

Children and Young People with Special Educational Needs and Disabilities (SEND) 2025 data update

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AI: Some information in our JSNA products may have been summarised with the help of artificial intelligence tools. Everything is carefully checked by our team to make sure it's accurate.

Acronyms/key terms

- **SEND (Special Educational Needs and Disabilities):** A term used when a child or young person has learning difficulties or disabilities that make it harder for them to learn than most of their peers
- **EHC plan (Education, Health and Care plan):** A legally binding document for children and young people up to age 25 who need more support than SEN support can provide. It sets out the education, health and social care support required
- **EHC needs assessment:** The process carried out by local authorities to decide whether a child or young person requires an EHC plan
- **SEN support:** Help given in schools and early years settings for children with SEND who do not have an EHC plan. Support is usually provided from the school's own resources
- **Primary type of need:** The main area of difficulty or disability identified for a child or young person (e.g. speech, language and communication needs, autism, social/emotional/mental health).
- **Statistical neighbours (CSSNBT):** A group of local authorities that are most similar to Suffolk in terms of demographic and socio-economic characteristics, as defined by the Children's Services Statistical Neighbour Benchmarking Tool. They are used to provide fairer comparisons than England averages alone
- **Timeliness:** A measure of how quickly EHC plans are issued. National regulations set a 20-week deadline from the request for assessment to the final plan (excluding permitted exceptions)

JSNA-on-a-page summary

Since the Suffolk 2025 SEND needs assessment was published, and as of school census day:

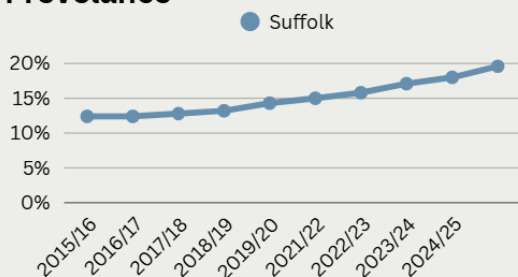
- **EHC plans:** The number as of school census day in Suffolk's has risen from 7,860 in 2023 to 8,837 in 2024/25 – an increase of 12.4% (almost 1,000 additional EHC plans in a year). Suffolk also has a higher percentage of long-standing plans compared to England, with 16.4% of plans in place for 8 years, and 9.4% of plans active for 9 years
- **Requests for assessment:** There were 2,784 requests for EHC needs assessments in 2024, up 29.0% from 2,159 in 2023. This increase is significantly higher than England (11.8%) and Suffolk's statistical neighbours (12.7%)
- **Decision to assess:** Suffolk approved 85.2% of requests for an EHC needs assessment in 2024, up from 77.1% in 2023. This is also higher than both statistical neighbours (63.4%) and the England average (65.4%)
- **Timeliness:** In 2024, 25.4% of EHC plans were issued within 20 weeks, up from Suffolk's lowest point of 3.9% in 2023, though still below the England average of 45.9%. At the same time, delays of over a year have increased sharply – from 12.6% of plans in 2023 to 22.3% in 2024 (over 1 in 5 plans)
- **Types of need:** Speech, language and communication needs remain the most common primary type (4,139 children, 20.8%), though this has decreased slightly from 21.3% in 2023. Social, emotional and mental health needs are increasing, rising from 18.7% (3,453 children) in 2023 to 19.7% (3,923 children) in 2024



JSNA-on-a-page summary:

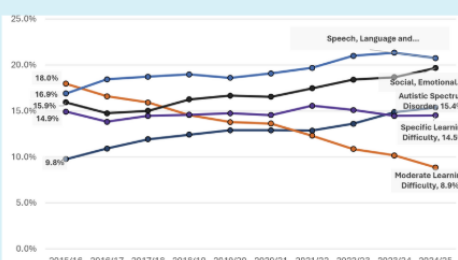
SEND Needs Assessment: 2025 data update

Prevalence



- **21,819 school-age children with SEND in Suffolk** (19.7% of all pupils in 2024/25)
- **5,959 with EHC Plans** (5.4%) – more than doubled from 2.5% in 2015/16
- **15,860 receiving SEN Support** (14.3%) - increased from 9.9% in 2015/16

Primary type of need in 2024/25

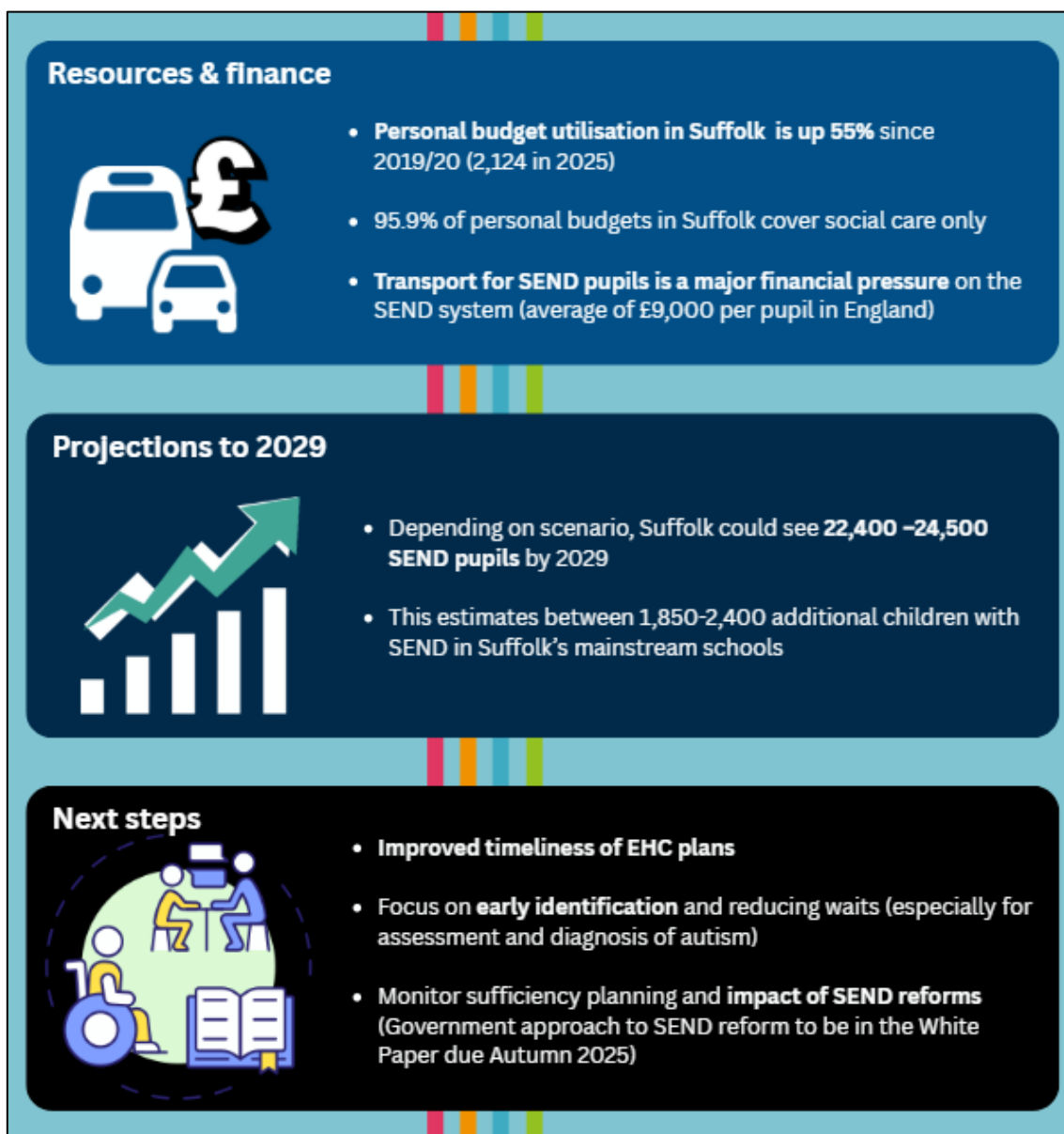


- **Speech, Language & Communication: 20.8%** (most common primary need)
- **Social, Emotional & Mental Health: 19.7%** (up from 18.7% in 2023/24)
- **Autism: 15.4%**, rising steadily (up from 9.8% in 2015/16)
- **Moderate Learning Difficulty** has halved since 2015/16 (18.0% → 8.9%)

System pressures



- **EHC needs assessment requests up by 29.0%** in 2024 (2,784 requests) compared to 2023 (2,159 requests)
- **25.4% of EHC plans were completed within 20 weeks in 2024** (across England in 2023, 45.9% were completed on time)
- **22.3% of EHC plans in Suffolk in 2024 were issued after 52 weeks**
- Timeliness is improving from 2023, but still below the national average



Data considerations

Populations used within this data update

Both this data update, and last year's SEND needs assessment draw on two data sources:

- **School census data (SEN1):** Provides detailed information on pupils attending Suffolk state-funded and independent schools, covering SEN support and demographic characteristics such as age, sex, ethnicity, and eligibility for free school meals. Please note while 2025 school census data is used, this covers the period up to January 2025.
- **Local authority data (SEN2):** Includes data on 0–25-year-olds with Education, Health and Care (EHC) plans maintained by Suffolk County Council, encompassing those in early years, further education, home education, or classified as not in education, employment or training (NEET). This dataset captures children both within, and outside Suffolk schools.

This data update uses the latest publicly available data in 2025 from the school census (completed on a single day in January/February each year). There is more recent, internal data available for Suffolk County Council, however this data update concentrates on the latest public data and how it compares to the data within the SEND Needs Assessment published in January 2025. It is therefore a snapshot and a static point in time.

Where possible, data for Suffolk has been compared to the England average, as well as the average for Suffolk's nearest statistical neighbours. These neighbours are calculated using the [Children's Services Statistical Neighbour Benchmarking Tool \(CSSNBT\)](#), using a series of variables such as income, free school meal status, ethnicity, and other census indicators.

Please also note, Suffolk's list of CSSNBT neighbours changed in 2025, with Derbyshire, Nottinghamshire, Essex, Kent, and North Northamptonshire being added, complete with Somerset, Norfolk, Devon, Dorset and Lincolnshire.

Cornwall, Shropshire, East Sussex, Worcestershire and Gloucestershire were removed from Suffolk's CSSNBT neighbours in 2025.

As a result of Suffolk's CSSNBT neighbours changing since the publication of the SEND Needs Assessment in January 2025, any analysis within this data update that includes the average value of Suffolk's CSSNBT neighbours now includes the new list of statistical neighbours.

Overview

This data update is a follow-up to the Special Educational Needs and Disabilities (SEND) needs assessment published in January of 2025. It serves to update the data within that document and present an update on progress against the recommendations from the needs assessment since publication.

The statutory framework for Special Educational Needs and Disabilities (SEND) provision in England was established by the [Children and Families Act 2014](#), which governs the identification, assessment, and support for children and young people aged 0-25 with SEND. This is underpinned by the [SEND Code of Practice](#), which provides detailed guidance on the implementation of support, including SEN Support and Education, Health and Care Plans (EHCPs) for those requiring more intensive assistance¹.

In June 2025, the government announced that its approach to SEND reform will be set out in a Schools White Paper originally expected in Autumn 2025, signalling a significant policy shift and renewed focus on system improvement¹. The Schools White paper which includes plans for SEND has now been delayed until 2026, with a further period of co-creation and testing proposals with the people who matter most in this reform, according to Education Secretary Bridget Phillipson².

The [Children's Commissioner's School Census](#) from September 2025 highlights the scale and complexity of children's needs nationally. Almost four in ten children are identified with SEND at some stage, while attendance, mental health, and wider family instability remain major challenges. Schools are stepping up to meet these needs but face significant barriers; particularly funding, staffing, and the availability of specialist services. Provision is uneven across regions and phases, with deprived schools more likely to provide community-based support roles³. The Children's commissioner's report calls for a shift from viewing needs as "special" to "additional", recognising that many children will require extra help at some point. It recommends a new national framework for additional needs, stronger cross-agency integration, and investment in services beyond the school gate. This reinforces the importance of embedding inclusive practice within mainstream settings, expanding early help, and ensuring local services are aligned so that schools are not left to carry the burden alone³.

Both locally and nationally, the SEND system is under acute pressure. The Public Accounts Committee declared in January 2025 that the system had reached—or arguably already reached - "crisis point," citing poor outcomes for children, and unsustainable financial burdens on local authorities¹. Two major financial intervention programmes have been central to managing these pressures: the Safety Valve programme, which has now been paused by the government pending review, and the Delivering Better Value initiative, which continues to support local authorities in identifying and addressing budgetary challenges¹.

Furthermore, recent analysis by the Local Government Association highlights the escalating financial pressures associated with home-to-school transport for children and young people with SEND. Costs are projected to reach nearly £2.5 billion by 2025–26, with SEND transport now accounting for two-thirds of total expenditure and three-quarters of the growth since 2015–16⁴. The average annual cost to transport a SEND pupil to school in England is approximately £9,000 - almost three times higher than for mainstream pupils⁴. This is driven by increased demand, longer travel distances, and a rise in placements at independent non-maintained special schools⁴.

Pupils with SEND are some of the most educationally disadvantaged in the English state school system. Previous research by the Education Policy Institute has found that four in ten children are identified as having SEND at some point between the ages of 5 and 16⁵. In their analysis they distinguish between pupils who receive support in school (SEN support) and those with more complex needs set out in an education, health and care plan (EHCP), and compare both groups to their peers with no identified needs.

The educational experiences of young people with SEND in England were captured between February and May 2022, with pupils describing coping strategies (e.g. headphones, sensory spaces) but reported unmet needs often leading to frustration, mislabelling of behaviours, and use of punishments such as exclusion⁶. Participants emphasised the importance of personalised support, regular review of support plans, and staff training to better identify and respond to needs⁶. Positive experiences were linked to empathetic staff, good communication, and inclusive opportunities beyond academic achievement⁶. Parents and carers highlighted difficulties navigating complex, inconsistent systems to secure support, calling for greater accountability from local authorities⁶.

Children with SEND continue to experience substantial educational disadvantage, with some of the widest attainment gaps observed across all groups.

At the end of primary school, pupils across England with an EHCP were over two years (27.2 months) behind their peers in 2024, while those receiving SEN support were 16.8 months behind; among those taking GCSEs, students with an EHCP were over three years (39.6 months) behind, while those receiving SEN support were 21.8 months behind. In 16-19 education, those with an EHCP were 6.8 grades behind their peers, while those receiving SEN support were 3.5 grades behind⁷.

Other national research from September 2024 explored the experience of 3,000 parents and young people with SEND, tracking their experiences from Year 8 to Year 9. This found that parents of children with SEND in special schools reported more positive experiences than those in mainstream settings⁸. Within mainstream schools, those with an EHCP were more satisfied than those without⁸. Parental views varied by type of need, with the most positive responses from parents of children with profound or severe learning difficulties – earlier identification of needs was also linked to more favourable views of support⁸.

This data update to the 2025 SEND needs assessment for Suffolk reports changes in the data since publication, as well as a number of new measures, such as timeliness and outcomes for EHC needs assessments, the reason for EHC plans being ceased, and greater analysis of personal budget use in Suffolk, in addition to updated projections using the latest prevalence figures for SEND in Suffolk.

Prevalence and characteristics of special educational needs and disabilities

A local authority may issue an EHC plan for a pupil who needs more support than is available through SEN support. This will follow a statutory assessment process whereby the local authority considers the pupil's special educational needs and any relevant health and social care needs; sets out long term outcomes; and specifies provision which will deliver additional support to meet those needs.

In the 2024/25 school census, there were 21,819 school pupils with identified SEN, including SEN support and those with EHC plans (19.7% of all pupils in Suffolk), an increase from 12.4% in 2015/16, and 18.1% in 2023/24. This figure includes pupils in independent schools but does not include children at application or processing stage.

Of these Suffolk pupils on schools census day in 2024/25 with identified SEN, 15,860 (14.3%) receive SEN Support, and 5,959 (5.4%) have Education, Health, and Care (EHC) plans. This number represents only school pupils who have EHC plans, including children currently attending hospital schools, all phases (state-funded AP schools, nurseries, primaries, secondaries and special schools), and all school types⁹.

Table 1. Number and percentage of EHC plans and SEN support for school-age children in England and Suffolk, 2024/25

	England	Suffolk	Suffolk: Compared to 2023/24
EHC plans	482,640	5,959	+831 ↑
EHC plans (percentage)	5.3%	5.4%	+0.8% ↑
SEN support/SEN without an EHC plan	1,284,284	15,860	+720 ↑
SEN support/SEN without an EHC plan (percent)	14.2%	14.3%	+0.8% ↑
SEN support and EHC plans combined	1,766,924	21,819	+1,551 ↑
SEN support and EHC plans combined (percent)	19.5%	19.7%	+1.6% ↑
Headcount (total school pupils incl. independent schools)	9,092,073	111,242	-1,114 ↓

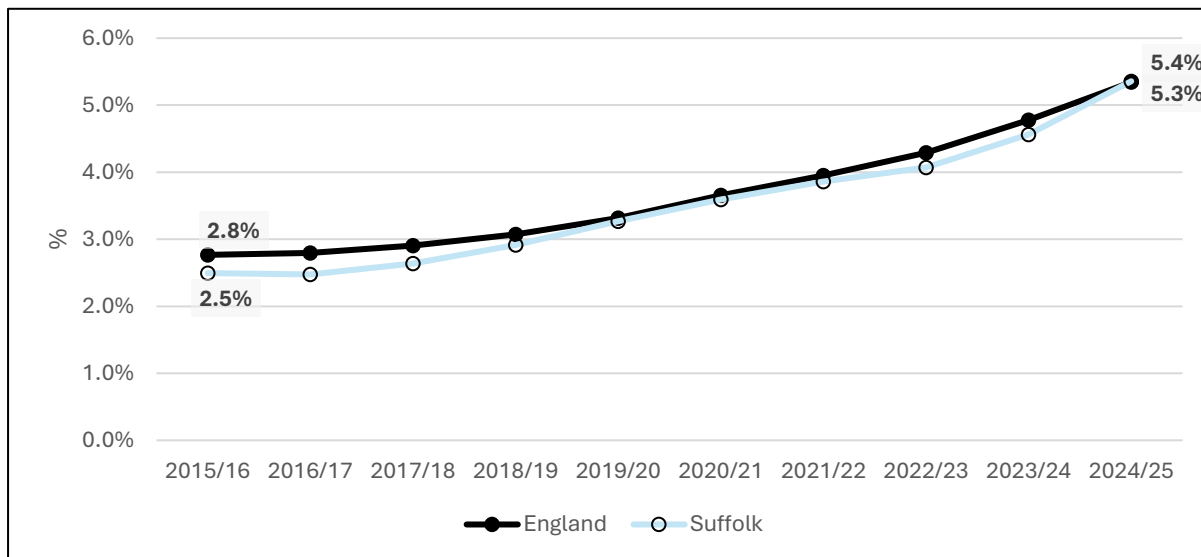
Source: [Department for Education](#) (2025)

The upward trend/increase in EHC plans and SEN support for Suffolk's schoolchildren continued in 2024/25.

The percentage of schoolchildren with an EHC plan on school census day in Suffolk increased from 4.6% in 2023/24, to 5.4% in 2024/25 – a 0.8 percentage point statistically significant increase. This increase was very similar to the increase in the percentage of EHC plans among schoolchildren in England between 2023/24 (4.8%) to 2024/25 (5.4%) – a 0.6 percentage point increase.

