

# SEND Joint Strategic Needs Assessment (JSNA)

Key Findings

March 2026

## Chapters

1. Scope &  
Strategic Context

2. Wider  
determinants

3. SEN Population  
Profile

4. Education

5. Social Care

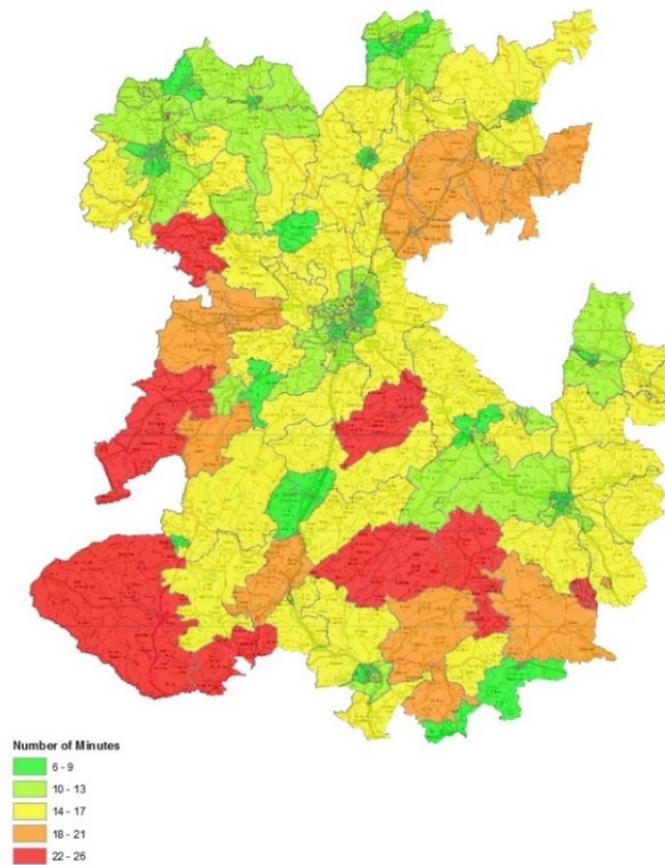
6. Health

7. Stakeholder  
engagement

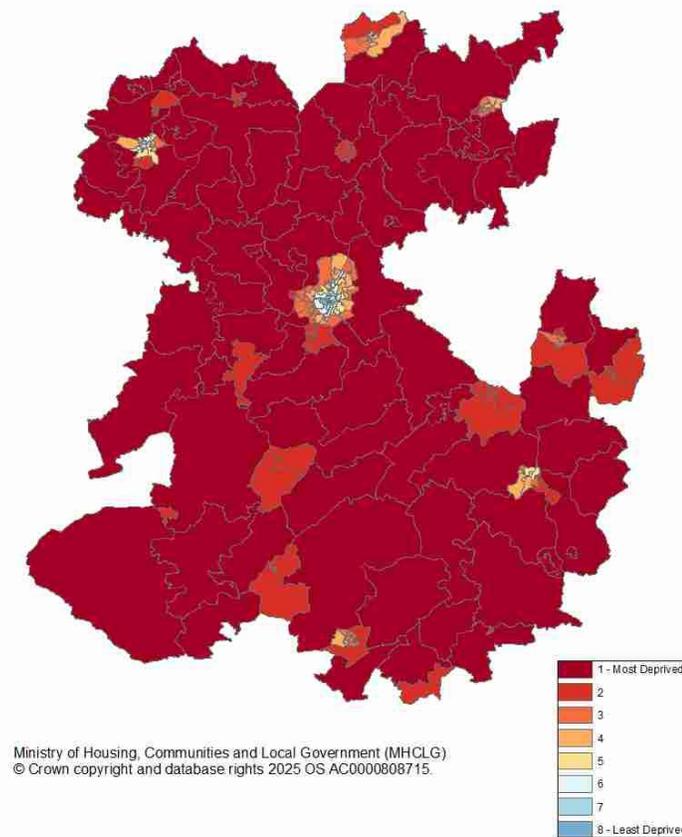
8.  
Recommendations

- 57% of the population live in rural areas, of which 26% are aged 0-25
- Travel times to school are longer in Shropshire compared to national averages, especially for those that walk or rely on public transport. Average journey times using public transport – 13 minutes to primary school (9 minutes nationally) and 28 minutes to a secondary school (18 minutes nationally)
- Shropshire became slightly more deprived between 2015 and 2025 but is still less deprived than 52% of local authorities in England. 154<sup>th</sup> most deprived LA (out of 296).
- Barriers to housing and services pronounced in rural areas – almost all rural LSOAs in Shropshire are in the 20% most deprived areas nationally
- 1,515 households at risk of homelessness, of which 10% have SEND-related support needs

