils in mainstream schools and improved physical environments in special schools and additionally resourced provisions.



We have collaborated with a range of schools and settings to enhance their environments, enabling skilled staff to better support children and young people with diverse special educational needs. This includes improving sensory rooms and outdoor play spaces at Golborne and Maxilla Nursery, creating pod spaces for targeted SEN interventions at Bousfield and Park Walk Primary Schools, and developing sensory areas at Colville Primary to aid emotional regulation. At St Charles Primary, we have introduced a Sensory Room and inclusive outdoor play spaces, while Kensington Aldridge Academy has expanded its specialist post-16 provision.



→ Special Provision
Capital Fund Plan

- **Demand for places at Kensington and Chelsea’s first in-borough special school, purpose built for autistic pupils, Ormiston Kensington Queensmill (OKQ), has continued to increase** since opening with the number of places at 104 (from 80) and by establishing satellite classes hosted at a local school (Avondale Park Primary) with places for 24 primary children. It has been well received by families.

- Kensington and Chelsea now has **eight specialist SEN resourced provisions in mainstream schools**, delivering 151 places. This is equivalent to 22% of all local schools – the national average is 10%.

- **More than 55% of Kensington and Chelsea pupils attend mainstream schools**, well above the national average of 43.6% and above London 50.9%

- The High Needs Capital Grant has been used to create **new Resource Base provision for autistic children and young people** at:

- Ark Brunel Primary Academy
- Chelsea Academy
- Oxford Gardens Primary School
- Marlborough Primary School
- St Charles Sixth Form

- These provisions provide spaces for autistic pupils with an EHCP to receive specialist teaching while also remaining part of the community at mainstream primary / secondary schools.

- **Children’s Community Nurses expedite complex discharges into the community**, ensuring families and carers are empowered to care for the children and young people at home, linking them with appropriate support service. Eligible families are allocated a Kaleidoscope Nurse as part of the dedicated Palliative Care Team within the service, with homecare organised where needed.

- Our **SEND Inclusive Education Team (SENDIE Team)** is in place to strengthen collaboration between the Local Authority, schools and parents to ensure that all children thrive within their local school. The team of qualified teachers and High-Level Teaching Assistants support mainstream schools to embed and understand the provision outlined in EHCPs of children in Kensington and Chelsea, from Nursery to Year 11. Every school has a link SEND Inclusive Education Teacher who provides support to enhance classroom practice. The London Innovation and Improvement Alliance has recognised the work of the team, stating it “is clearly a well-regarded service that is making a meaningful difference in supporting inclusive education”.

- Despite a 26% vacancy rate for Speech and Language Therapists in Children’s Services across London, **EHCNA and EHCP delivery is prioritised** through recruitment, use of agency staff, and proactive service management, with early signs of recovery and ongoing partnership review to address rising demand.

- After listening to feedback from families and staff about how to strengthen our services for children and young people with disabilities, we have redesigned our offer, launching a **Bi-Borough Children with Disabilities Family Help Service**. This brings together our Disabled Children's Teams and the Short Breaks Service as one integrated service. This will provide opportunities for joint working between Practitioners and Social Workers, allowing for smooth transitions where needs change, and allow us to strengthen our inclusion offer to support children to access mainstream services, working alongside partners to ensure every child has the opportunity to live as independently as possible.
- Across Westminster there are **four monthly Paediatrician led community multi-disciplinary meetings** for GPs and health and care professionals to discuss complex patients living in Kensington and Chelsea. These multi-disciplinary discussions focus on complex health issues and how best to manage the children and young people in the community, using the expertise of health and care staff.
- The **Music Therapy service at Cheyne Child Development Service** provide targeted groups for pre-school autistic children, to support experiences of peer interaction in preparation for starting reception. Children waiting for an assessment at the child development service who are known to both Music Therapy and Early Years Speech and Language Therapy are invited to jointly run groups, to ensure support is provided at the earliest possible opportunity.