The percentage of Suffolk schoolchildren with EHC plans has now more than doubled between school census days in 2015/16 (2.5%) to 2024/25 (5.4%).

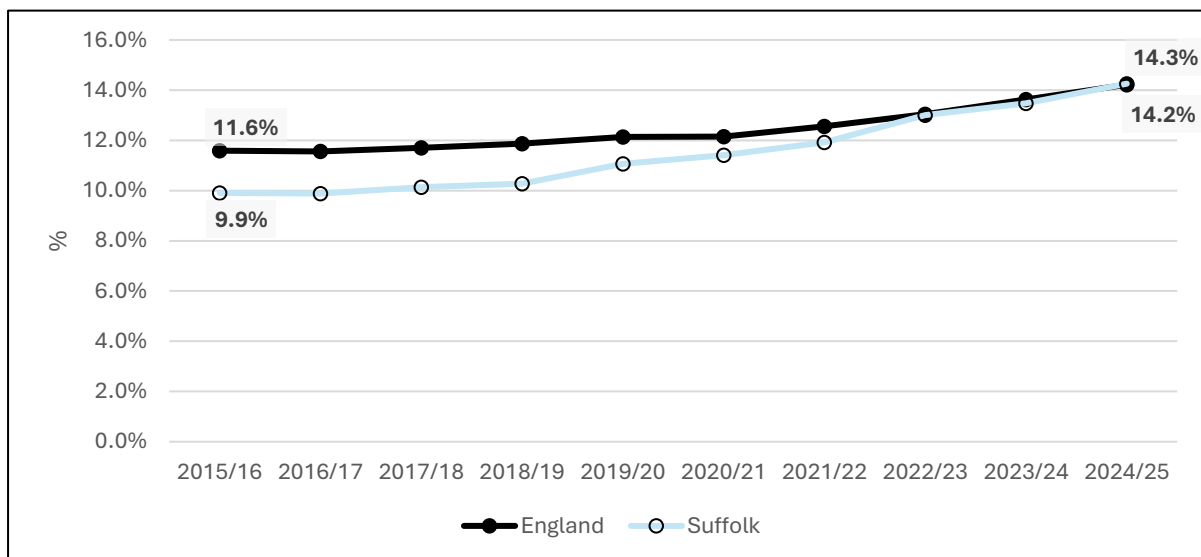
Figure 2. Percentage of school-age children with EHC Plans, Suffolk and England, 2015/16 to 2024/25



Source: [Department for Education](#) (2025)

Specifically for SEN support, the percentage of Suffolk schoolchildren receiving SEN support continued to increase from 13.5% in 2023/24 to 14.3% on school census day in 2024/25 (a 0.8 percentage point statistically significant increase), similar to the increase across England (13.6% in 2023/24 to 14.2% in 2024/25 – a 0.6 percentage point increase).

Figure 3. Percentage of school-age children receiving SEN support/SEN without an EHC plan, Suffolk and England, 2015/16 to 2024/25



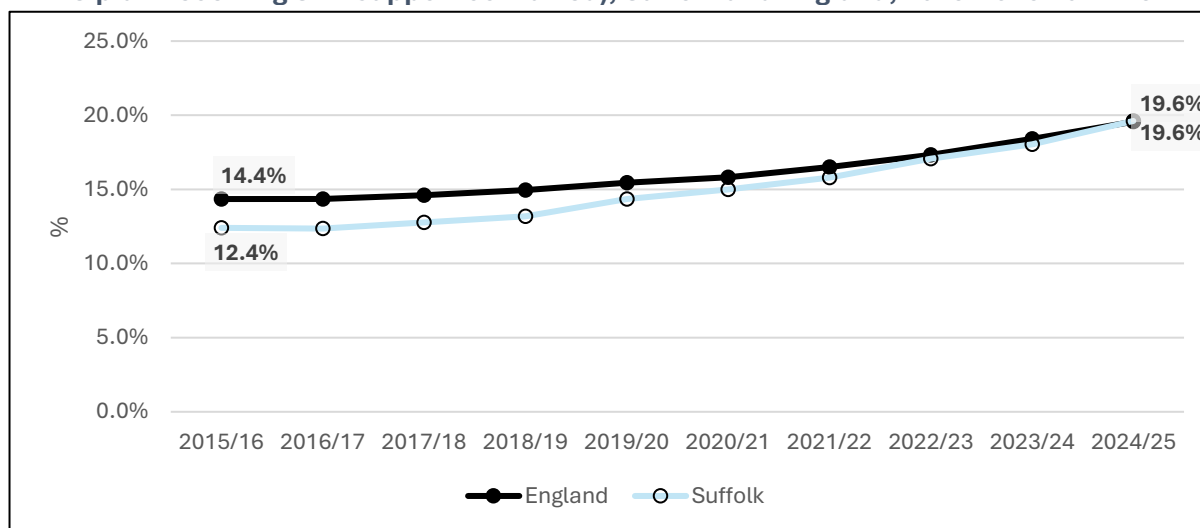
Source: [Department for Education](#) (2025)

The following figure combines the percentage of children with EHC plans and the percentage of children receiving SEN support on school census day in each year, to provide the total percentage of pupils with any special educational needs in that year.

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The percentage of children with special educational needs in England has increased from 14.4% in 2015/16 to 19.6% on school census day in 2024/25 (an increase of 5.2 percentage points). The percentage of Suffolk schoolchildren with special educational needs has also increased – by 7.2 percentage points – from 12.4% in 2015/16 to 19.6% on school census day in 2024/25. Suffolk previously has a statistically significantly lower proportion of children with special educational needs compared to the England figure between 2015/16 to 2022/23, but the Suffolk figure is now statistically similar to the national percentage.

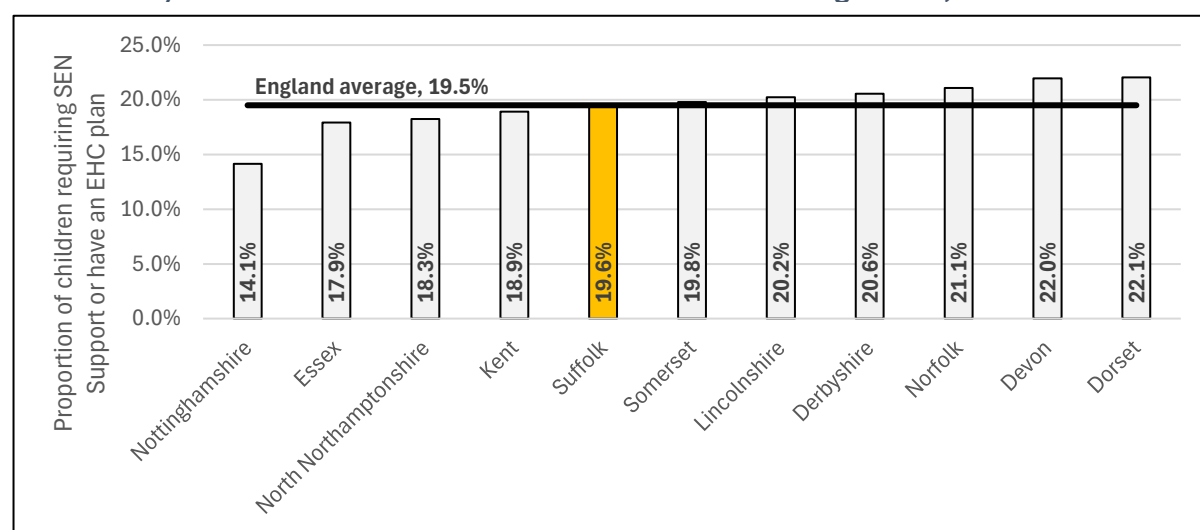
Figure 4. Percentage of school-age children with special educational needs (with an EHC plan/receiving SEN support combined), Suffolk and England, 2015/16 to 2024/25



Source: [Department for Education](#) (2025)

Out of Suffolk's nearest statistical neighbours (using the updated 2025 version of the [Children's Services Statistical Neighbour Benchmarking Tool](#)), Suffolk's combined prevalence of EHC plans and SEN Support (19.6%), places the county 5th out of 11 statistical neighbours. Last year (2023/24), the county was 2nd lowest out of 11 statistical neighbours. Please note, Suffolk's CSSNBT neighbours have been updated in the last year, which will have contributed to this change.

Figure 5. Percentage of school-age children with SEND (EHC plans and SEN support combined) for Suffolk and Children's Services Statistical Neighbours, 2024/25



Source: [Department for Education](#) (2025)

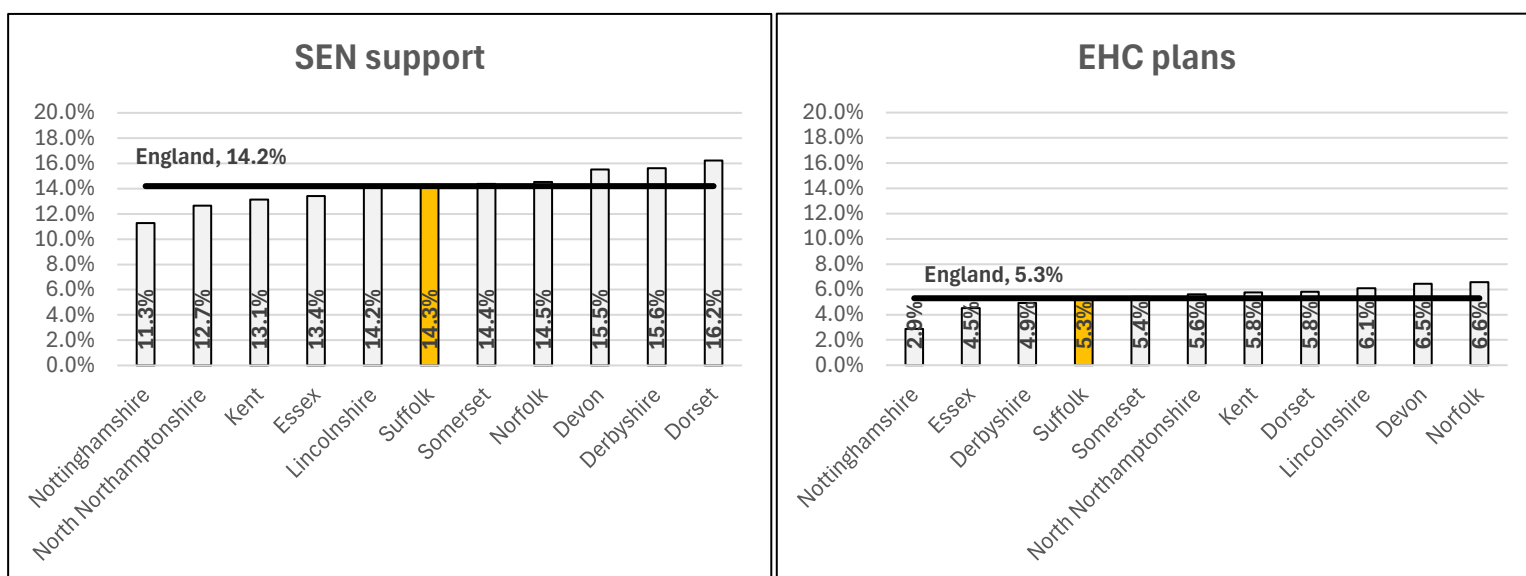
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In 2024/25, Suffolk's prevalence of EHC plans at 5.3% was statistically similar to the England average of 5.3%, placing the county 4th out of 11 statistical neighbours, in 2023/24 the county was 5th out of 11 of statistical neighbours (using the [Children's Services Statistical Neighbour Benchmarking Tool](#)).

For SEN support, Suffolk's rate of 14.3% was also statistically similar to the national average of 14.2%, positioning it as the 6th out of 11 statistical neighbours. Last year, the county had the lowest percentage of schoolchildren receiving SEN support out of 11 statistical neighbours in 2023/24.

Among the statistical neighbour authorities, there was considerable variation, with EHC plan rates ranging from 2.9% in Nottinghamshire to 6.6% in Norfolk, and SEN support percentages spanning from 11.3% in Nottinghamshire to 16.2% in Dorset.

Figure 6. Percentage of children with SEN support, and EHC plans, for Suffolk and Children's Services Statistical Neighbours, 2024/25



Source: [Department for Education](#) (2025)

EHC plans

SEN2 data provides information on the EHC plan process including the number of active EHC plans in school census day in January of the calendar year, the number of new EHC plans in the previous year, and the administration of requests for assessments for an EHC plan. This larger figure represents all EHC plans managed by Suffolk County Council including plans for school pupils (5,959), pre-school children under 5 (401), young people who have left school but still have active plans up to the age of 25, individuals in further education, home educated children, and those who are not in education, employment or training (NEET). The below table provides the number of EHC plans in Suffolk by age group as of January 2025.

The latest data on the number of EHC plans in Suffolk on school census day shows a continued year-on-year increase across all age groups. In 2024/25, there are a total of 8,837 EHC plans, representing a 12.4% increase from 7,860 in 2023/24. For Suffolk, there has been an increase of 831 total schoolchildren with EHC plans between school census day 2024 to 2025, with a total

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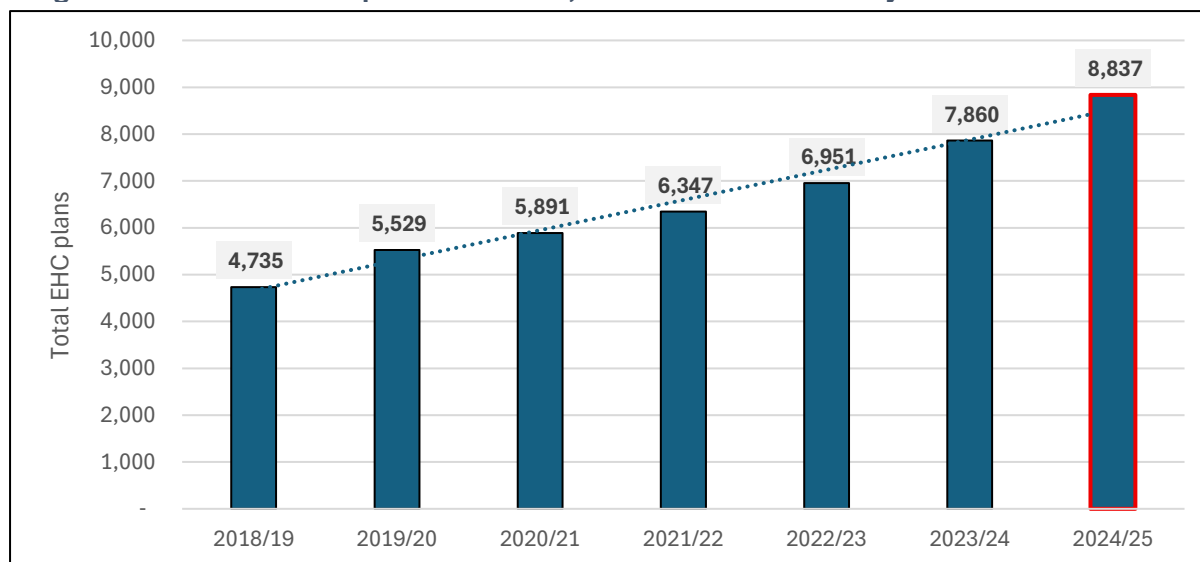
increase of almost 1,000 (977) EHC plans for all children in the county. The largest increase has been in the 11 to 15 age group, the largest age group which contains over 1 in 3 (34.8%) of the total number of EHC plans in Suffolk.

Table 2. Number and percentage of EHC plans by age group in Suffolk, January 2025

	Number	%	Suffolk: Compared to 2023/24
Under 5	401	4.5%	+133 ↑
Age 5 to 10	2,032	23.0%	+25 ↑
Age 11 to 15	3,071	34.8%	+335 ↑
Age 16 to 19	1,944	22.0%	+208 ↑
Age 20 to 25	1,389	15.7%	+276 ↑
Total	8,837		+977 ↑

Source: [Department for Education](#) (2025)

Figure 7. Number of EHC plans in Suffolk, as of school census day 2018/19 to 2024/25



Source: [Department for Education](#) (2025)

Note on dataset discrepancy:

The figures in the school-age children table represent the number of school-age pupils with identified special educational needs in Suffolk schools as reported in the school census. This includes pupils attending Suffolk schools who may live in other local authorities.

In contrast, the table with the number and percentage of EHC plans by age group reflects the total number of EHC plans managed by Suffolk County Council as of January 2025. This includes individuals across a broader age range (0-25 years), including those not in formal education, those attending schools outside Suffolk, home-educated pupils, and young people in further education or Not in Employment, Education or Training (NEET). Therefore, the totals differ, as the two datasets capture overlapping but distinct populations.

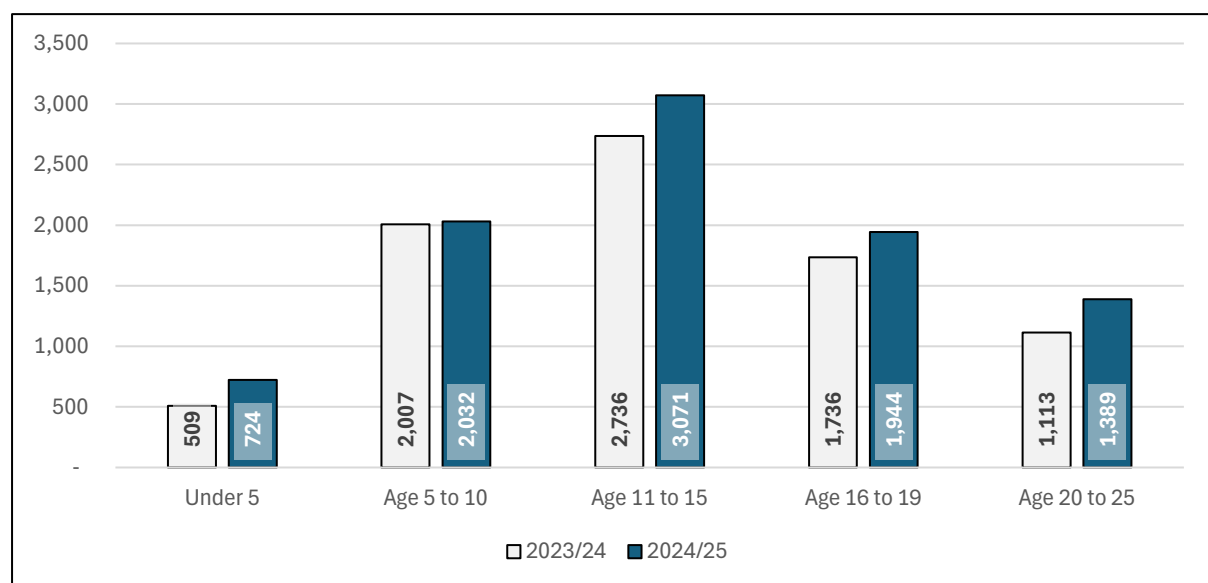
Splitting Suffolk's EHC plans by age groups, the most notable rise between school census days in 2023/24 to 2024/25 is in the under 5 age group, which saw a 42.2% increase (from 509 to 724), indicating a growing identification of SEND needs at earlier stages. Modest growth is observed in the 5 to 10 age group, which increased by just 1.2% (from 2,007 to 2,032).

The 11 to 15 age group remains the largest cohort, rising by 12.3% from 2,736 to 3,071. The number of plans for young people aged 16 to 19 increased by 12% (from 1,736 to 1,944), while the 20 to 25 age group saw a 24.8% increase (from 1,113 to 1,389), continuing the trend of sustained support into adulthood.