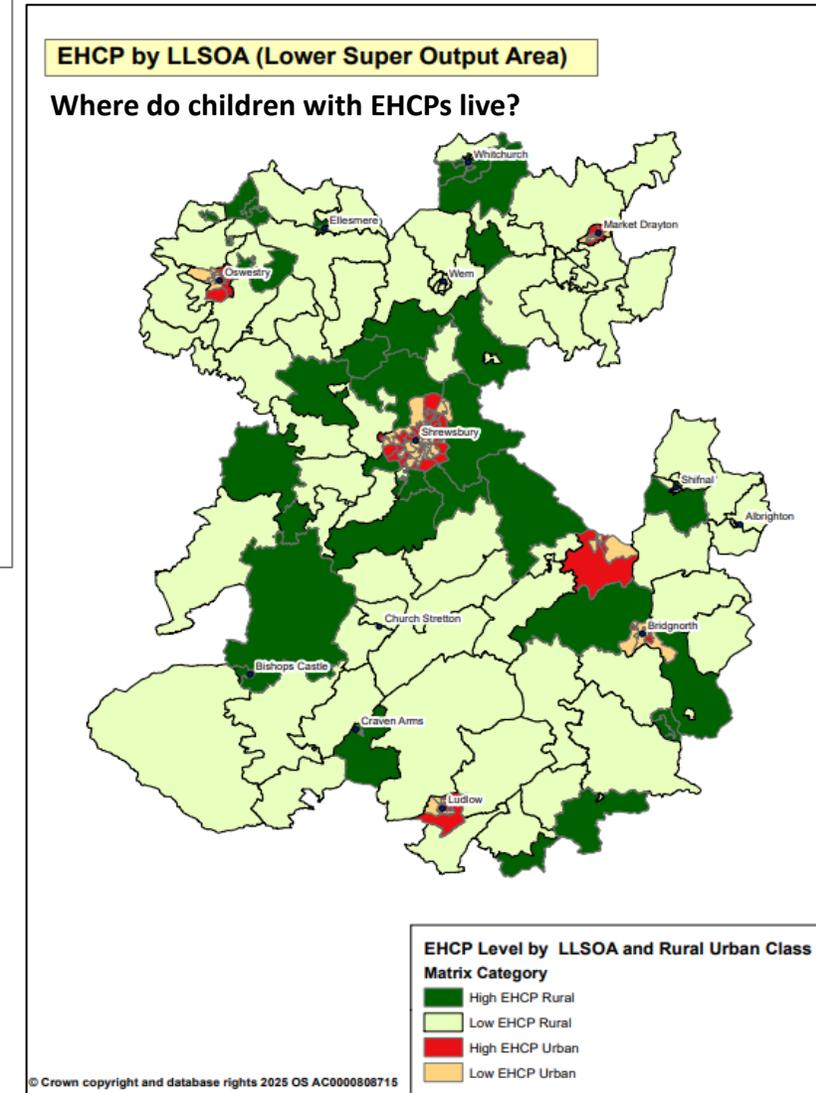
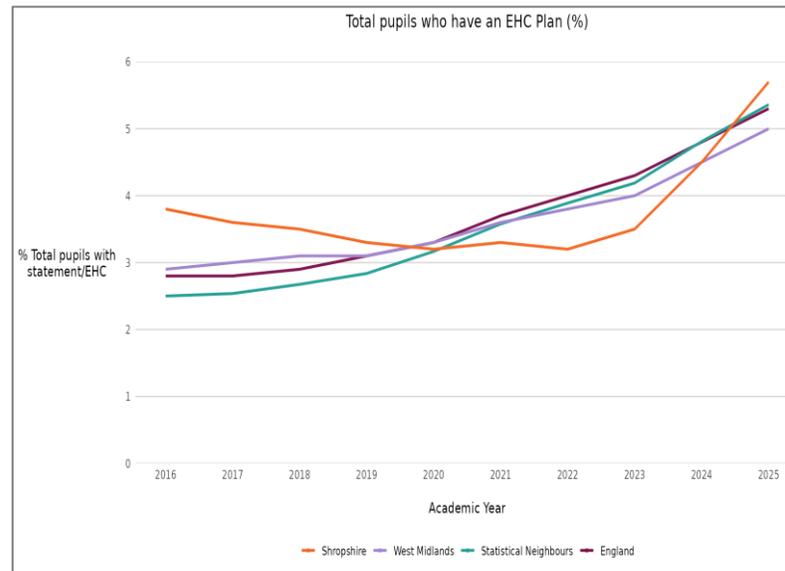
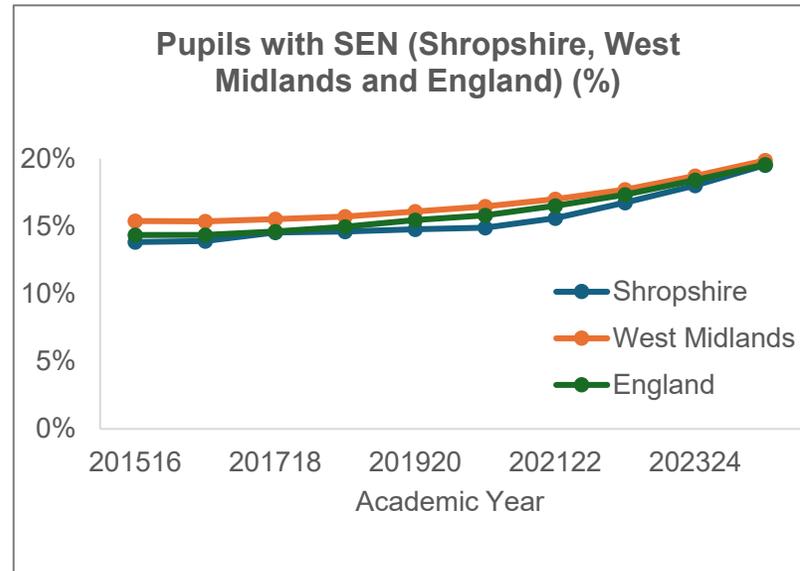
Average Minimum Journey Time  
Secondary School