- We have launched a new Bi-Borough speech and language programme in schools for 4- to 6-year-olds to support earlier intervention for children with speech, language, and communication needs (SLCN) called **Confident Communicators**. This pilot programme offers bespoke support packages for up to six terms, including a combination of direct speech and language therapy, specialist assessments, goal setting and training for professionals and parents.
- Our All-age Autism Partnership has led a mapping exercise to collate information on **local services and settings that are confident in supporting children and young people with social communication needs or autism**, the majority of which can be accessed without a formal diagnosis being in place. This has been made available under helpful categories on the Autism Zone of the SEND Local Offer. → [Finding Support for Autistic Children and Young People](#)
- **Our SEND Transport Offer is highly thought of by local families.** The Home to School Transport provider market has become smaller in recent years and existing providers are experiencing ongoing recruitment challenges which are impacting a minority of families with increased lead times to set up transport for new users. To mitigate any difficulties for families we are working closely with our providers, ensuring there is effective and timely communication to parents/carers as well as promoting a wide range of options including our successful offer of independent travel training and personal transport budgets.

Key areas of development

- Early Help workers linked with specific schools are undertaking targeted case work with families **to continually improve the attendance of children and young people at SEN Support Level**. A Multi-agency group has been established to address the issue of Traveller children not returning to school, which has resulted in the majority of children returning.
- Following investment in **Occupational Therapy service transformation**, a model of improved universal, targeted and specialist support was finalised in March 2025. This is currently being implemented, due for completion by March 2026. However, due to the increasing demand into the system, with particular challenge from number of EHCNA requests received, there is an expectation of continued deployment following the end of the transformation programme. An in-depth analysis of the trends observed in the data, impact on the transformation, and mitigating actions to be proposed, is currently being undertaken.
- We recognise that it can be challenging to find appropriate educational placements for **children and young people with SEND who need to be placed outside of the borough at short notice due to Social Care arrangements**. Our Designated Social Care Officer plays a crucial role – liaising between our SEN Service, Social Care Teams and the relevant officers from receiving boroughs. We ensure that a tuition offer is available to ensure continuity of education while placements are being finalised, and we are exploring how we can arrange out of borough placements that increasingly consider the available specialist educational provision alongside the child or young person's social care needs.

- Growth in EHCPs has led to larger caseloads and challenges around **Annual Review timescales**. Whilst work to prioritise pupils in phase transfer means that we are able to meet those statutory timescales, recruitment of additional staffing has been agreed to reduce case load sizes and the risk of delay.
- For **children at risk of exclusion or suspension**, our Vulnerable Children's Collaborative (VCC) brings together multi-agency professionals to support children and young people to access education. The VCC is an established forum with partners from across the system in attendance including Early Help who support children if attendance falls below 90%.
- Whilst we know that most children and young people are seen in a timely way when referred to the **Wheelchair services**, feedback indicates delays in repairs and adjustments are impacting some children and young people access to education or the community. The ICB is carrying out a deep dive quality review and is in the process of setting up a clinical quality review group.
- The ICB has a centralised **Children's Continuing Care Team** and a centralised Complex Care Team covering all eight boroughs in Northwest London. Some challenges relating to staffing have been reported, which have impacted access to Continuing Care support. Actions have been taken forward to mitigate this risk, to ensure families have a single point of contact and there is a central resource to carry out new assessments and to manage court of protection and other legal processes.

- **Educational outcomes** for children with SEN in 2024/25 show that at both primary and secondary phase, their achievements are well above national comparators and that the attainment gaps are smaller.
- **Early Years Foundation Stage (Good level of development)**
 - **SEN Support: 30.7% of children achieved a good level of development**, compared with 24.9% nationally.
 - **EHCP: 8.3% of children achieved a good level of development**, compared with 3.8% nationally.
- **Key Stage 2 (Expected standard in reading, writing and maths)**
 - **SEN Support: 55% of pupils achieved expected standards**, compared with 28% nationally.
 - **EHCP: 14% of pupils achieved expected standards**, compared with 9% nationally.
- **Key Stage 4 (English and Mathematics, Grade 9-5)**
 - **SEN Support: 40.4% of students achieved a grade 9-5**, compared with the national average of 22.3%.
 - **EHCP: 24.5% of students achieved grade 9-5**, compared with the national average of 7.5%.