Data for the last couple of years shows a consistent upward trajectory in the demand for EHC plans across Suffolk, particularly among the youngest and oldest age groups, highlighting the increasing need for early intervention and continued provision into adulthood.

Data for EHC plans on school census day in 2024/25 allowed analysis by single year of age. In 2024/25, numbers in Suffolk rise steadily from early childhood, with a sharp increase from age 5 (323 plans) through to a peak at age 13 (649 plans). The ages 11 to 15 represent the highest concentration of EHC plans, reflecting the continued identification of needs during secondary school years.

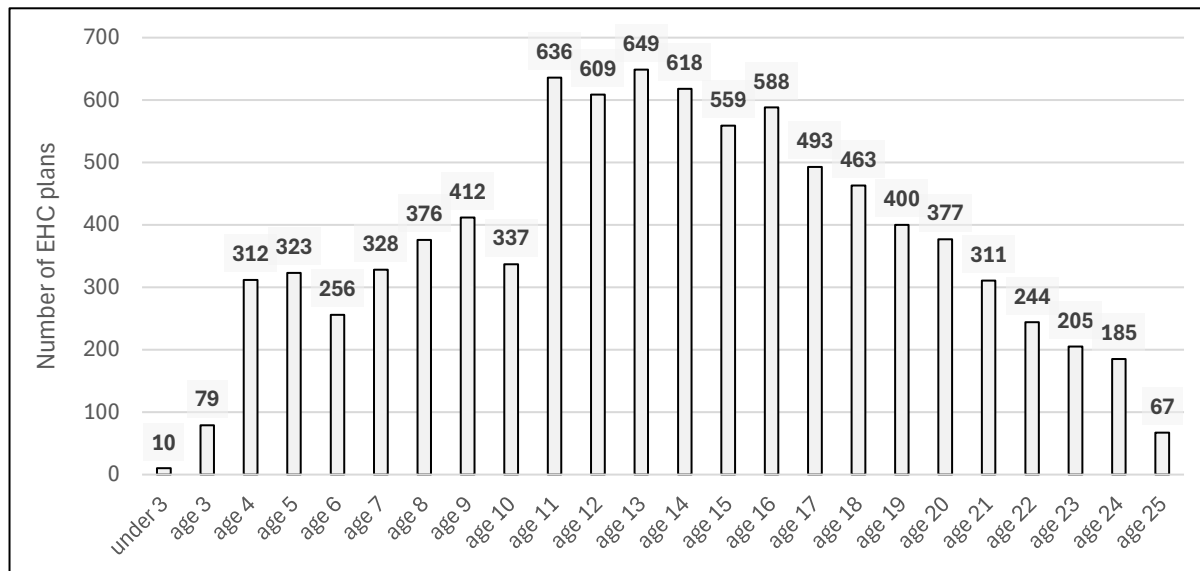
Figure 8. Number of EHC plans by age group, Suffolk, 2023/24 and 2024/25



Source: [Department for Education](#) (2025)

Figures remain relatively with 588 plans at age 16 and a gradual decline through ages 17 (493), 18 (463), and 19 (400). EHC plans continue into adulthood, with a steady decrease from age 20 (377) to age 25 (67), indicating ongoing, but reducing support, as young people leave education settings.

Figure 9. Number of EHC plans by single year of age, Suffolk, 2024/25



Source: [Department for Education](#) (2025)

On school census day in 2024/25, most Suffolk children and young people with an EHC plan in Suffolk identify as White British, accounting for 7,447 (84.3%) of the total cohort. Other White ethnic groups, including “Any other White background” (313/3.5%), Irish (24/0.3%), and Traveller of Irish Heritage (6/0.1%), collectively account for a further (371/4.2%) EHC plans.

Among those from Mixed ethnic backgrounds, there were 405 EHC plans in total, with the largest subgroup being White and Black Caribbean (136/1.5%), followed by Other Mixed (159/1.8%), White and Black African (58/0.7%), and White and Asian (52/0.6%).

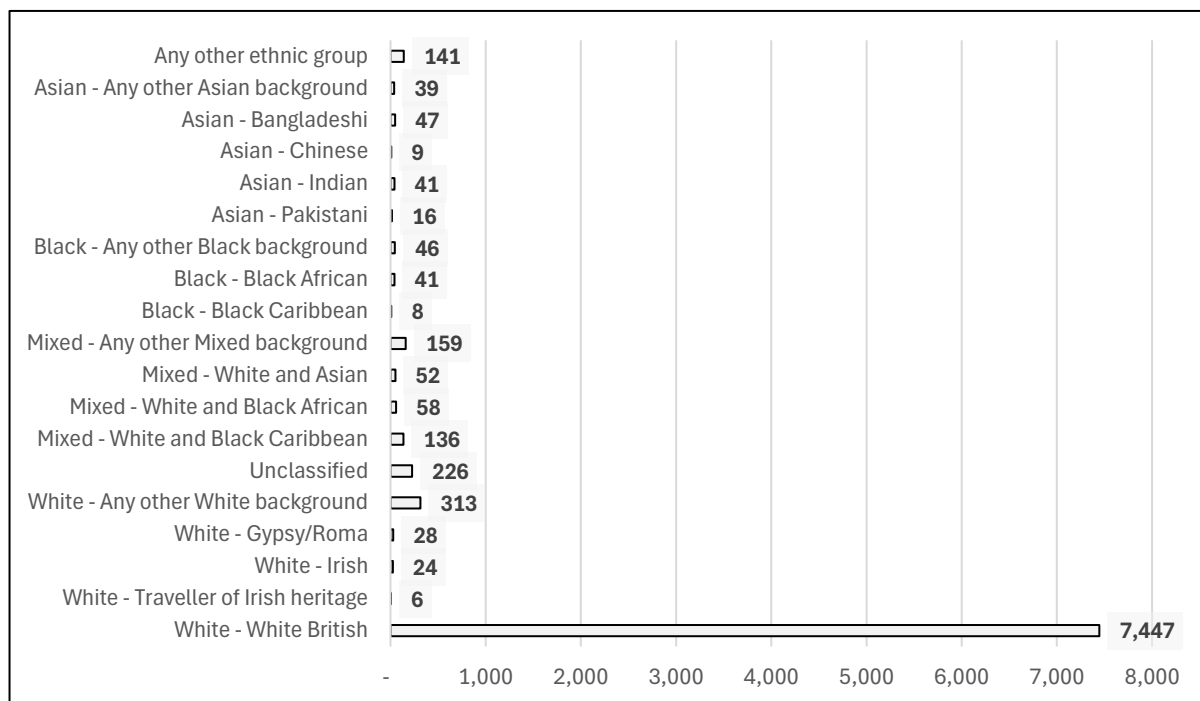
Asian ethnic groups account for 193 plans, with Bangladeshi (47/0.5%), Indian (41/0.5%), and Pakistani (16/0.2%) being the most represented. The Black ethnic group represents a smaller proportion overall, with 95 plans across all Black subcategories, including African (41/0.5%), Caribbean (8/0.1%), and Other Black (46/0.5%).

A detailed breakdown of SEND and ethnic groups in Suffolk is available in the full [SEND Needs Assessment](#).

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Additionally, 141 (1.6%) children and young people are recorded under "Any other ethnic group," and 226 (2.6%) are unclassified.

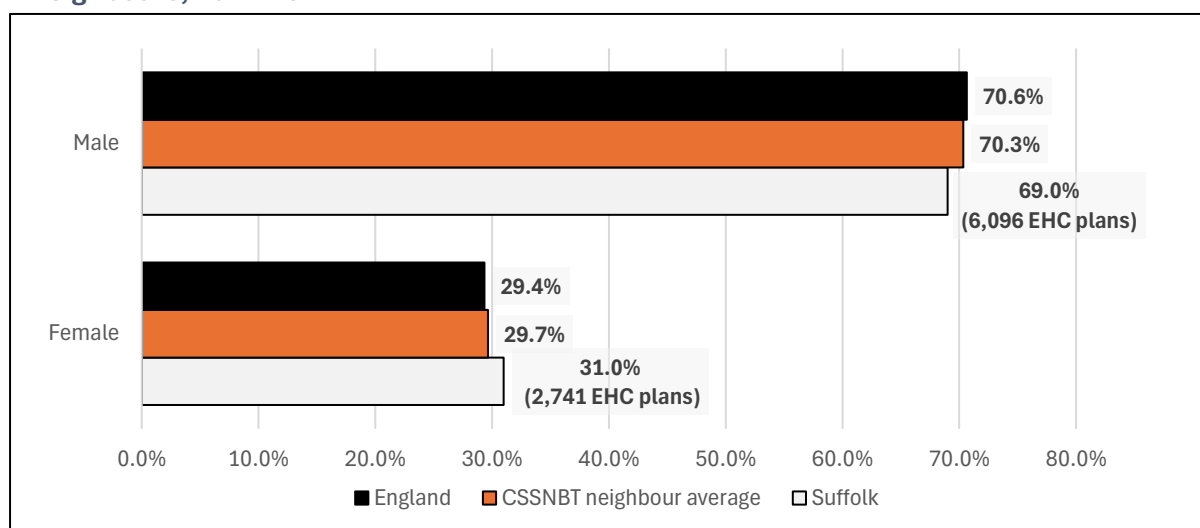
Figure 10. Number of EHC plans by ethnic group, Suffolk, 2024/25



Source: [Department for Education](#) (2025)

Of all EHC plans on school census day for Suffolk in 2024/25, more than 2 in 3 (69.0%/6,096 EHC plans) were for males, and less than 1 in 3 (31.0%/2,741 EHC plans) were for females.

Figure 11. Number of EHC plans by sex, England, Suffolk and Suffolk's CSSNBT neighbours, 2024/25



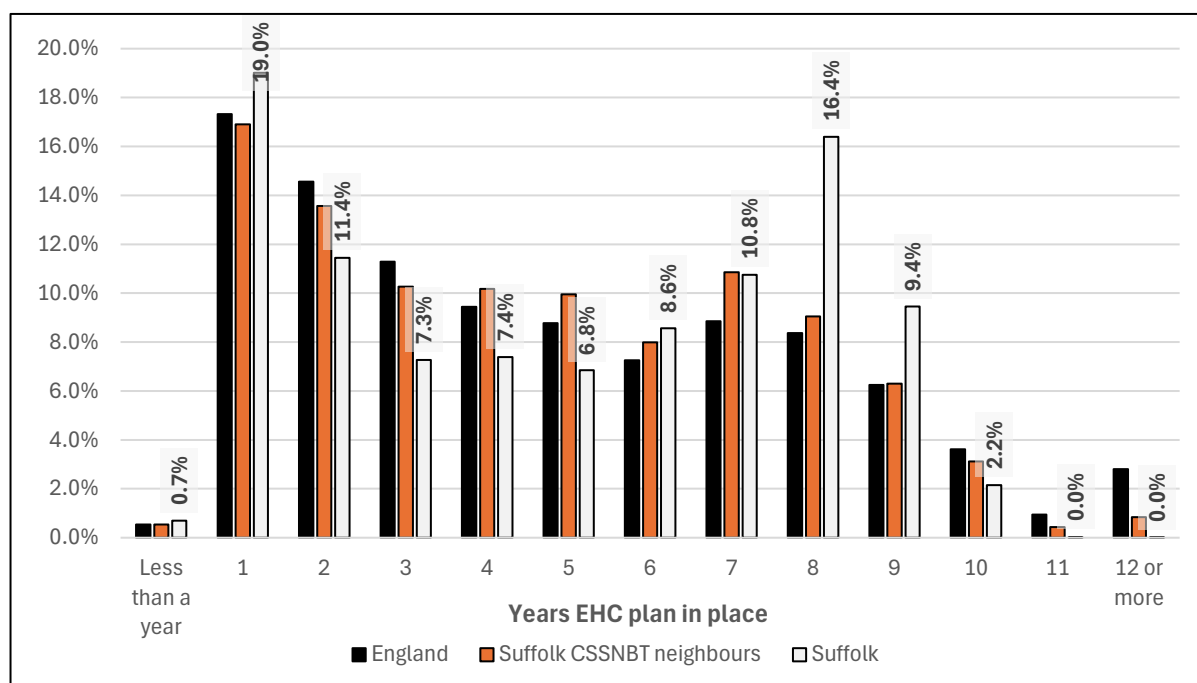
Source: [Department for Education](#) (2025)

On school census day in 2024/25, the majority of EHC plans in Suffolk have been in place for one to two years, with 19.0% of plans established within the last year—above both the national average (17.3%) and statistical neighbour average (16.9%). However, Suffolk has a lower percentage of plans in place for 2 to 5 years compared to national and neighbour figures.

Suffolk has a higher percentage of long-standing plans - 16.4% of plans have been in place for 8 years, compared to 8.4% nationally and 9.1% among CSSNBT statistical neighbours. Similarly, 9.4% of Suffolk's plans have been active for 9 years, above national (6.2%) and CSSNBT neighbour (6.3%) levels.

At the longest durations (10 years or more), the percentage of EHC plans in place in Suffolk drops sharply. Only 2.2% of plans have been in place for 10 years (vs 3.6% across England), and just 3 individuals have had plans for over 11 years.

Figure 12. Percentage of EHC plans by number of years EHC plan has been in place, England, Suffolk and Suffolk's CSSNBT neighbours, 2024/25

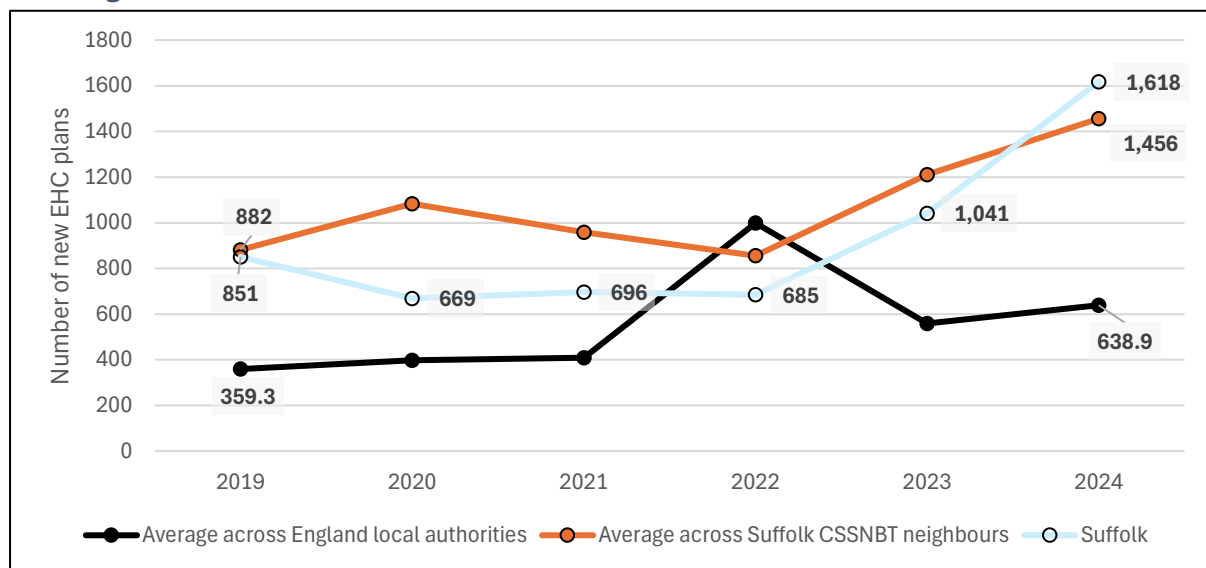


Source: [Department for Education](#) (2025)

New EHC plans

The number of new EHC plans issued in Suffolk has risen sharply in recent years. After a dip in 2020 (669 plans) likely linked to the Covid-19 pandemic, numbers remained relatively stable in 2021 and 2022. However, there was a significant increase in 2023 to 1,041 new plans, followed by a further sharp rise in 2024 to 1,618 plans; almost doubling the number seen two years prior. Suffolk and Suffolk's CSSNBT neighbours have all experienced a very large increase in the number of new EHC plans issued between 2022 to 2024. This upward trend suggests growing demand for statutory support and possibly greater awareness or identification of special educational needs across Suffolk.

Figure 13. Number of new EHC plans, England, Suffolk, and Suffolk CSSNBT neighbour average 2019 to 2024



Source: [Department for Education](#) (2025)

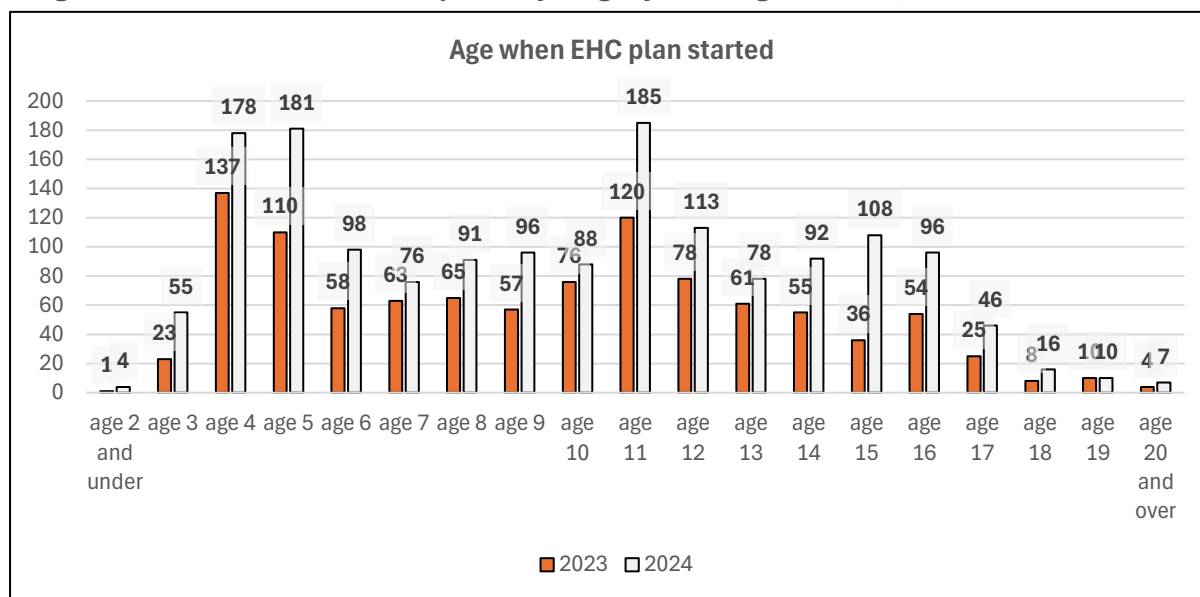
The age profile of new EHC plans in Suffolk has shifted notably between 2023 and 2024, with marked growth in early years and secondary school age groups.

In 2023, new plans peaked at age 4 (137 plans) and age 11 (120 plans), with moderate numbers across the primary years and a gradual decline from age 12 onwards. In contrast, 2024 saw sharp increases in early identification, particularly at ages 4/5: plans at age 4 rose to 178 and nearly doubled at age 5 from 110 to 181. Age 3 also saw more than double the previous year's total, rising from 23 to 55.

Of note, there was a substantial rise in plans initiated at age 11, increasing from 120 in 2023 to 185 in 2024. Moderate increases are evident across most other ages, particularly between age 6 to 15, while the number of new plans for those aged 16 and over rose modestly.