IoD: Geographic Barriers

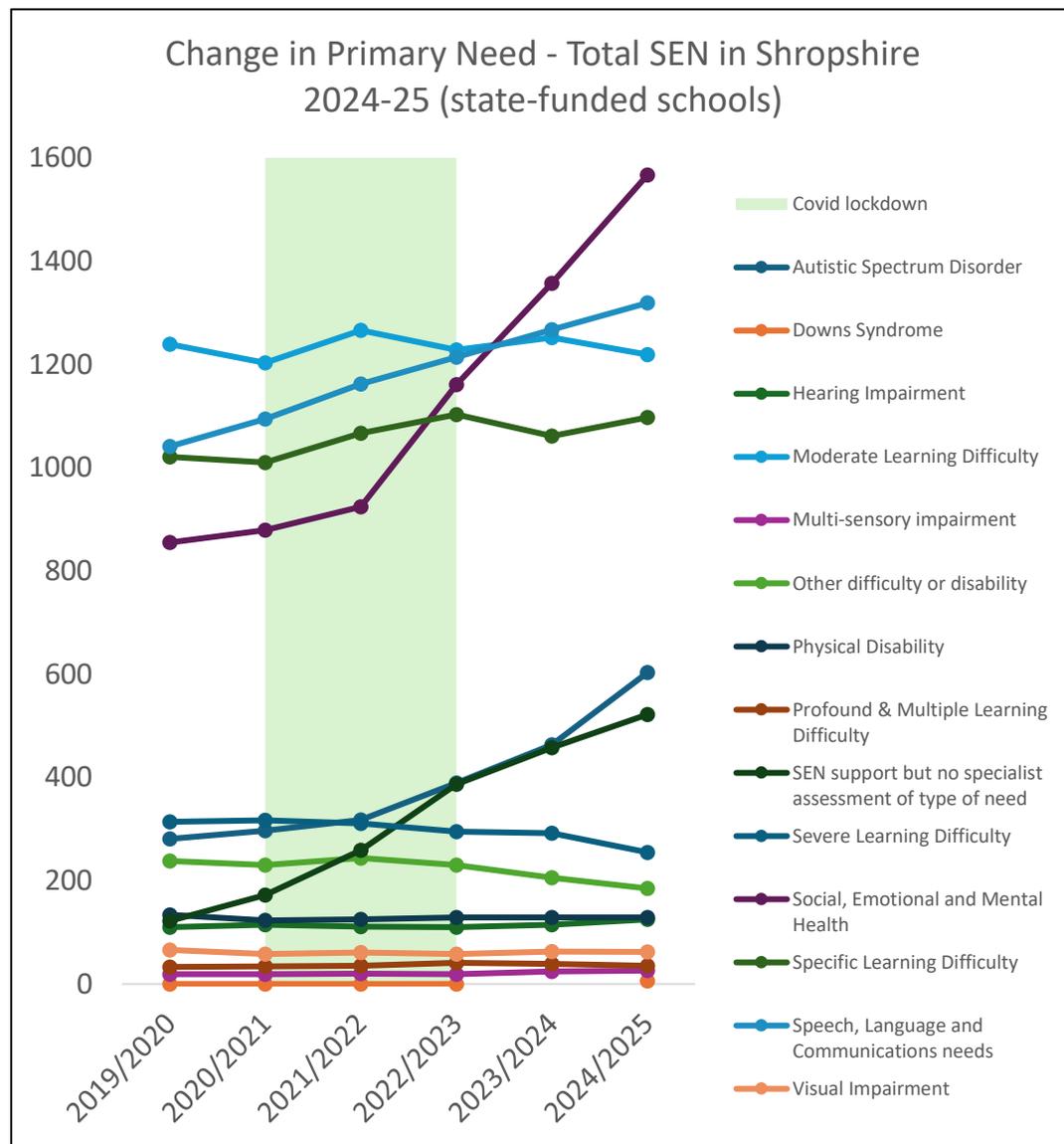


- 25% of Shropshire’s total population are aged 0-25 (2023). Numbers of 0-24s expected to decrease by 8% in next 25 years. Nationally also seeing a fall of 5%.
- In 2024/25 in Shropshire, 8, 653 school aged children in Shropshire have SEN.
- 19.5% of Shropshire’s school aged children with SEN, similar to nationally and regionally; 13.9% with SEN Support and 5.7% have an EHCP.
- More males with SEN than females
- 42% of all Shropshire pupils with SEN were aged 11-15 years old
- The SEN population in Shropshire is increasing rapidly, up 32% post pandemic. Increasing at a much faster among children with EHCPs (+78%)



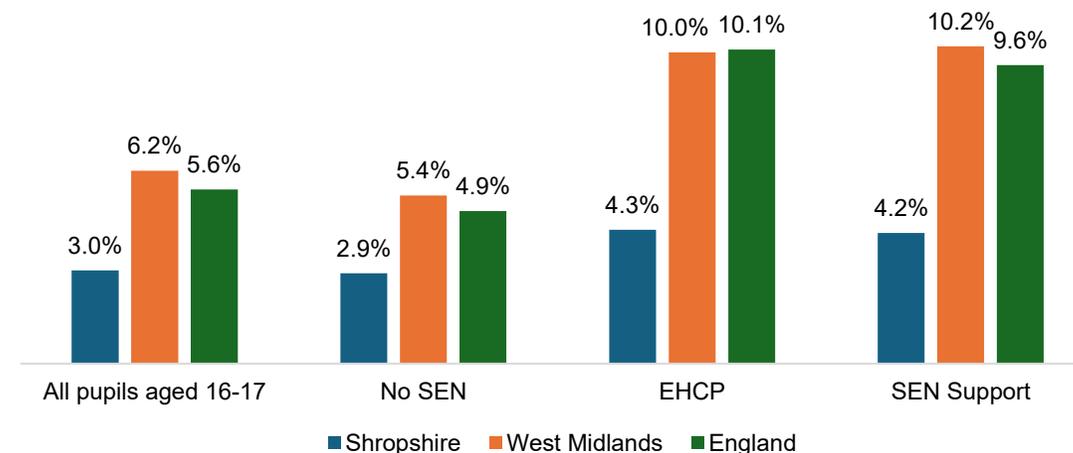
## Most prevalent primary need (2024/25):

- All SEN pupils in all schools: social, emotional and mental health (SEMH) above the regional and similar to national and rising. *Note: Primary needs may be flagged without a supporting diagnostic. It may be that the presenting behaviour has been classified, rather than the actual need. This data is only as accurate as how the schools have reported it.*
- Speech, Language and Communication needs (SLCN) was second most prevalent
- Rise in SEMH, Autistic spectrum disorder and no specialist assessment of need since pre-pandemic period
- For both EHCPs and SEN support pupils across all school phases: SEMH
- In primary schools: Speech, Language and Communication needs (SLCN) and SEMH
- In secondary schools: SEMH and Specific Learning Disability
- Special schools: Severe learning difficulty and SEMH most prevalent among Shropshire SEN population, higher than regional and national.