- We have a dedicated officer to develop a range of initiatives to improve the pathways to employment for young people with SEND, including a local **Supported Internship offer that we deliver in partnership with Morley College**, for which the Council is the lead employer.
- Through our **Supported Employment Forum**, we are working with local employers to increase accessible employment opportunities available in our local area and with the third sector to increase the availability of volunteering opportunities. Recent successes include our SEND Careers Programme Pilot, increased volunteering opportunities for students at local special schools and the development of resources to support careers information, advice and guidance for young people with SEND. → [Pathways to Employment](#)
- There is a **multi-agency referral pathway for young people with learning disabilities to the Adult Learning Disability health team**. Referrals are accepted from the age of 16 with older young people prioritised. Information is shared at weekly referral meetings and concerns, risks and reflections are discussed. There are good links between the Adult Autism Diagnostic service and Children's Services to support timely and informed autism diagnostic assessments.

Key areas that are working well

- There are **well-established NHS led pathways supporting young people aged 16–25 as they transition into adulthood**, including the Young Adult Mental Health Pathway, which ensures coordinated care through strong multi-agency partnerships and regular oversight meetings. Initiatives like CNWL’s co-produced “Discover Together” courses promote personal development, while paediatric and adult Learning Disability Physio teams collaborate closely with schools and families to plan ahead, ensuring continuity of care, specialist equipment, and staff training for a smooth transition. **Central London Adult Autism Service have strong links with Adult Social Care** and there is frequently joint work with the Adult Autism Lead on complex cases.
- Children and young people have created a **new Transition Booklet** template for schools to use to support young people with SEND in the move from primary to secondary school. → [Transition Booklet](#)
- The **Centre for ADHD and Autism Support (CAAS)** has been commissioned by NWL NHS to provide individual targeted support for ADHD/autistic children and young people. The offer includes sleep support, specialist workshops and courses to improve understanding of the conditions, and how parents can best support their children. CAAS also offers a wide range of group-based support to support young people to understand their diagnosis and build strategies to thrive. In 2024/25 94% of 12–25-year-olds who were supported by the service saw improvements in their wellbeing. 85% stated that they’d seen reduced social isolation and 84% that they’d improved in confidence.



Assessment of Kensington and Chelsea Adult Social Care

– feedback on transitions

“Systems, processes and strong partnership working ensured people moved smoothly between services and feedback about pathways was consistently positive. Partnership working was collaborative and cohesive at a strategic level and on the front line. Where young people transitioned to adulthood there was a planned approach which started at an early stage, and ensured staff could prepare young people for the next milestone in their lives.

“When young people turned 18 there was a clear pathway from children’s to adult’s services. We received positive feedback about transition from one person, whose relative said the process was smooth and they were kept informed about what to expect. Planning started when young people were 13 or 14 and staff described good joint work with colleagues in children’s services and health partners to effectively plan and support young people and families to become familiar with adult services.

“Community and health partners said this pathway worked well, with young people and families receiving timely assessment and support with finding the right services in adulthood. There was a team who led on transition, and they gave multiple examples of working with people and families to prepare for adulthood. Staff were allocated cases from the age of 13 and worked closely with partners in education, children’s services and health to ensure a holistic approach.”

- Parents have told us that **transition to adult services can be challenging**. We know that some young people with SEND who receive support from Children's Services will not be eligible for Adult Social Care provision, while NHS Continuing Healthcare is subject to a separate assessment and delivery process. **We continue to work towards ensuring that signposting to support from other community organisations is robust and that families are supported in their transition.**
- Following the publication of the **Adult Social Care Learning Disability Plan** – 'Changing Lives' – we are working closely with our colleagues in Adult Social Care Services, Continuing Care, Mental health Services, the LD Health Team and Full of Life to ensure we have early transition planning to prevent any gap in service and to consider the young person's well-being and their future support need. → [Learning Disability Plan for Adults 2023 - 2026](#)
- Correct data and information to support learning disability transition is an area that requires improvement between all organisations. We are reviewing our **'Transition Tracking Meetings'** to broaden their scope and ensure learning disability and all other pathways for young people are identified. A data sharing agreement has been drawn up between NHS and LA, to share transitions data more effectively and a shared 'app' for transitions tracking has been built and is currently being tested.