Overall, the data on new EHC plans indicates stronger early years identification and sustained growth at secondary age, suggesting improved recognition of need at key educational stages.

Figure 14. Number of new EHC plans by single year of age, Suffolk, 2023 and 2024



Source: [Department for Education](#) (2025)

Primary type of need

Suffolk's SEND provision addresses a diverse range of primary needs across the four broad areas outlined in the SEND Code of Practice.

Suffolk's SEND provision has undergone significant shifts in primary need categories over the past decade, with some categories showing consistent growth while others have declined substantially.

The top 5 primary need categories as of school census day in 2024/25 were as follows:

- **Speech, Language and Communications Needs** (20.8% - 4,139 pupils)
- **Social, Emotional and Mental Health** (19.7% - 3,923 pupils)
- **Autism** (15.4% - 3,067 pupils)
- **Specific Learning Difficulty** (14.5% - 2,894 pupils)
- **Moderate Learning Difficulty** (8.9% - 1,766 pupils)

Trends over time

Suffolk's SEND provision has undergone significant changes over the past decade, characterised by substantial growth in some categories and declines in others.

Autism has seen the largest increase, rising from 9.8% on school census day in 2015/16 to 15.4% in 2024/25, representing consistent year-on-year growth of 5.6 percentage points that has made it the third most common primary need. Social, Emotional and Mental Health needs have also increased from 15.9% to 19.7%, gaining 3.8 percentage points to become the second most prevalent category. SEN support but no specialist assessment has grown from 4.3% to 6.3%.

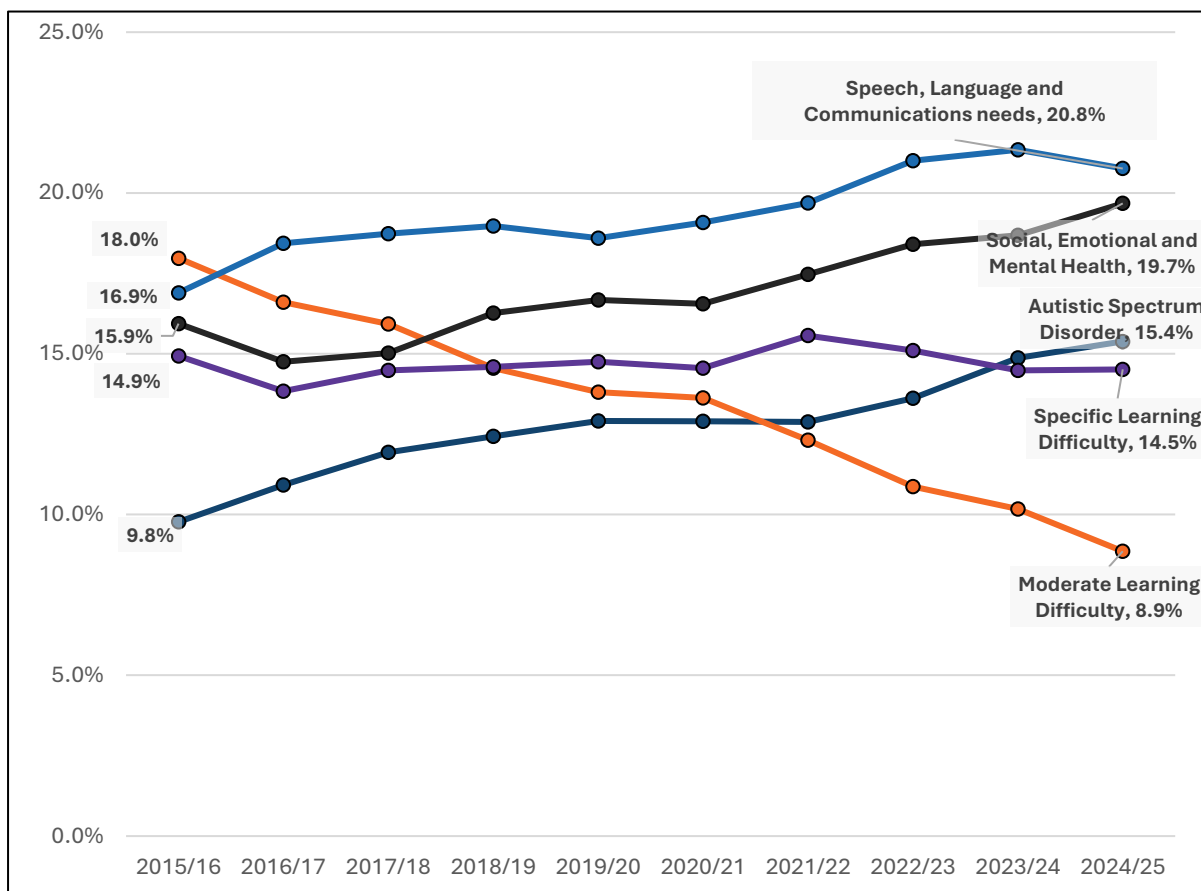
Moderate Learning Difficulty has undergone the greatest decline, falling from 18.0% on school census day in 2015/16 to 8.9% in 2024/25, representing a decrease of 9.1 percentage points that effectively halved its prevalence over the decade. Severe Learning Difficulty has declined from 3.1% to 2.4%, while Physical Disability has decreased from 3.4% to 2.5%. Visual Impairment has shown a gradual decline from 1.3% to 0.8%.

Speech, Language and Communications needs continues to be the most common primary need, fluctuating between 16.9% and 21.3% but ending the period at 20.8%. Specific Learning Difficulty has remained relatively stable, varying between 13.8% and 15.6% over the decade.

The data reveals several important patterns in Suffolk's SEND provision. Down's Syndrome was introduced as a separate category in 2024/25, accounting for 0.1% of cases (24 pupils), having been recorded under other needs in previous years. This change reflects a move toward more specific identification and categorisation of primary needs. The broader trends suggest a shift in identification patterns, with increases in autism and mental health needs, while traditional learning difficulties have declined over time relative to the entire SEND population in Suffolk.

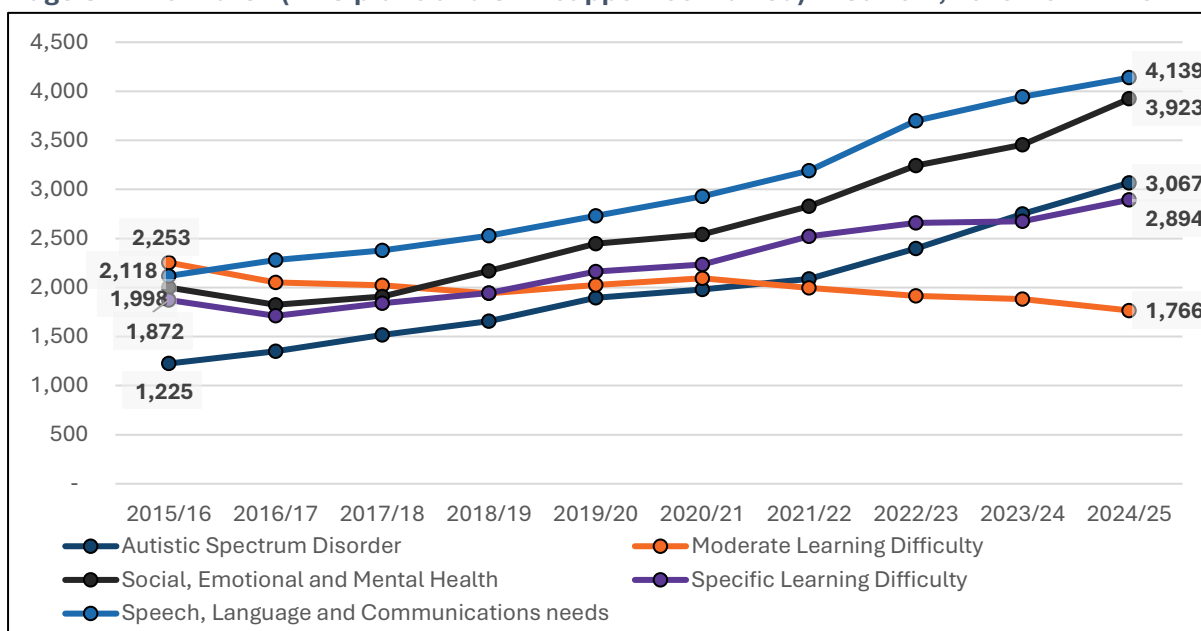
The concentration of needs is evident in the top 5 categories, which together account for 78.3% of all SEND pupils (19,938) in Suffolk on school census day in 2024/25, demonstrating how provision is focused on these key areas.

Figure 15. Percentage distribution of 5 most common primary types of need for school age SEND children (EHC plans and SEN support combined) in Suffolk, 2015/16 to 2024/25



Source: [Department for Education](#) (2025)

Figure 16. Number of SEND cases by 5 most common primary types of need for school age SEND children (EHC plans and SEN support combined) in Suffolk, 2015/16 - 24/25



Source: [Department for Education](#) (2025)

Table 3. Number and percentage of all SEND cases by primary type of need, 2015/16 and 2024/25

Primary type of need	2015/16		2024/25		% change: 15/16 to 24/25
	Number	% of all SEND cases	Number	% of all SEND cases	
Moderate Learning Difficulty	2,253	18.0%	1,766	8.9%	-21.6%
Speech, Language and Communications needs	2,118	16.9%	4,139	20.8%	95.4%
Social, Emotional and Mental Health	1,998	15.9%	3,923	19.7%	96.3%
Specific Learning Difficulty	1,872	14.9%	2,894	14.5%	54.6%
Other difficulty or disability	1,229	9.8%	1,276	6.4%	3.8%
Autism	1,225	9.8%	3,067	15.4%	150.4%
SEN support but no specialist assessment of type of need	544	4.3%	1,250	6.3%	129.8%
Physical Disability	430	3.4%	508	2.5%	18.1%
Severe Learning Difficulty	386	3.1%	469	2.4%	21.5%
Hearing Impairment	226	1.8%	329	1.7%	45.6%
Visual Impairment	158	1.3%	163	0.8%	3.2%
Profound & Multiple Learning Difficulty	79	0.6%	83	0.4%	5.1%
Multi-sensory impairment	19	0.2%	47	0.2%	147.4%
Downs Syndrome	-	-	24	0.1%	

Source: [Department for Education](#) (2025)

Although representing a smaller proportion of the SEND population, hearing impairment and multi-sensory impairment cohorts are growing in Suffolk. Stakeholders, including families, stress the importance of recognition and tailored provision, as these needs are often less visible than others.

The distribution of primary needs across age groups reveals identification patterns reflecting developmental stages across each primary type of need. Speech, Language and Communications have earlier identification, peaking in Reception (404 pupils) and Year 1 (564 pupils) before declining steadily throughout secondary years. Social, Emotional and Mental Health needs have the opposite pattern, with fewer early years and reception cases, but increasing through primary school and peaking in secondary school (352-435 pupils in Years 7-11).

Autism maintains relatively consistent numbers across all age groups (204-280 pupils in each school year), suggesting identification occurs throughout the school years. Specific Learning Difficulty shows progressive identification with age, starting low in early years (9 in EY) and building to peak numbers in Years 8-10 (323-345 pupils).

In Suffolk on school census day in 2024/25, communication difficulties are typically identified early when language development is critical, mental health needs typically are identified during adolescence, while specific learning difficulties become more apparent and likely to be identified as academic demands increase.

Figure 17. Number of children with SEND (SEN support and EHC plans combined) in Suffolk with the five most common primary needs by school year, 2024/25



Source: [Department for Education](#) (2025)

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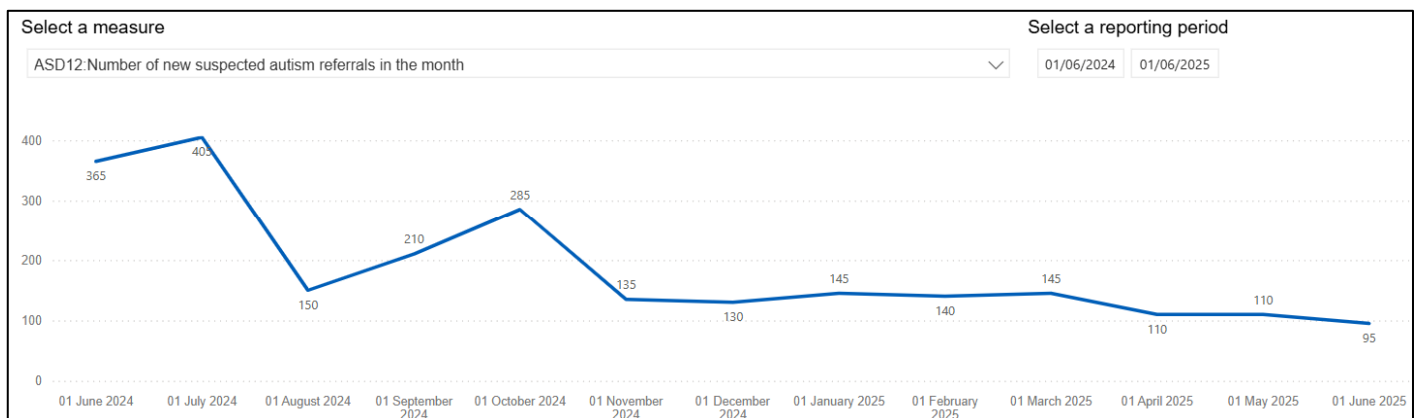
Autism pathway

Data from NHS Digital presents autism waiting times between July 2024 to July 2025. This includes measures on waiting times for autism spectrum disorder diagnostic pathways, based on the time between a referral for suspected autism and the first care contact associated with that referral.

Autism assessments for children and adolescents happen in two types of NHS service: child and adolescent mental health (CAMH) services, and community paediatric services which undertake neurodevelopmental assessment.

For the Suffolk and North East Essex Integrated Care Board (SNEE ICB) area, there were 95 new suspected autism referrals in the month to the 1st of June 2025, down from a peak of 405 in the month ending 1st of July 2024, in the 12 months prior.

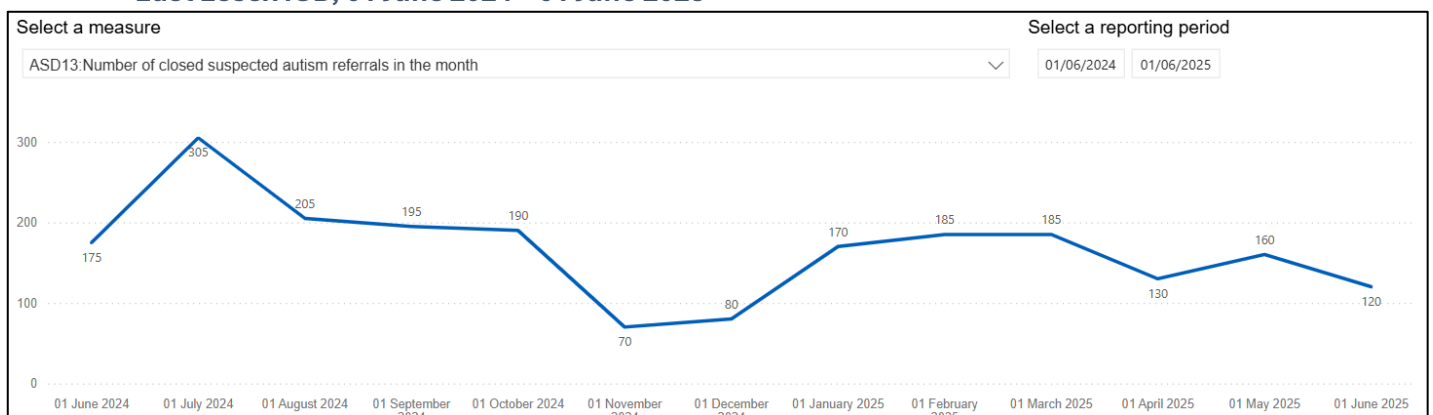
Figure 18. Number of new suspected autism referrals in the month, Suffolk and North East Essex ICB, 01 June 2024 – 01 June 2025



Source: [NHS England](#) (2025)

There were 120 closed suspected autism referrals in the SNEE ICB area in the month until 01 June 2025, again down from a peak of 305 closed suspected autism referrals in SNEE ICB in the month until 01 July 2024.

Figure 19. Number of closed suspected autism referrals in the month, Suffolk and North East Essex ICB, 01 June 2024 – 01 June 2025

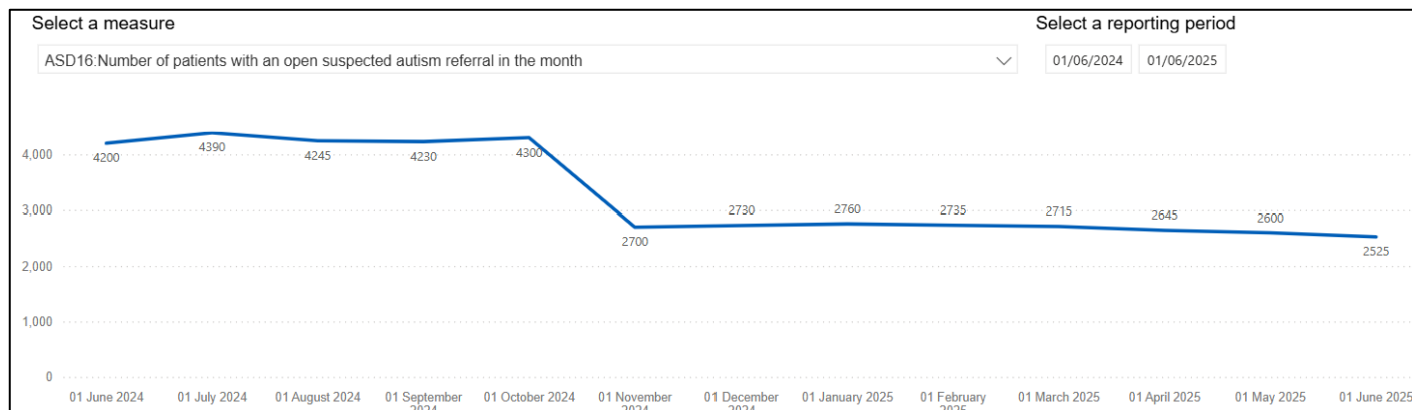


Source: [NHS England](#) (2025)

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There is a large wait/backlog for autism referrals within SNEE ICB, with 2,525 patients with an open suspected autism referral in the month ending 01 June 2025. This is down from a peak of 4,390 in the month ending 01 July 2024.