SEND
Local Offer









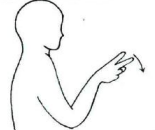
THE BOROUGH OF KENSINGTON AND CHELSEA

Preparing for adulthood with the St Quintin Centre cinema

The Council has developed a small cinema in a dedicated outdoor building at the north venue of our Disabled Children's Centre, St Quintin.

The cinema, named the Qube, offers a controlled environment that recreates the cinema experience for those with behavioural, sensory, and processing needs.

By adjusting sound, lighting, and temperature, we help regulate sensory input while providing a space for children to engage with sensory toys and seating options.

St Qube Cinema Questionnaire	
Please answer: Yes/No ✓✗	
1- Did you enjoy your walk to St Qube?	 ✓
2- Did you like St Qube Cinema/Big Screen?	 ✓
3- were the chairs comfortable?	 ✓
Did you like the Tuck shop?	 ✗
did you buy snacks from the tuck shop?	 ✗
Did you use a cinema ticket?	 ✓
7- Would you like to go St Qube cinema again?	 ✓



This group activity promotes social skills, peer interaction, and understanding of routines found in real cinema settings.

Through our box office, children learn about money, buying tickets, and enjoying snacks, fostering real-world awareness.

Feedback from parents shows progress, with children now able to sit through longer portions of films, paving the way for enjoyable family outings.

Key areas that are working well

- Our **Bi-borough Alternative Provision Commissioning Plan (2024-2027)** was developed through a partnership of education, health and social care providers. Alternative provision used across the Bi-borough is **rated good or outstanding by Ofsted**; there is no use of unregistered provision. → [Bi-borough Alternative Provision Commissioning Plan](#)
- Our **Bi-borough School Inclusion Strategy (2022 – 2027)** focusses on improving outcomes for children who are at risk of exclusion. → [Bi-Borough School Inclusion Strategy 2022](#)
- **Effective multi-agency working** is a key part of improving attendance, attainment and transition outcomes for children in AP. Input at Latimer includes – **Speech and Language Therapy, Education Psychology, Mental Health 'Be Kind to your Mind', Early Help and Community Safety** practitioners on site and through Team around the School meetings.
- **Outcomes** from alternative provision in Kensington and Chelsea are improving. In 2024/25, **five children reintegrated to mainstream from Latimer** – one in KS3, three in year 10 and one in year 11. In the same year, **52% of children achieved any one GCSE** and there continues to be a strong focus on English and maths functional skills. Latimer is also working closely with the Grenfell Education Hub to continue to improve performance, expectations and achievement at the school. In 2023/24, **68.7% of young people who had attended Latimer were in EET in year 13** (compared with 59% nationally).

Key areas of development

- We are establishing formal commissioning arrangements for the procurement of tuition.
- Primary schools have highlighted **an increase in children with challenging behaviour**. Referrals for support from Alternative Provision have increased and we are working to broaden our offer of behaviour outreach and short-term placements. A **new bi-borough primary alternative provision** is being developed at Avondale Primary School, to support children with **complex Autism and social, emotional and mental health needs** in the local area. The provision will work closely with the wider Ormiston primary outreach provision to facilitate mainstream placements where possible.
- Funding has been approved to **embed a specialist CAMHS clinician** into Latimer to identify and effectively triage mental health needs as well as provide support to staff. Implementation is planned from January 2026.
- **Our NHS Occupational Therapy service is currently looking at how it can strengthen its links to Alternative Provision**. When the new whole system model is in place, a new Pathway to strengthen OT links to Alternative Provision will be developed.



To meet the demand for alternative provision for EHCP children with complex social, emotional and mental health needs, a Social, Emotional, Mental Health (SEMH) provision, Freston Junction, has opened, offering 12 places.

The provision is a collaborative effort supported by Ormiston Academies Trust (OAT) and the Council.

Its provision provides high-quality, in-borough provision and has supported some of our most vulnerable and isolated children to return to education in a school setting.