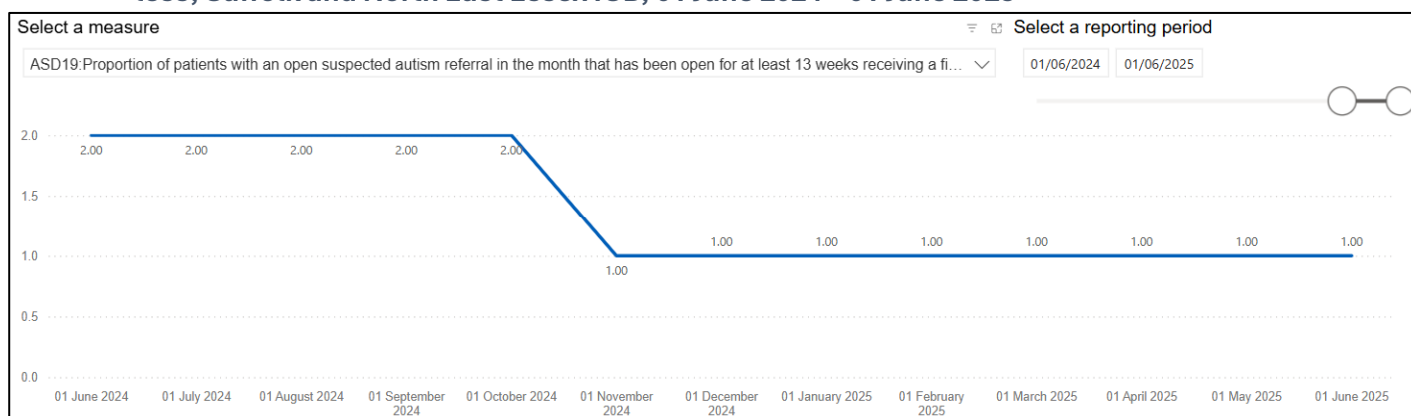
Figure 20. Number of patients with an open suspected autism referral, Suffolk and North East Essex ICB, 01 June 2024 – 01 June 2025



Source: [NHS England](#) (2025)

In June 2025, 1.0% of SNEE ICB patients with an open referral that had been open more than 13 weeks, had had a first appointment within the recommended 13 weeks.

Figure 21. Proportion of patients with an open suspected autism referral in the month that has been open for at least 13 weeks receiving a first appointment in 13 weeks or less, Suffolk and North East Essex ICB, 01 June 2024 – 01 June 2025



Source: [NHS England](#) (2025)

EHC plan timeliness

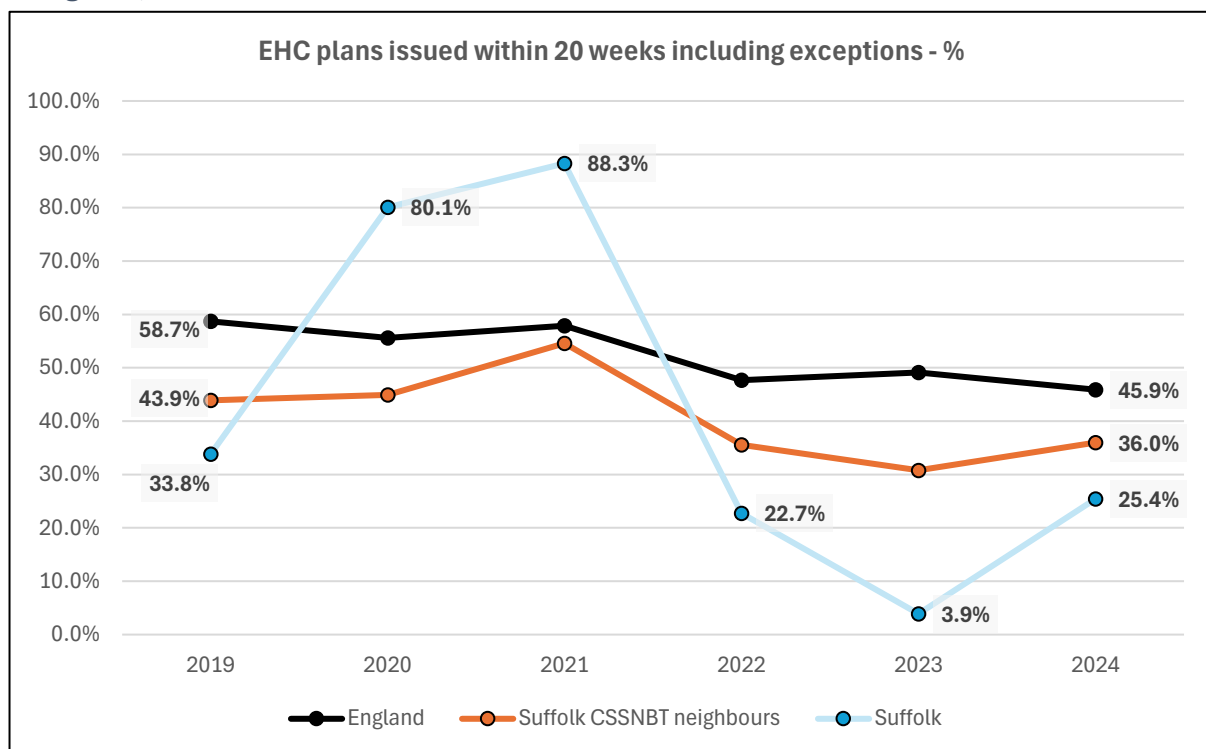
Suffolk's performance in issuing Education, Health and Care (EHC) plans within the statutory 20-week timeframe has shown significant variability over the past six years, with performance generally below both national averages and that of CSSNBT neighbours.

In 2024, Suffolk issued 25.4% of EHC plans within 20 weeks (including exceptions), compared to the England average of 45.9%. This represents an improvement from Suffolk's lowest performance in 2023 when only 3.9% of plans were issued within timeframe but remains below national performance. Suffolk's performance has varied considerably, ranging from a high of 88.3% in 2021 to the 2023 low of 3.9%.

The volume of EHC plans issued by Suffolk has increased over the period, rising from 851 total plans in 2019 to 1,366 in 2024, representing a 59.9% increase. This growth in demand coincides with a lower proportion of EHC plans being issued within the statutory 20 week timeframe. The number of plans issued within 20 weeks has fluctuated significantly, from 288 in 2019 to a peak of 609 in 2021, before dropping to just 35 in 2023 and recovering to 347 in 2024.

The data indicates that while Suffolk has made some recovery from 2023, significant improvements are required to achieve national performance levels and ensure families receive timely support through the EHC plan process.

Figure 22. Percentage of Education, Health and Care Plans issued within the statutory requirement (20 weeks), including exceptions, Suffolk, Suffolk CSSNBT neighbours, and England, 2019-2024

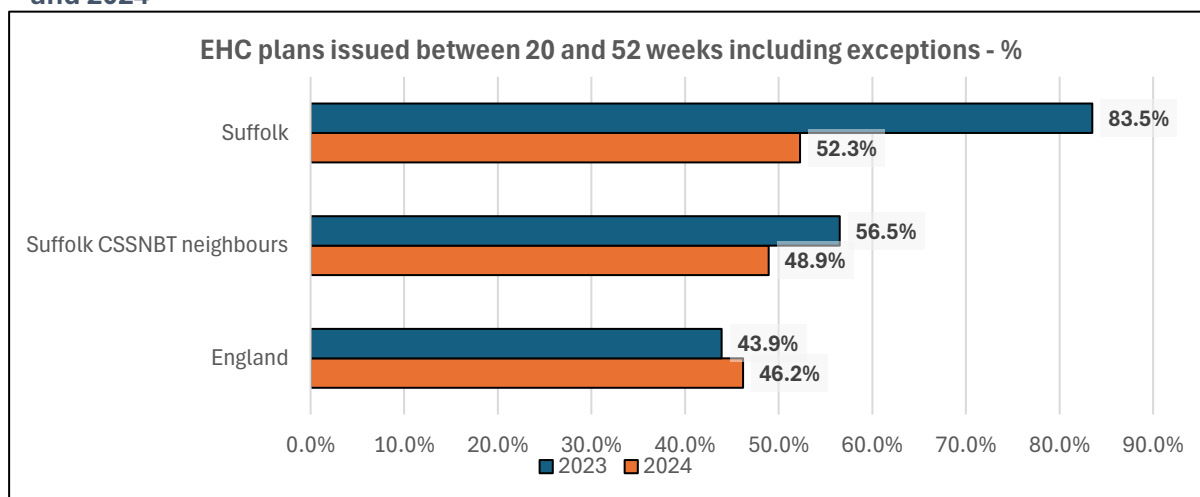


Source: [Department for Education](#) (2025)

Extended Timeframes for EHC Plan Completion

Analysis of plans issued beyond the 20-week statutory timeframe reveals additional challenges. In 2024, Suffolk issued 52.3% of EHC plans between 20 and 52 weeks (including exceptions), compared to the England average of 46.2% and CSSNBT neighbours at 48.9%. While Suffolk has made progress in reducing the number of plans taking under a year, the rise in plans taking over 52 weeks suggests that more families are waiting longer. The improvement in the 20-52 week category may mask the deterioration in the longest delays.

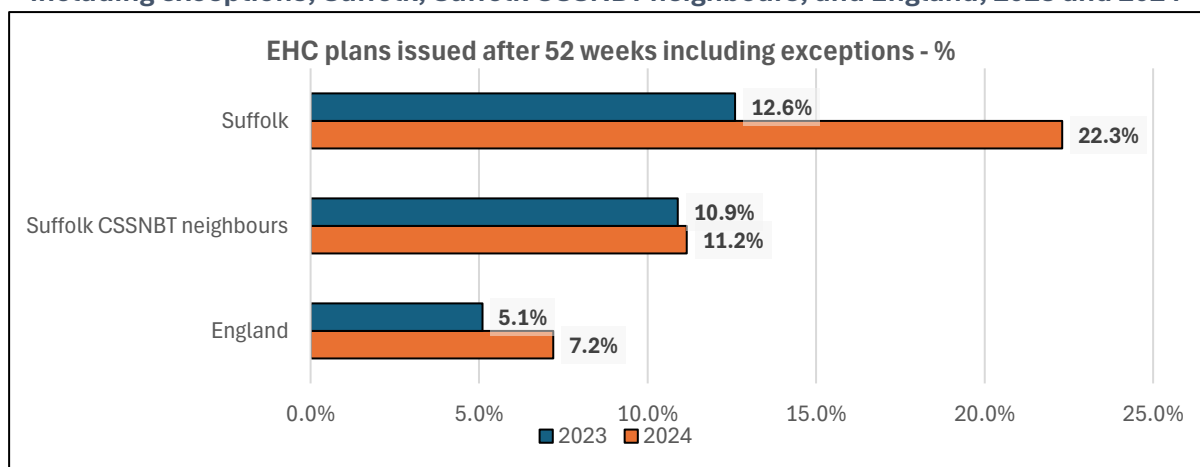
Figure 23. Percentage of Education, Health and Care Plans issued between 20 and 52 weeks including exceptions, Suffolk, Suffolk CSSNBT neighbours, and England, 2023 and 2024



Source: [Department for Education](#) (2025)

For EHC plans issued after 52 weeks (including exceptions) – in Suffolk in 2024, 22.3% of plans were issued after 52 weeks, compared to the England average of 7.2%, and worse than the Suffolk figure in 2023 (12.6%). CSSNBT neighbours showed marginally worse performance in this area, with 11.2% of plans issued after 52 weeks in 2024, compared to 10.9% in 2023.

Figure 24. Percentage of Education, Health and Care Plans issued after 52 weeks including exceptions, Suffolk, Suffolk CSSNBT neighbours, and England, 2023 and 2024



Source: [Department for Education](#) (2025)

The data indicates that significant improvements are needed for Suffolk to achieve national performance levels and ensure families receive timely support through the EHC plan process.

Requests for EHC needs assessments

Suffolk received 2,784 requests for EHC needs assessments in 2024, representing an increase of 625 requests (29.0%) from 2,159 in 2023. This growth rate exceeded both the England average increase of 11.8% and Suffolk's CSSNBT neighbours' increase of 12.7%, indicating particularly high growth in demand for EHC needs assessments in Suffolk.

In 2024, Suffolk decided to proceed with 85.2% of assessment requests, a notable increase from 77.1% in 2023. This exceeds both the England average of 65.4% and Suffolk's CSSNBT neighbours at 63.4%. This indicates that Suffolk accepts a higher proportion of requests for assessment.

Suffolk's rate of declining EHC needs assessment requests fell from 17.8% in 2023 to 9.6% in 2024, compared to England's 25.2% and Suffolk's CSSNBT neighbours' 28.3%.

Suffolk has very strong performance in meeting the six-week decision timeframe, achieving 100.0% compliance in 2024, improving from a very strong figure of 97.3% in 2023. This outperforms both England (84.8%) and Suffolk's CSSNBT neighbours (86.6%), with 0 decisions made after six week in Suffolk in 2024, compared to 2.7% in 2023.

The data reveals contrasting trends in dispute resolution processes. Suffolk experienced a decrease in the number of mediation cases, decreasing from 353 in 2023 to 142 in 2024, while both England and Suffolk's CSSNBT neighbours saw increases in mediation activity. However, Suffolk's tribunal cases increased slightly from 61 to 70, though this remains proportionally lower than the increases seen nationally and among Suffolk's CSSNBT neighbours. The number of cases where tribunals followed mediation increased from 10 to 18 in Suffolk.

Table 4. EHC Needs Assessment requests – England, Suffolk, and Suffolk CSSNBT neighbour performance, 2023 and 2024

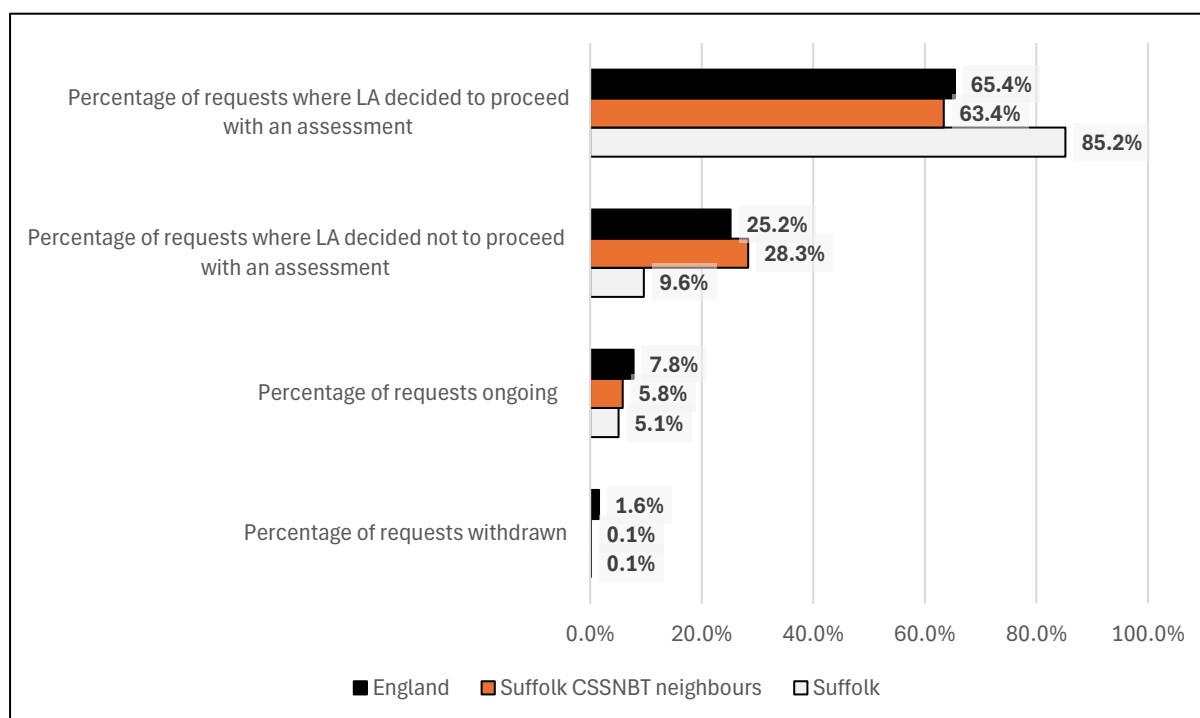
	England		Suffolk CSSNBT neighbours		Suffolk		Change
	2023	2024	2023	2024	2023	2024	
Total requests for an EHC needs assessment	138,242	154,489	22,744	25,630	2,159	2,784	625
Number of requests where LA decided to proceed with an assessment	92,985	101,045	15,050	16,243	1,664	2,373	709
Number of requests where LA decided not to proceed with an assessment	33,141	38,889	5,655	7,261	384	267	- 117
Requests where decision not made/number of requests ongoing	10,089	12,038	1,479	1,492	110	142	32
Number of requests withdrawn	2,027	2,517	560	634	1	2	1
Percentage of requests where LA decided to proceed with an assessment	67.3%	65.4%	66.2%	63.4%	77.1%	85.2%	8.1%
Percentage of requests where LA decided not to proceed with an assessment	24.0%	25.2%	24.9%	28.3%	17.8%	9.6%	-8.2%

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Percentage of requests ongoing	7.3%	7.8%	6.5%	5.8%	5.1%	5.1%	0.0%
Percentage of requests withdrawn	1.5%	1.6%	2.5%	2.5%	0.0%	0.1%	0.1%
Number of requests where decision made within 6 weeks	111,723	126,160	18,487	22,185	1,982	2,761	779
Number of requests where decision made after 6 weeks	19,863	22,593	3,205	2,327	54	-	- 54
Percentage of requests where decision made within 6 weeks	84.8%	84.8%	81.3%	86.6%	97.3%	100.0%	2.7%
Percentage of requests where decision made after 6 weeks	15.1%	15.2%	14.1%	9.1%	2.7%	0.0%	-2.7%
Number of requests subject to mediation	7,612	10,507	1,280	1,239	353	142	-211
Number of requests subject to a tribunal	3,576	4,655	804	1,174	61	70	9
Number of requests where tribunal followed mediation	1,014	1,473	159	268	10	18	8

Source: [Department for Education](#) (2025)

Figure 25. Status of EHC Needs Assessments requests in Suffolk, Suffolk CSSNBT neighbours, and England, 2024



Source: [Department for Education](#) (2025)

EHC needs assessments – outcomes

Suffolk experienced a 74.9% increase in EHC needs assessments between 2023 and 2024, rising from 1,048 to 1,833. This growth significantly exceeds both England's 16% increase (91,023 to 105,340) and Suffolk's CSSNBT neighbours' 25% increase (14,090 to 17,643).

Suffolk has very high plan approval rates – with 97.2% of EHC plan assessments resulting in an EHC plan in 2024, compared to 93.6% across England, and 91.3% across Suffolk's CSSNBT neighbours. While this is a slight decrease from Suffolk's rate in 2023 (99.3%), it remains higher in comparison to statistical neighbours, and the England benchmark. Similarly, only 2.8% of assessments in Suffolk did not result in a plan in 2024 (51 cases), compared to 6.1% nationally (6,404 cases), and 8.5% among CSSNBT neighbours (1,505 cases).

Suffolk recorded no outstanding decisions or withdrawn requests in 2023 or 2024, matching statistical neighbours' performance, and lower than the England figure, where 0.1% of cases remained outstanding and 0.3% were withdrawn in 2024.

Assessment-related mediations increased from 1 to 8 cases between 2023 to 2024, while assessment decision tribunals increased from 1 to 3. However, tribunals for other assessment reasons increased more substantially from 65 to 140 cases, though this remains proportionally lower than CSSNBT neighbours (929) and England (3,088) when accounting for assessment volumes.

The data indicates Suffolk faces increasing demand that exceeds regional and national trends while maintaining high approval rates.

Table 5. Outcome of EHC Needs Assessments – England, Suffolk, and Suffolk CSSNBT neighbour performance, 2023 and 2024

	England		Suffolk CSSNBT neighbours		Suffolk		Change
	2023	2024	2023	2024	2023	2024	
Total number of EHC needs assessments	91,023	105,340	14,090	17,643	1,048	1,833	785
Number of assessments where a plan was issued	85,924	98,547	13,087	16,110	1,041	1,782	741
Percentage of assessments where a plan was issued	94.4%	93.6%	92.9%	91.3%	99.3%	97.2%	-2.1%
Number of assessments where a plan was not issued	4,614	6,404	946	1,505	7	51	44
Percentage of assessments where a plan was not issued	5.1%	6.1%	6.7%	8.5%	0.7%	2.8%	2.1%
Number of assessments where the decision is outstanding	123	62	0	0	0	0	-
Percentage of assessments where the decision is outstanding	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%	-
Number of assessments where the request was withdrawn	362	327	57	28	0	0	-
Percentage of assessments where the request was withdrawn	0.4%	0.3%	0.4%	0.2%	0.0%	0.0%	-
Number of mediations related to assessment decision	1,549	2,124	286	303	1	8	7
Number of tribunals related to assessment decision	1,048	1,445	293	449	1	3	2
Number of tribunals following mediation related to assessment decision	333	475	61	77	-	2	2
Number of mediations related to assessment for other reasons	1,275	1,862	281	248	15	20	5
Number of tribunals related to assessment for other reasons	1,887	3,088	481	929	65	140	75
Number of tribunals following mediations related to assessment for other reasons	343	701	62	71	6	4	- 2

Source: [Department for Education](#) (2025)

Ceased EHC plans

Suffolk ceased 272 EHC plans in 2024, representing a small proportion of the total number of EHC plans in Suffolk, and the national total of 44,862 ceased plans. The reasons for cessation had notable differences when comparing Suffolk and England's patterns.

The most significant variation is in plans ceased due to maximum age being reached, which accounts for 29.8% of Suffolk's ceased plans (81 cases) compared to just 4.4% across England. This suggests Suffolk retains young people with EHC plans for longer periods.

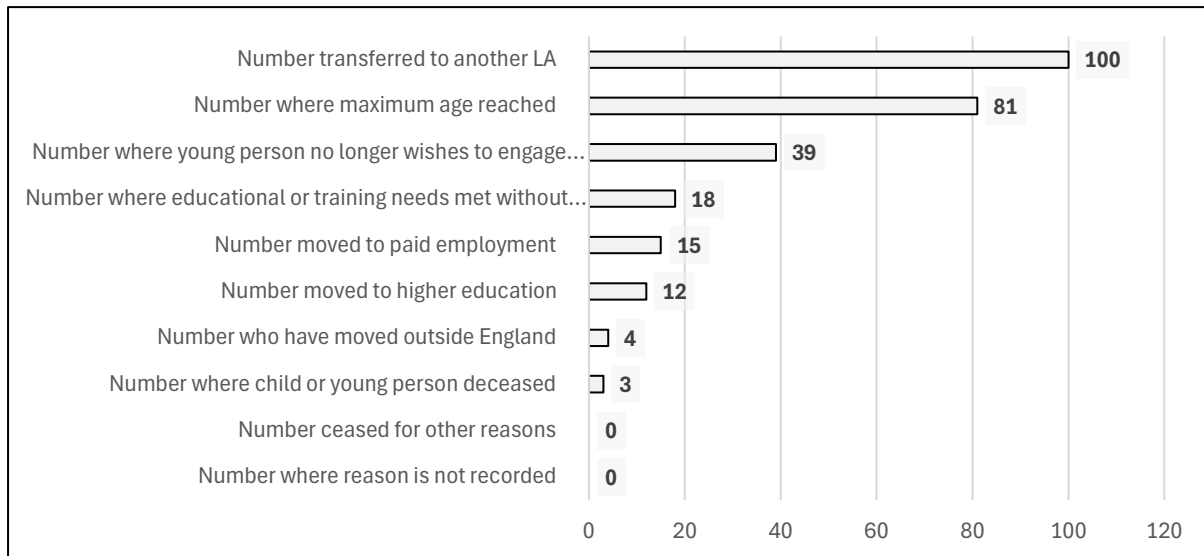
While Suffolk's data shows a higher proportion of ceased plans due to maximum age and a lower proportion due to disengagement, the small absolute numbers mean these patterns should be interpreted with caution. Further analysis would be needed to confirm whether these reflect sustained local trends or data variability.

Transfer to another local authority represents the largest single reason for plan cessation in Suffolk at 36.8% (100 cases), slightly higher than the national rate of 31.1%. This could be due to population mobility, and housing pressures affecting families with SEND children.

Plans ceased due to educational or training needs being met without a plan account for 6.6% of Suffolk cases (18) compared to 8.8% nationally. Movement to higher education represents 4.4% in Suffolk (12 cases) versus 5.7% nationally, while movement to paid employment accounts for 5.5% (15 cases) compared to 9.0% nationally.

Other cessation reasons remain similar between Suffolk and England, including movement outside England (1.5% versus 2.1%) and deceased young people (1.1% in both). Suffolk recorded no cases ceased for other unspecified reasons, compared to 1.9% nationally.

Figure 26. Number of EHC plans which ceased during the calendar year in Suffolk, 2024



Source: [Department for Education](#) (2025)

Table 6. Number of EHC plans and % of all EHC plans which were ceased during the calendar year in Suffolk and England, 2024

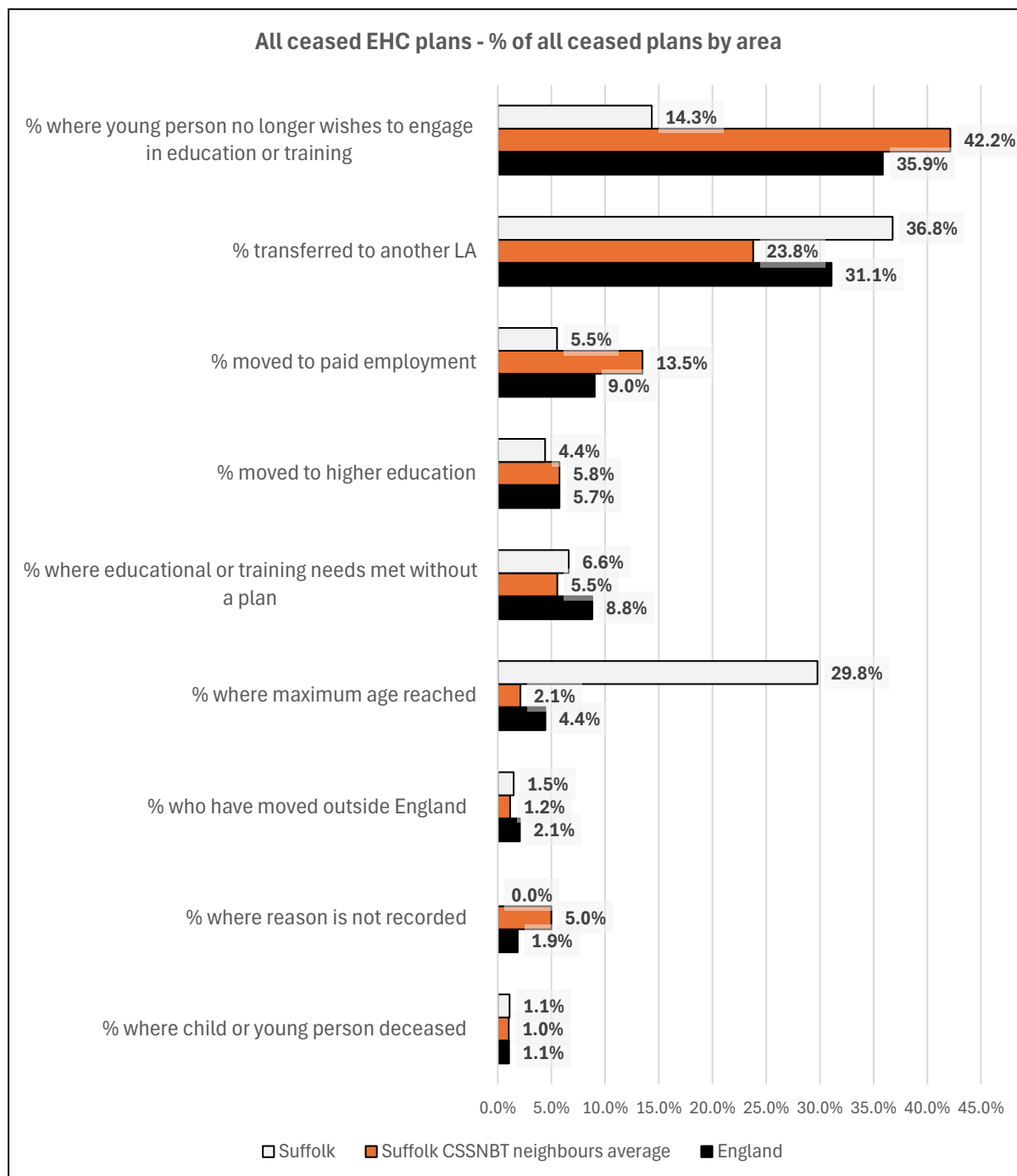
	England	% of ceased plans	Suffolk	% of ceased plans
Number where maximum age reached	1,990	4.4%	81	29.8%
Number where educational or training needs met without a plan	3,955	8.8%	18	6.6%
Number moved to higher education	2,579	5.7%	12	4.4%
Number moved to paid employment	4,053	9.0%	15	5.5%
Number transferred to another LA	13,953	31.1%	100	36.8%
Number where young person no longer wishes to engage in education or training	16,091	35.9%	39	14.3%
Number who have moved outside England	928	2.1%	4	1.5%
Number where child or young person deceased	475	1.1%	3	1.1%
Number where reason is not recorded	-	0.0%	0	0.0%
Number ceased for other reasons	837	1.9%	0	0.0%
Total number of ceased EHC plans	44,862	100.0%	272	100.0%

Source: [Department for Education](#) (2025)

Compared to CSSNBT neighbours, Suffolk has a distinct profile in reasons for ceasing EHC plans. A higher proportion of plans in Suffolk ended due to the young person reaching the maximum age (4.4% across Suffolk's CSSNT neighbours, 29.8% for Suffolk). Fewer were attributed to disengagement from education or training (42.2% for Suffolk's CSSNBT

neighbours, 14.3% for Suffolk), and for transferring to another local authority (23.8% for Suffolk's CSSNT neighbours, 36.8% for Suffolk). Suffolk also recorded no cases where the reason was unrecorded, in comparison to 5.5% among statistical neighbours.

Figure 27. Proportion of EHC plans which ceased during the calendar year by reason in England, Suffolk's CSSNT neighbours, and Suffolk, 2024



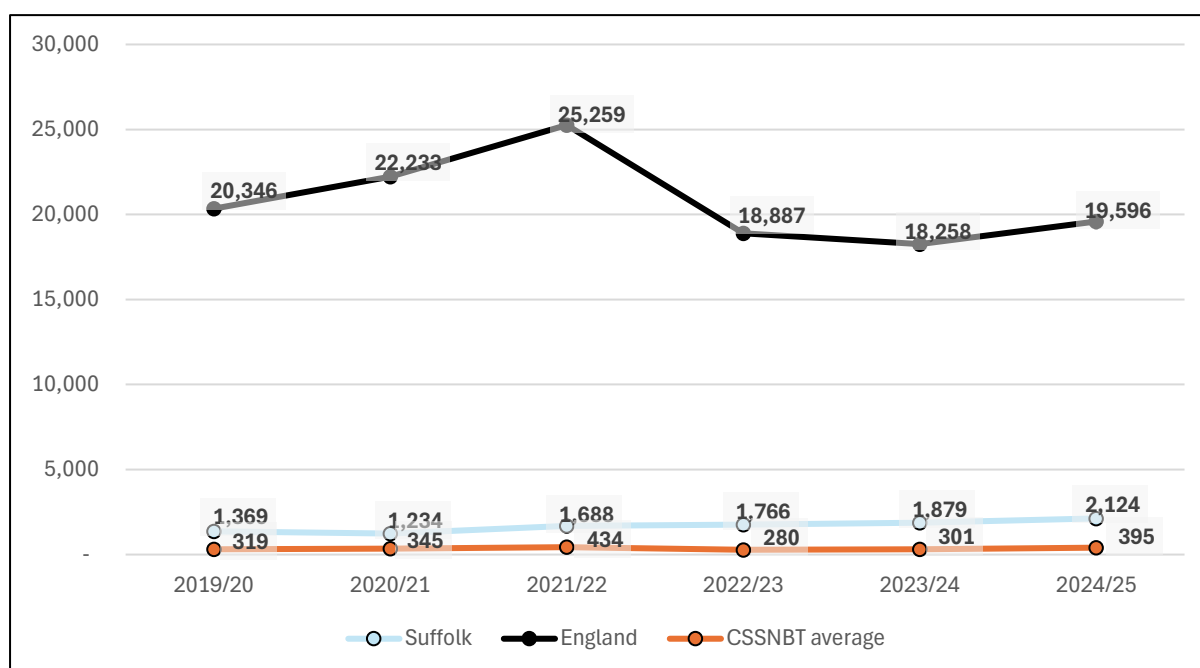
Source: [Department for Education](#) (2025)

Personal budgets

A personal budget is the amount of money a local authority will pay towards any social care support required as part of an EHC plan, depending on the kind of care and support required, how much it will cost, and how much an individual is able to afford themselves¹⁰. Across England, the National Sensory Impairment Partnership (NATSIP) plays a key role in advising and supporting local authorities and schools in improving outcomes for children with sensory impairment. NATSIP resources and benchmarking tools are widely recognised by the DfE and can support local planning and professional development.

Suffolk has had consistent growth in personal budget utilisation over recent years, increasing from 1,369 in 2019/20, to 2,124 in 2024/25 – a 55% increase. This growth contrasts with England and CSSNBT neighbour comparisons, with England's personal budget numbers peaking in 2021/22 (at 25,259), before declining to 18,887 in 2022/23, before increasing slightly to 19,596 in 2024/25 – a decline of 4% since 2019/20. Suffolk's CSSNBT neighbours have had more modest growth from 319 to 395 (a 24% increase), with a dip in 2022/23.

Figure 28. Total number of EHC plans with a personal budget in place, Suffolk, CSSNBT neighbours, England, 2019/20 to 2024/25

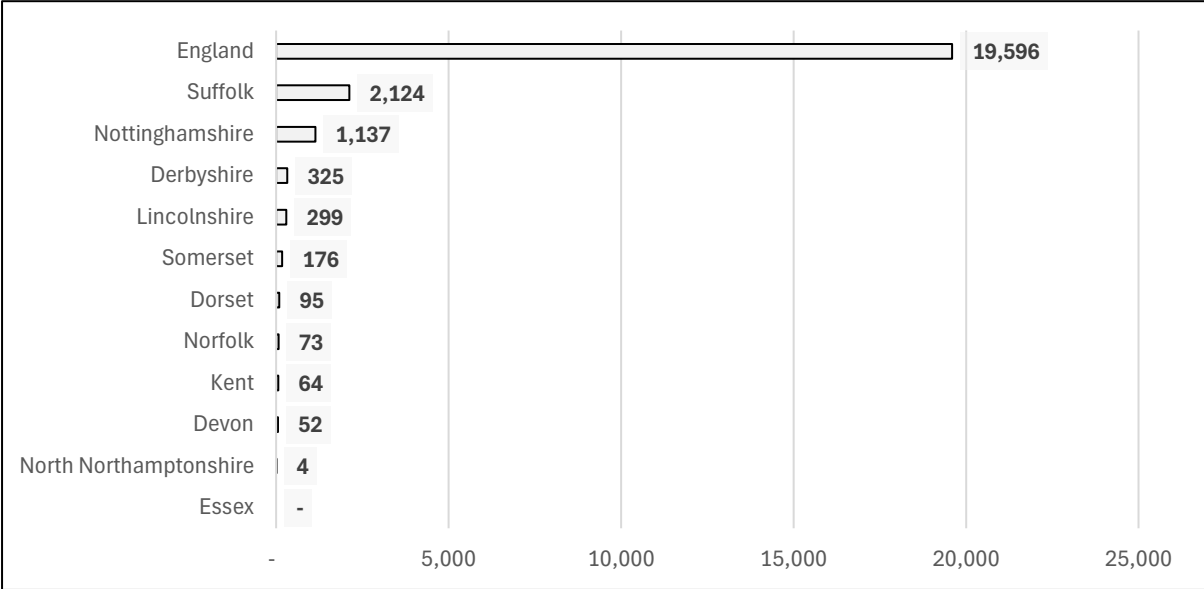


Source: [Department for Education](#) (2025)

Suffolk has exceptionally high utilisation of personal budgets within EHC plans, with 2,124 personal budgets in place during 2024/25. This is the highest among Suffolk's CSSNBT statistical neighbours and accounts for over 10% of England's total 19,596 personal budgets in 2024/25, despite Suffolk representing a much smaller proportion of the national population.

Among CSSNBT neighbours, Suffolk's provision substantially exceeds all comparators. Nottinghamshire, the second highest, recorded 1,137 personal budgets, while some neighbours including Essex recorded very few, or no personal budgets at all. This variation suggests significantly different approaches to personal budget implementation across similar local authorities.

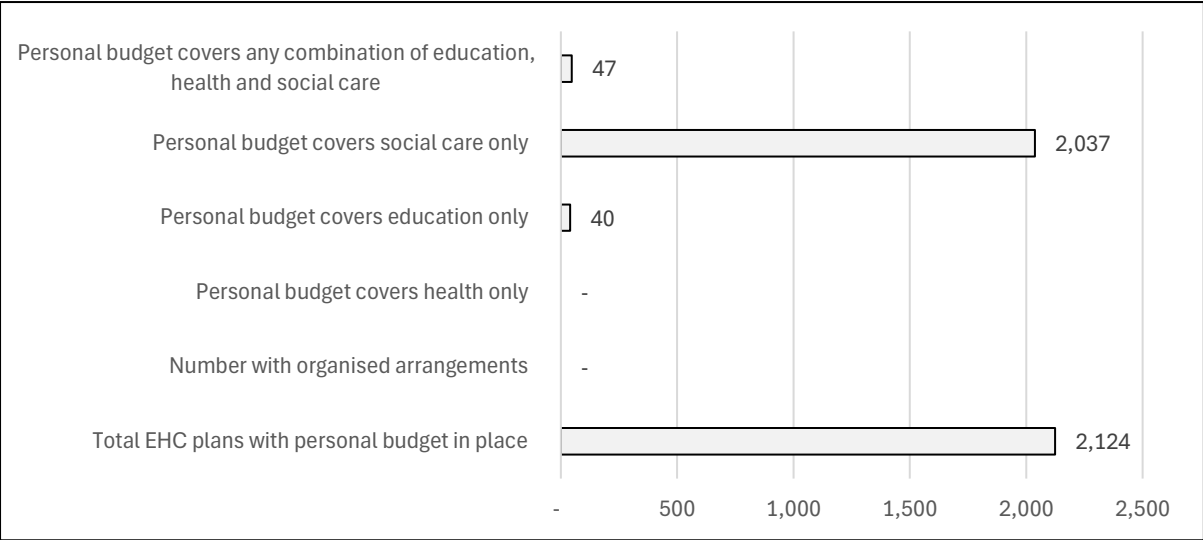
Figure 29. Total number of EHC plans with a personal budget in place, Suffolk and CSSNBT neighbours compared to England, 2024/25



Source: [Department for Education](#) (2025)

Most of Suffolk's personal budgets in 2024/25 (95.9% or 2,037 cases) cover social care only. This concentration on social care provision exceeds the national pattern, where social care-only budgets represent 64.2% of the total (12,580 cases). This is contributed to by the high volume of Suffolk Short Break personal budgets managed by Activities Unlimited. These budgets form part of the Short Break offer, and currently there are 3,900 children and young people with SEND in receipt of a Short Break personal budget in Suffolk. Education-only personal budgets account for just 1.9% of Suffolk's provision (40 cases), below the national rate of 16.1% (3,163 cases). Suffolk recorded 47 personal budgets covering combinations of education, health and social care (2.2%), compared to 5.8% nationally.