The provision offers a holistic approach to education, focusing on:

- Academic achievement
- Social skills development
- Preparation for future steps

It is housed on the newly refurbished ground floor of Ormiston Latimer Academy – a warm, welcoming environment that has been designed to feel like a home away from home.

With quiet areas, a full kitchen, classrooms and an outdoor play space to create a calm and nurturing atmosphere that encourages engagement and communication

The setting ensures personalised support through a structured five-day induction process, individual assessments and the development of Individual Education Plans, while an integrated therapeutic offer from specialised clinicians complements our curriculum, ensuring all pupils' needs are met

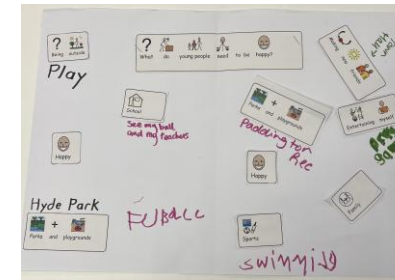
Key areas that are working well

- **All for Youth** is a regular SEND publication produced by young people with SEND for young people with SEND to share their experiences as well as news about the local offer. There is a small group of young people in the **News Crew** who contribute regularly. However, multiple young people are involved every month through their youth clubs, schools and the Tresham Disabled Children’s Centre. This has been developed and is coordinated through our dedicated post that focusses on amplifying the voices of children and young people with SEND, to inform our service delivery and development. → [All for Youth Newsletter](#)

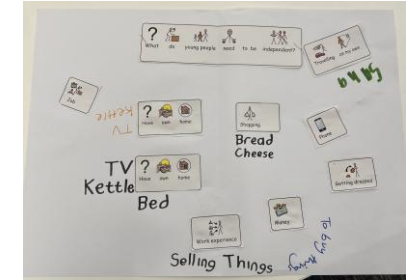
- Building on our work to amplify the voice of children and young people with SEND and reflecting on the challenge to **hear the voices of those with more complex needs**, our SEND Children and Young People’s Engagement Officer has brought together the members of the School Councils from our local special schools – a group they have called **“Equal Voices”**. The group meets every month to talk about their experiences, give their feedback and inform our plans for our local offer. They also recently joined a visit to the Houses of Parliament, where they were able to ask questions of a local MP.

- Children and Young People with SEND have recently taken part in a range of **assisted and accessible conversations** to support us with the development of our offer, including providing information about our local youth clubs and what they would like to see in the future, supporting us with updating our SEND Local Offer pages that focus on Preparing for Adulthood and telling us about what is needed for them to be happy, healthy and independent.

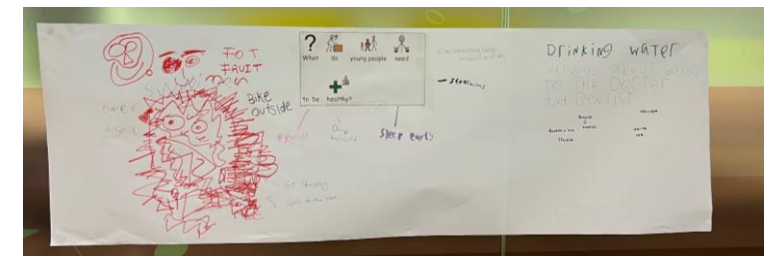
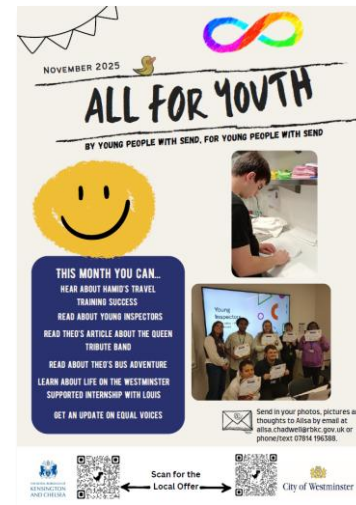
- Children and young people have given us feedback about how their views are collected in **Section A ‘All About Me’** of the Education, Health and Care Plan (EHCP). We discussed the Section A form and how it can be changed and improved to help more young people contribute to their own EHCP. 30 young people have been involved in this conversation.



Happy



Independent



Healthy