Figure 30. Total number of EHC plans with a personal budget in place and what the personal budget covers, Suffolk, 2024/25



Source: [Department for Education](#) (2025)

Updated projections

This SEND Needs Assessment data update presents a range of potential scenarios are to explore how the Suffolk SEND population may change by 2028/29.

- These scenarios aggregate row-level school census data in order to align with [local authority pupil forecasts](#) (published March 2025).
- To align with the local authority pupil forecasts dataset, **these projections only include pupils in mainstream schools** (primary and secondary). They therefore exclude early years year groups, sixth forms, independent and special schools, and further education settings.
- Figure 34 at the end of this section compares the differences between the three scenarios and includes the current number of pupils not included in these projections by 2029 (pupils in early years, sixth forms, independents and special schools).

Key limitations of these projections:

- Exclusion of children in non-mainstream educational settings
- Potential underrepresentation of young people with EHC plans up to the age of 25 who are not in education

However, what can be observed is the general upward trend in the number of children in mainstream education with SEND (**two scenarios model an increase of between 1,858 - 2,400 additional children with SEND in Suffolk by 2028/29**).

The following section updates the projections from the original SEND Needs Assessment with 2024/25 prevalence figures, alongside updated pupil forecasts for Suffolk until 2029.

These updated projections use data on SEND prevalence for school-age mainstream pupils between 2015/16 to 2024/25 and presents future projections to 2028/29. Data used to produce these projections include local authority pupil forecasts and the number and percentage of pupils receiving SEN support or with EHC plans between 2015/16 and 2024/25.

The following bullet points summarise the three different scenarios explored within this data update to estimate the possible future demand for SEN provision for school-age pupils in state-funded schools in Suffolk:

- **Scenario 1:** Maintaining the Suffolk SEND prevalence in 2024/25 (**18.0%**) for state-funded primary and secondary mainstream pupils (compared to **16.7% in 2023/24**, to the Suffolk school-age population from 2024/25 to 2028/29)
- **Scenario 2:** Using the average increase in SEND diagnoses for Suffolk's state funded primary and secondary mainstream pupils between 2015/16 to 2024/25 (**0.7% year-on-year**); continuing this increase for Suffolk pupils until 2028/29
- **Scenario 3:** Using the average increase in SEND cases between 2015/16 to 2024/25 for England (**0.5% year-on-year**), continuing this increase in SEND cases to the Suffolk school-age population from 2024/25 to 2028/29

Scenario 4 has been removed within this data update, as the average annual increase in the number of SEND pupils across Suffolk's CSSNBT areas, and the England figure was 0.5% year-on-year between 2015/16 and 2024/25, therefore producing very similar estimates.

Children and Young People with Special Educational Needs and Disabilities (SEND) 2025 data update

Internal school census data at pupil level is aggregated for only mainstream schools, and excludes nursery year groups and sixth forms. Internal data had to be used as publicly available [DfE SEND prevalence data for Suffolk schools between 2015/16 to 2024/25](#) does not match with [local authority pupil forecasts](#) which omit early years year groups, sixth forms, independent and special schools, and further education settings.

These projections are therefore estimates and should be treated with caution.

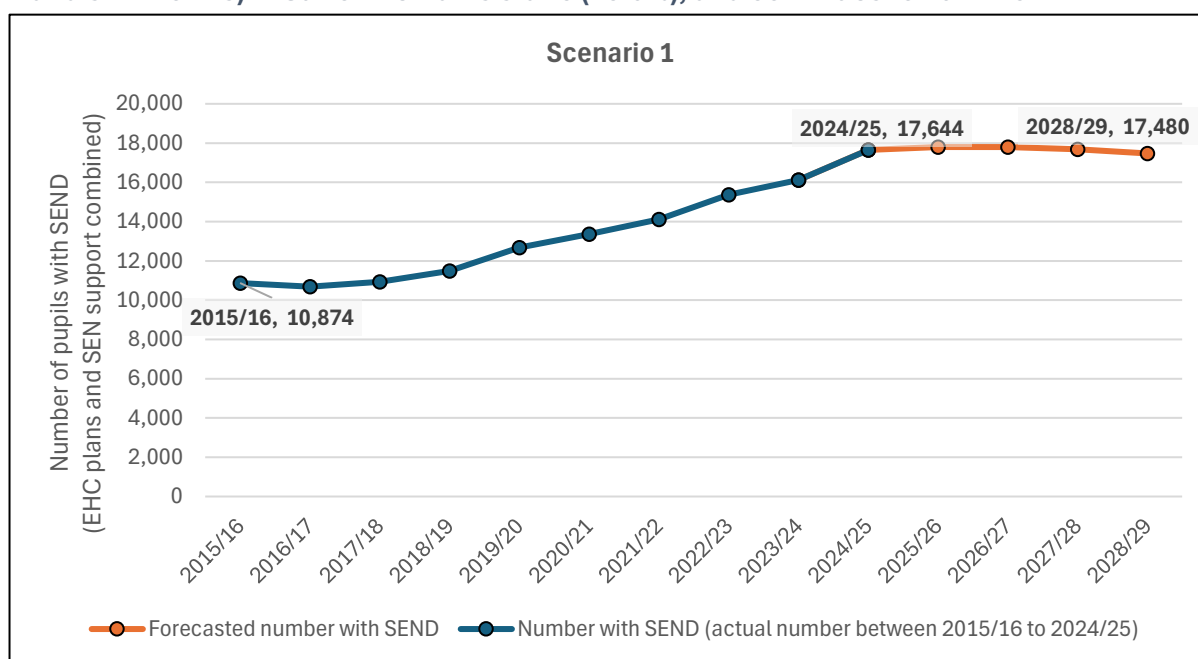
Scenario 1: Continuing the Suffolk SEND prevalence from 2024/25 – linear projection

The first scenario uses a conservative baseline projection, continuing the SEND prevalence for mainstream pupils (state-funded primary and secondary schools, excluding early years provision and sixth forms) in Suffolk in 2024/25 (18.0%) across the entire projection period from 2024/25 to 2028/29. This approach assumes a stable proportion of mainstream pupils requiring special educational needs support, despite future changes in demographics or diagnoses patterns.

This projection estimates a slight decrease in the number of mainstream pupils with SEND, as a result of the decrease in the overall mainstream school-age population in Suffolk, from 17,644 in 2024/25 to 17,480 in 2028/29, an overall decrease of 164 mainstream school children.

This scenario provides a benchmark for more dynamic projections to be compared against. However, it does not consider potential increases in SEND diagnoses rates driven by improved identification, changing diagnostic criteria, or changes in the incidence or prevalence of key conditions which may lead to SEND.

Figure 31. Scenario 1: The 2024/25 SEND prevalence for mainstream school-age children (state-funded primary and secondary schools, excluding early years provision and sixth forms) in Suffolk remains static (18.0%), and continues to 2027/28



Source: Suffolk County Council – School Census Analysis (2025); [Department for Education](#) (2025)

Children and Young People with Special Educational Needs and Disabilities (SEND) 2025 data update

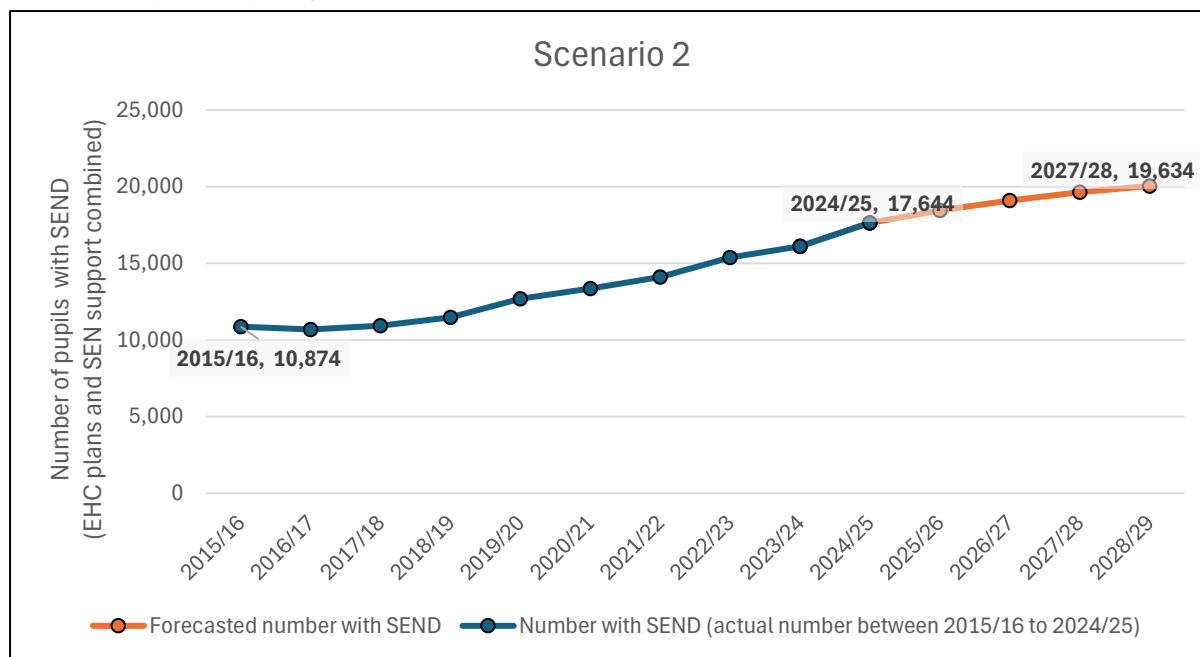
Scenario 2: Assuming the increase in Suffolk SEND diagnoses between 2015/16 to 2024/25 (0.7% year-on-year); continuing this increase for Suffolk pupils in SEND cases until 2028/29

This scenario uses the average year-on-year increase in SEND diagnoses in Suffolk between 2015/16 to 2024/25 (a 0.7% increase on average each year, increasing from 11.4% in 2015/16 to 18.0% in 2024/25), and applying this average increase to the projected Suffolk mainstream school-age children (state-funded primary and secondary schools, excluding early years provision and sixth forms) until 2028/29. This scenario provides a more nuanced picture, reflecting Suffolk's pattern of increasing SEND identification and support.

Scenario 2 suggests a continued increase in SEND cases from 18.0% in 2024/25 to 20.6% by 2028/29 (an average year-on-year increase of 0.7%). This projection considers both demographic changes, as well as a continued increase in the identification of SEND cases within Suffolk.

While the Suffolk mainstream school-age population is due to decrease marginally by 2028/29, due to the projected increase in SEND cases, scenario 2 estimates the number of SEND pupils will increase from 17,644 in 2024/25 to 20,044 by 2028/29. This represents an increase of 2,400 additional mainstream school-age children with SEND by 2028/29 in Suffolk.

Figure 32. Scenario 2: Continuing the average increase in SEND cases for Suffolk mainstream school-age pupils (state-funded primary and secondary schools, excluding early years provision and sixth forms) between 2015/16 to 2024/25 to 2028/29 (increase of ~0.7% year on year)



Source: Suffolk County Council – School Census Analysis (2025); [Department for Education](#) (2025)

Children and Young People with Special Educational Needs and Disabilities (SEND) 2025 data update

Scenario 3: Assuming the increase in England SEND diagnoses between 2015/16 to 2024/25 (0.5% year-on-year); continuing this increase for Suffolk pupils in SEND cases until 2028/29

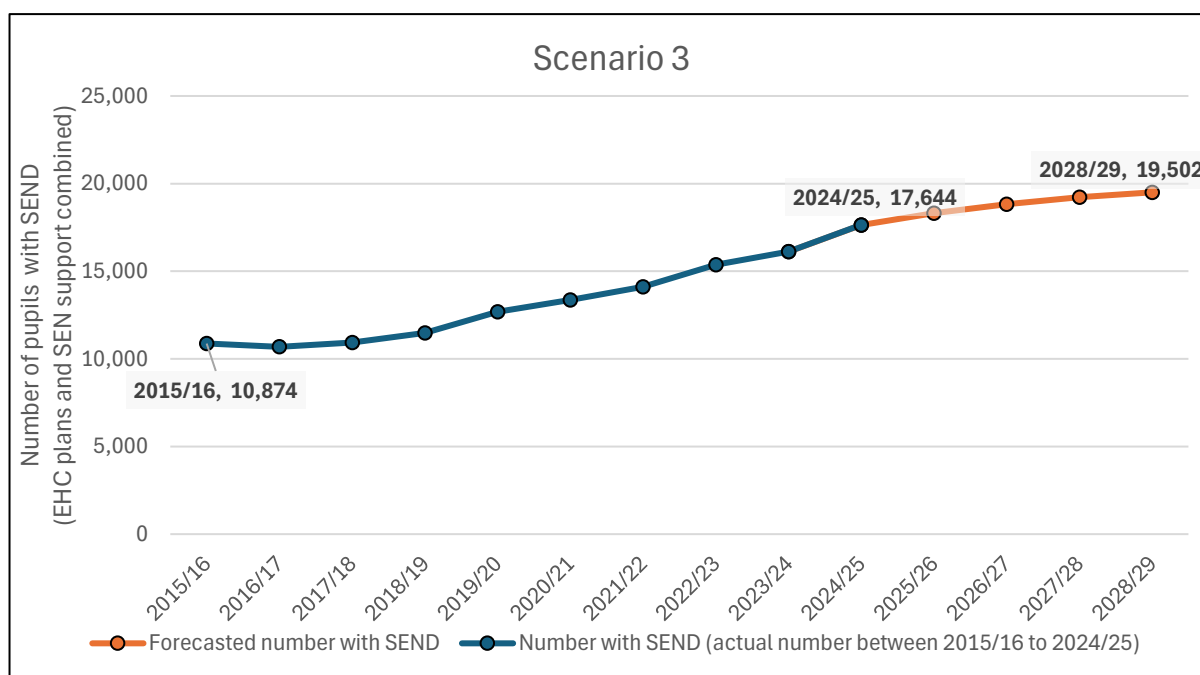
Scenario 3 applies the average increase in SEND cases observed across England between 2015/16 and 2024/25 to Suffolk's mainstream school-age population (state-funded primary and secondary schools, excluding early years provision and sixth forms). This approach utilises a broader, and marginally more conservative, national perspective on potential, SEND prevalence, offering a comparison to the static SEND prevalence, and the Suffolk year-on-year increased identification of SEND cases continuing.

This national projection portrays a more moderate increase in SEND prevalence, increasing from 18.0% in 2024/25 to 20.1% by 2028/29. Therefore, this would suggest an increase in the number of mainstream school-age children with SEND in Suffolk from 17,644 in 2024/25 to 19,502 by 2028/29 – an increase of 1,858 additional mainstream school-age children with SEND by 2029.

The average increase year-on-year for across Suffolk's CSSNBT neighbours between 2015/16 to 2024/25 was 0.532%, compared to an average increase across England during the same period of 0.520%. Due to how close these figures are, scenario 4 from the full SEND needs assessment (projecting the average increase across Suffolk's CSSNBT neighbours) has not been included.

Scenario 3 contextualises Suffolk's SEND trend with the broader pattern across England and provides a middle-ground projection between scenario 1 (linear/static) and scenario 2 (local trend scenarios).

Figure 33. Scenario 3: Using the average increase in SEND cases between 2015/16 to 2024/25 for England, continuing this increase in SEND cases to the Suffolk mainstream school-age population (state-funded primary and secondary schools, excluding early years provision and sixth forms) until 2028/29 (increase of ~0.5% year on year)



Source: Suffolk County Council – School Census Analysis (2025); [Department for Education \(2025\)](#)

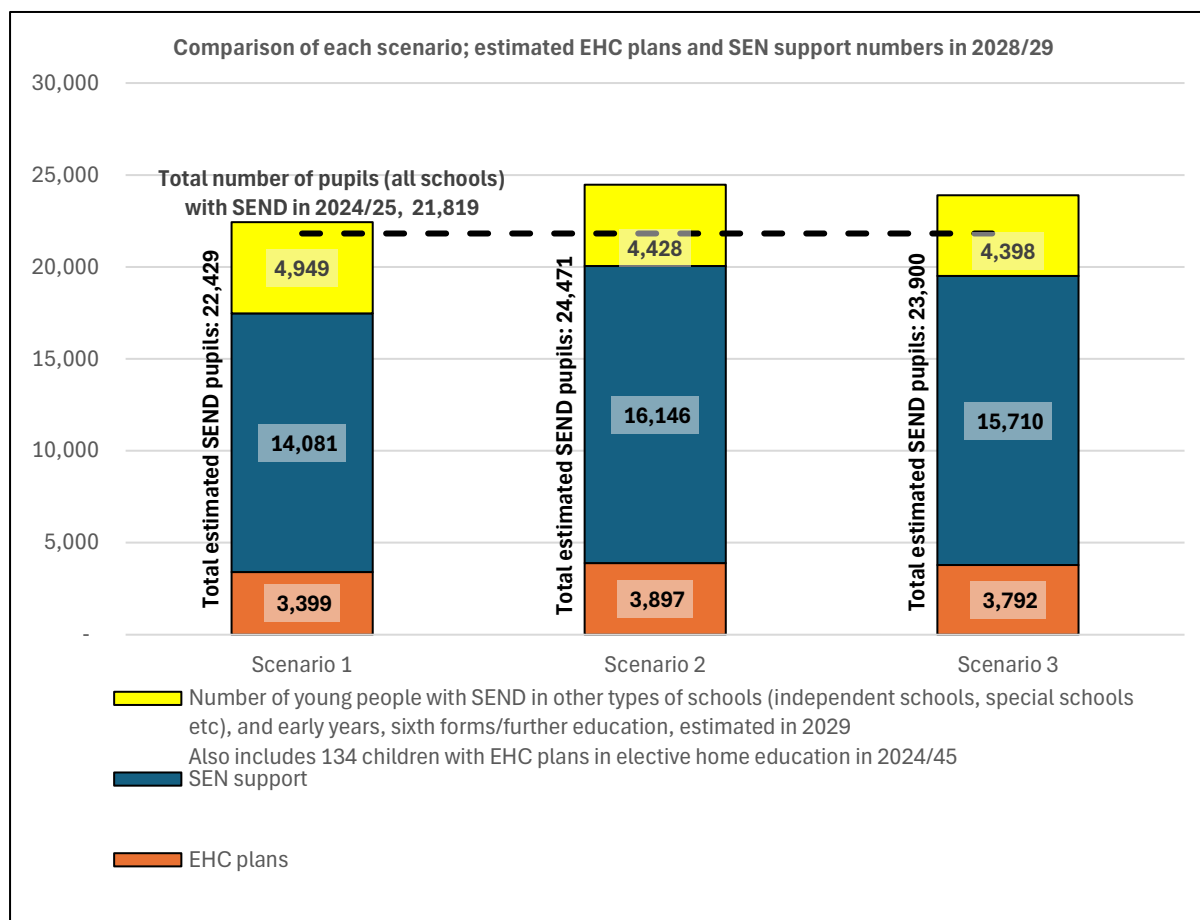
Comparison of projections

Comparing each of the three SEND projection scenarios reveals a significant variation. 2024/25 school census data provides a baseline of 17,644 school-age mainstream children with SEND in 2024. The below figure compares the three scenarios, also including in yellow the static number of pupils not included in these projections by 2029 (this includes pupils in early years, sixth forms, independents and special schools, as well as the number of children with EHC plans in elective home education in 2025 (134: [Department for Education](#))).

Scenario 1 (prevalence of SEND in Suffolk remaining the same – 18.0%) projects a small decrease in the number of SEND pupils to 17,480 (due to pupil forecasts projecting a decrease of 912 pupils in Suffolk schools by 2028/29). Scenario 2 (recent trend of Suffolk’s increased SEND cases continuing) has the most substantial increase to 20,044 mainstream children. Scenario 3 (Suffolk’s prevalence continuing to increase, but in line with the national average increase) offers an intermediate projection of 19,502 pupils.

These scenarios differ in total SEND numbers, but also in their underlying assumptions about EHC plans and SEN support, ranging between a decrease of 164 cases to 2,400 additional mainstream school-age children with SEND in Suffolk by 2028/29.

Figure 34. Comparison of projections for SEND provision in Suffolk under each of the three scenarios, with estimated number of mainstream school-age children requiring SEN support and EHC plans in 2028/29



Source: Suffolk County Council – School Census Analysis (2025); [Department for Education](#) (2025)

SEND Needs Assessment – July 2025 Update

Since January, the SEND Needs Assessment has been widely shared, with an easy read version published. Progress includes developing a Children's Outcome Framework (now moving into business case stage to improve qualitative feedback from children, young people, and families) and securing investment to increase Autism and ADHD service capacity, reduce backlogs, and review service pathways.

Governance of SEND provision has been reorganised, with work underway to align data and reporting. Permission has been granted to link NHS Population Health Management data with Suffolk County Council's Children's Data Warehouse, enabling a more holistic view of SEND needs for future planning. The SEND White Paper is now expected in 2026², with a refreshed Needs Assessment data update (this document) scheduled for the November 2025 Board meeting.

Recent system-wide work undertaken by Suffolk and North East Essex ICB has identified concerning trends in economic inactivity among young people with mental health needs, learning disabilities and neurodivergence. This work highlighted that vulnerable children and young people, including those with SEND, are at increased risk of disengaging from education, experiencing persistent absence or exclusion, and subsequently facing barriers to further education, training or employment. The ICB has proposed a 'Cradle to Career' integrated pathway approach between health, local authority and education services to address these challenges, though this work is still in development stages.

Where each recommendation has progressed to – August 2025 update

The following section explores the progress made to date (August 2025) on each of the recommendations listed within the SEND Needs Assessment published in January 2025.

1.	Conduct detailed engagement with service users on the novel findings of this Needs Assessment to inform the future planning. While significant engagement work has been done in Suffolk regarding SEND, this Needs Assessment offers new insights that require further exploration. Action 1: Following the publication of this needs assessment, embark on significant engagement activity, to gather the views and responses of children, young people, families, professionals and wider stakeholders to the findings of this Needs Assessment; and to co-create approaches to the challenges identified in the Needs Assessment which will improve outcomes in the future. Action 2: System partners to work collaboratively to consistently collate, analyse and use the qualitative data, experiential information and unstructured resource collected by partners working across the system to identify issues, drive and assess progress, and evaluate system actions. As part of this it is also recommended that the qualitative data currently gathered (surveys etc) is reviewed with system partners to ensure it is valid and meaningful. Examples within this work include: • Improve data collection, quality and sharing protocols to understand the SEND experience • Work with the SEND partnership to use the findings of the Experience data audit to inform the system. Action 3: Build on existing efforts to include the voices of children and young people to deepen understanding of their lived experiences, outcomes, and the impact of services. Ensure this remains a central, ongoing focus, with continuous refinement and enhancement. • Include children and young people in the sufficiency planning and development work following this Needs Assessment • Work with existing networks and groups of children and young people to review the data in this Needs Assessment to explore their views and proposed next steps. • Utilise the voice of children and young people to improve understanding the experience of being a young person with SEND in Suffolk Impact: This approach can build trust between families and services, ensuring services are responsive to and reflective of user needs and views, while supporting co-production principles. Alignment with strategy: <i>Communication and accessibility:</i> Ensures co-production and inclusive service development. Link to Priority Action Plan: <i>Builds on Action Plan recommendation to ‘maintain and develop opportunities to hear the voice of children, young people, their parents and carers and practitioners to inform and co-produce improvements across the SEND partnership’.</i>
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	Progress: This recommendation also ties into recommendation 4, as part of the development of the Children's Outcome Framework (COF). Phase 1 has been completed, with indicators currently being scoped to identify gaps where SEND children's views and experiences need to be captured to populate the COF. To use Children and Young People's voice as part of sufficiency planning, the Children in Care Council/iWill will be engaged as part of this process.
2.	While the Needs Assessment has found some evidence of improved waiting times, many children and young people are still waiting too long for assessment, diagnosis and treatment for a wide range of SEND needs. Action 1: Ensure that plans and resources are in place to address the current backlogs and long and increasing waiting times which are occurring in some parts of SEND service provision, including for specialist school places. Action 2: Lobby government for more resources for health services, education placements and local authority services for children and young people with SEND. Action 3: Where possible, shift focus onto creating more education settings which are fully inclusive. Impact: Minimise the negative impacts on child development, learning, communication, inclusion, and inequalities, currently being caused by long waits. Alignment with strategy: <i>Timeliness and quality; Right Support, Right time.</i> Link to Priority Action Plan: <i>Builds on all the elements of the Right Support, Right Time commitment and is a fundamental enabler of many elements of the Priority Action Plan.</i> Progress: Funding has been received from Suffolk and North East Essex ICB to reduce waiting times, specifically for the ADHD waiting list. Meeting with Cabinet Members, Assistant Director for Knowledge, Intelligence and Evidence and Head of SEND Services with Suffolk MPs and County Councillor to share the findings of the Needs Assessment and lobby for further resource for children with SEND in Suffolk.
3.	Ensure that future planning and service provision is informed by a clear understanding of the inequalities which may be present in Suffolk's SEND provision today, including in relation to gender, age, ethnicity, and in relation to school attendance. Ensure that different needs associated with protected characteristics amongst the population of children and young people with SEND are effectively recognised and planned for, and that the wider unfair and avoidable inequalities in differences in outcomes for children and young people with SEND in Suffolk are tackled head on. Action: Identify all areas within this Needs Assessment, and more widely within services including school attendance, where inequalities are present, describe them clearly, and work to address them, monitoring impact. Review the current offer and identify gaps in data and further areas for development via current networks (building on JSNA data). Conduct further engagement and data collection to understand the experience of under-represented groups and those facing specific inequalities in relation to SEND demand and support. Impact: Minimise the unfair and avoidable differences in outcomes experienced by some children and young people with SEND within the SEND cohort, and between children and young people with SEND and those without.

	Alignment with strategy: <i>Timeliness and quality; Right Support, Right time.</i> Link to Priority Action Plan: <i>Builds on all the elements of the Right Support, Right Time commitment and is a fundamental enabler of many elements of the Priority Action Plan.</i> Progress: Findings and key messages from the needs assessment have been produced in different formats, such as an easy-read, PowerPoint slide deck, and an infographic. These findings and different formats have been shared widely, for instance with the Suffolk Health and Wellbeing Board and other forums, such as with the Children and Young People's Leadership Team. Sufficiency Planning for SEND provision is now underway and will be supported by new School Census dashboards which make it much easier to understand intersectionality within the Suffolk SEND population, including characteristics such as ethnicity, gender and area deprivation levels.
4.	Finalise and publish the Suffolk Children's Outcome Framework and continue to improve local SEND reporting to bring together operational data with key strategic data. Action 1: A better understanding of the lived experience of children and young people, parents and carers is critical to understanding impact, experience and outcomes. The whole system should commit to capturing a wider set of outcome measures in the SEND Data Dashboard, to create a more holistic picture of impact. These should include qualitative data sources, unstructured information and experiential data. Action 2: Review current SEND reporting and create a combined system-wide dashboard to ensure data is aligned across the system, consistent, comprehensive and brings in key strategic data (such as the findings of the annual School Census) alongside operational data. Impact: Will provide a holistic understanding of whether SEND provision and experiences are improving in Suffolk than just using quantitative data. Dashboards will enable ongoing monitoring, identify emerging trends and provide the ability to forecast ahead on a routine basis, supporting data-led decision-making, investment and priority setting. Alignment with strategy: <i>Timeliness and quality; Right Support, Right time; Enhanced communication.</i> Link to Priority Action Plan: Is a key enabler of many elements in the Priority Action Plan including to 'systematically plan effective services and use resources to meet children and young people's needs'. Progress: Work has progressed to develop the Children's Outcome Framework (COF), with proposed outcomes populated under a series of domains around children's health and wellbeing. Phase two is now in progress, and will define what the outcome domains in the Suffolk SEND Strategy mean to children and young people with SEND in Suffolk, and how they can be accurately measured.
5.	Improve the future planning for the provision of SEND services in Suffolk, noting that the needs and numbers of children and young people with SEND in Suffolk are likely to increase further in the coming years, despite decreasing numbers of births. Action 1: Use the data, estimates, scenarios and projections within this Needs Assessment, and the findings from the review of academic evidence, particularly in relation to dramatic changes in trends in identification and diagnosis rates and in

	relation to the impact of the pandemic, to plan and understand how future needs in Suffolk are likely to change over time, including for specialist school places. Action 2: Use the SNEE PHM linked dataset to explore how autism diagnoses are coded, and whether that coding facilitates a greater understanding of how the spectrum of autism is presenting locally, and what that might imply for future service planning. Action 3: Explore whether the recent requirement for statutory partners to record those individuals who require reasonable adjustments can assist in understanding SEND need. Action 4: Once approval is received from NHS England, utilise Population Health Management (PHM) tools to integrate SEND data (education, social care, early years, early help, youth justice, NEET) with existing linked health datasets (primary care, community care, acute care, mental health care). Develop a linked data platform to enable a comprehensive view of SEND-related health, education and social care needs at child level and facilitate future sufficiency planning being done holistically and in far greater detail than previously. Impact: Supports the whole system to understand the scale of the likely future need, to allocate system resources accordingly, and to anticipate likely future need. Linking SEND and health data will facilitate a holistic understanding of SEND needs in Suffolk, enabling targeted resource allocation, much better sufficiency and capacity planning, and earlier interventions. Also supports improved sufficiency and capacity planning in wider work including for children's social care, early years, early help, school transport and education, further enabled through co-production. Alignment with Strategy: <i>Timely and quality data and Right Support, Right Time:</i> Supports the priority of ensuring high-quality and timely information for future planning and service improvement. Link to Priority Action Plan: <i>Builds on Action Plan recommendation to 'systematically plan effective services and use resources to meet children and young people's needs'.</i> Progress: Findings from the needs assessment are being used to inform the sufficiency planning for 2025. This data update provides information on how trends in identification and diagnosis rates are affecting future demand within Suffolk. Work is ongoing to integrate CYP data held by SCC into Suffolk's PHM system which will then provide a comprehensive dataset, linked at person level, to understand the health and care needs of Suffolk's SEND population further. NHS England approval for this work was received in the summer of 2025, and we hope to have built the linked dataset by December 2025. A detailed internal Power BI dashboard has also been produced to further understand the SEND cohort within Suffolk, as well as aligning with modelled projections until 2028/29.
6.	Many of the conditions which can lead to children and young people having special educational needs and disabilities are not preventable. The academic literature does however suggest that there are some possible modifiable risk factors at population level for conditions which may lead to SEND, although more research is needed in this area. Prioritising and supporting women's health, both pre-pregnancy and during maternity, may be important here, as may wider societal factors which support healthy living, such as air pollution and socio-economic deprivation. Action: Ensure the findings of the Needs Assessment are shared with key groups responsible for maternal health and healthy environments and used to inform action planning so that any preventable population risk factors can be reduced in the future.

	Impact: While many of the conditions which can lead to SEND needs are not preventable, taking action to prevent or reduce risks where that may be possible could help to improve outcomes in the future. Alignment with Strategy: <i>Right Support, Right Time.</i> This strategic commitment should expand to clearly encompass prevention work which, where supported by a strong evidence base, could contribute towards decreasing the prevalence of conditions or risk factors which could lead to SEND in the future. Link to Priority Action Plan: <i>Builds and expands on Action Plan recommendation to 'provide support at the earliest opportunity'.</i> Progress: Findings of the needs assessment have been shared at a huddle with the Public Health and Communities directorate, where the wider determinants team were present. Work is now being taken forward through the directorate's four pillar plans: • Pillar 1: Communities, Place Making and Inclusion - Focus on tackling inequalities, linking with prevention of risk factors that can increase SEND prevalence • Pillar 2: Children & Families, Health Protection and Sexual & Reproductive Health – Maternal health and pre-pregnancy wellbeing have been highlighted as priority areas for embedding the findings of the needs assessment • Pillar 3: Working Age & Older People – Opportunities to strengthen intergenerational approaches and parental wellbeing (e.g. supporting young parents and those with existing health inequalities) are being scoped • Pillar 4: Business, Finance, Performance, Digital & Comms – The importance of prevention in relation to SEND, and communications to ensure sustained visibility across the system
7.	There are some factors where Suffolk appears to be an outlier in the Needs Assessment, notably in numbers of EHCPs being formally 'ceased' where a plan is no longer required to support a person; the very high use of personal budgets; and a comparatively high rate of mediation cases being held. Action: Explore further why Suffolk's data in relation to these factors appears different to other similar Authorities. Impact: Ensure our practice in these areas is reasonable and appropriate, build on areas of good practice, and make other changes if required. Alignment with Strategy: Depending on the findings of the investigative work, likely to link to <i>Timeliness and Quality and Right Support, Right Time.</i> Link to Priority Action Plan: Depends on the findings of the investigative work. Progress: Data within this update includes breakdowns of EHC plans being ceased and comparison to statistical neighbours, and the England average. This document also includes further detail of personal budget use in Suffolk compared to England as a whole, with breakdowns on what the budgets are used for.
8.	Lobby for better national data to support local SEND planning, which is consistent, frequent, accurate, comparable and timely. Action: Advocate for better national information on the likely future needs and scale of those needs to support children and young people with SEND. Impact: The National Audit Office report published in October 2024 states that '<i>the Department for Education does not know with confidence how much capacity should be</i>

	<i>planned, and where, to meet future needs</i>'. Our local work as part of this Needs Assessment has been hampered by ONS population data which is out of date, and estimates from Explore Education Statistics which are inaccurate for Suffolk. If national data sources are inaccurate and do not add up, that limits effective local planning, as well as hindering the understanding of the scale and nature of the challenge in SEND provision at a national scale. Alignment with Strategy: <i>Timely and quality data:</i> Supports the priority of ensuring high-quality and timely information for planning and service improvement. Link to Priority Action Plan: <i>Builds and expands on Action Plan recommendation to 'systematically plan effective services and use resources to meet children and young people's needs'</i> Progress: Sub-national population projections have been updated in 2025 and have been used alongside school's pupils projections figures and the latest SEND data for 2024/25, to update the projections created within this document. The challenge of the datasets aligning with SNPP projections was also mentioned to Suffolk MPs as a caveat to the projections produced as part of this needs assessment.
9.	Note the potential longer-term implications of the population-level risk factors, many of which have the potential to span generations within families. Action: The evidence base shows that many population-level risk factors for SEND are not preventable and may occur intergenerationally within families. Taking effective action now to support and address the full range of SEND needs in our children and young people, and to provide effective support for wider families, alongside reducing population-level risks wherever possible, are therefore crucial to improving outcomes and need in the future. Impact: People are not able to be 'included, supported, fulfilled' and needs arising from SEND may continue to increase over time. Alignment with strategy: <i>Right Support, at the Right Time.</i> Link to Priority Action Plan: <i>Builds and expands on Action Plan recommendation to 'systematically plan effective services and use resources to meet children and young people's needs'</i> Progress: Findings from the literature review and the risk of intergenerational risk factors within families have been shared as part of the dissemination of findings from the needs assessment internally and externally.
10.	Consider which specific cohorts of children and young people with SEND were most impacted by the Covid-19 pandemic, and by the measures put in place to contain the pandemic, and consider whether additional support and resources, of what type and where, are required to address the disproportionate learning losses sustained by many children and young people with SEND in the period 2020-2022. Action: All Suffolk SEND partners, to identify the cohorts most affected and determine gaps in support. Develop and implement targeted interventions, with input from families and professionals, to mitigate learning losses and prevent further widening of educational outcome disparities. Impact: Ensure that the divergence in educational outcomes already experienced by children and young people in Suffolk with SEND when compared pupils without SEND, and pupils with SEND in the rest of the country, do not widen still further.

	Alignment with Strategy: <i>Timeliness and Quality and Right Support, Right Time.</i> Link to Priority Action Plan: not included in Action Plan, a new recommendation. Progress: This recommendation has been flagged for provision partners.
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Conclusions

This 2025 comparative data update reinforces the scale and complexity of Suffolk's SEND landscape, while considering the backdrop of national policy change. The upcoming SEND White Paper, now expected in 2026², will provide direction for how the system responds to ongoing pressures locally and nationally.

Despite a decreasing overall pupil headcount over the last year, Suffolk continues to see sustained increases in the number of children and young people requiring either an EHC plan or SEN support. In 2024/25, over 21,800 Suffolk pupils were identified as having SEND; an increase of more than 1,500 on the previous year. The proportion of pupils with Education, Health and Care (EHC) plans has now more than doubled since 2015/16, rising from 2.5% to 5.4%, while the proportion receiving SEN support has also continued to increase, from 13.5% in 2023/24 to 14.3% in 2024/25.

The total number of EHC plans on school census day (not just schoolchildren, but any individual with an EHC plan aged 0-25 in Suffolk) has increased year-on-year across all age groups, with 8,837 plans in 2024/25 - a 12.4% rise from 2023/24. The demographic profile remains skewed towards males (69% of plans). Early years and secondary phases are showing marked increases in identification. New plans issued have risen sharply since 2020, which is likely to be reflecting both increased demand, and a greater recognition of needs.

Primary needs in Suffolk continue to be concentrated in five areas; Speech, Language and Communication Needs, Social, Emotional and Mental Health, Autism, Specific Learning Difficulty, and Moderate Learning Difficulty - together accounting for over 3 in 4 of all SEND cases.

Performance on EHC plan timeliness shows partial recovery from the 2023 position, with 25.4% of plans issued within the statutory 20 weeks in 2024. However, this remains well below the national average, and extended delays beyond 52 weeks remain a significant challenge. At the same time, Suffolk has accepted a higher proportion of assessment requests (85.2%) than both national and statistical neighbour averages, and in 2024 achieved 100% of requests where decision made to assess was made within 6 weeks.

Ceased plans remain relatively low in volume but reveal important differences, with Suffolk having a much higher proportion ending due to young people reaching maximum age than seen across England. Meanwhile, personal budget use continues to increase, though these remain heavily concentrated on social care provision within Suffolk.

Looking ahead, updated projections suggest a range of possible futures for Suffolk's SEND cohort, depending on prevalence trends. Even under the lowest-growth scenario, needs remain high and pressure on resource remains significant. Under the higher-growth scenario, the number of SEND pupils in mainstream schools could increase by over 2,500 by 2028/29.

Overall, Suffolk's SEND system is experiencing sustained growth in demand and complexity, requiring a continued focus on early identification and timely assessment. The awaited national reforms present an important opportunity to reshape provision, but the data presented here underlines that substantial local and system-wide challenges remain.

References

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