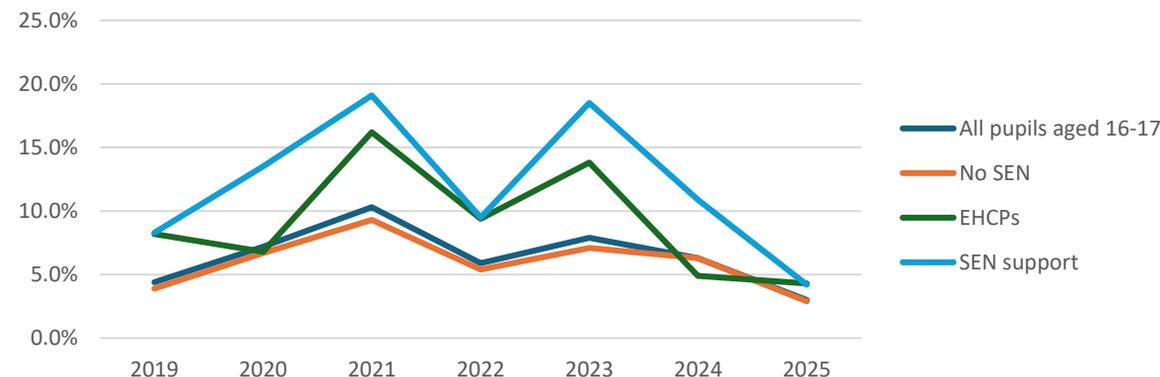


- Recent increase in the numbers of children electively home educated. 5% of home educated children had EHCPs as of June 2025
- Educational attainment is much lower among children with SEN than those with without SEN.
- Children with SEN meeting the expected level of development declines as they progress through the education system
- Attainment at age 19 in SEN population rates lower than in non-SEN population.
- Persistent Absences Higher as level of SEN support increases and as pupils get older
- Rates for exclusions and suspensions among SEND pupils are higher than among non-SEND pupils
- Majority of 16 to 17-year-olds with SEN were in education and training in 2025 at 93.4% EHCPs and 91% SEN Support. Above regional and national rates.
- Young people aged 16-17 with SEN (EHCP or SEN Support) in Shropshire have a higher rate of NEET or activity not known than those young people with no SEN. Same regionally and nationally. However Shropshire's 2025 rate of NEETs/not known with SEN is half that of the national and regional rates.
- Rates of NEETs falling significantly in the last 2 years in Shropshire for young people (16-17 years) with SEN, and closer to the rate for all pupils or those without SEN.

**16-17s Not in Education, Employment or Training (NEETs) or not known, 2025**

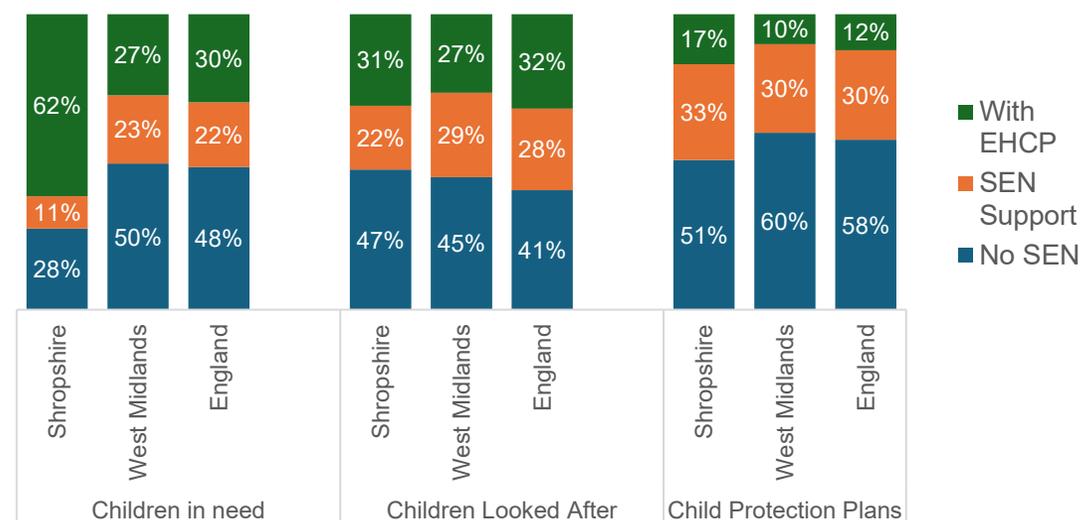


**16-17s Not in Education, Employment or Training (NEETs) or not known, Shropshire over time**

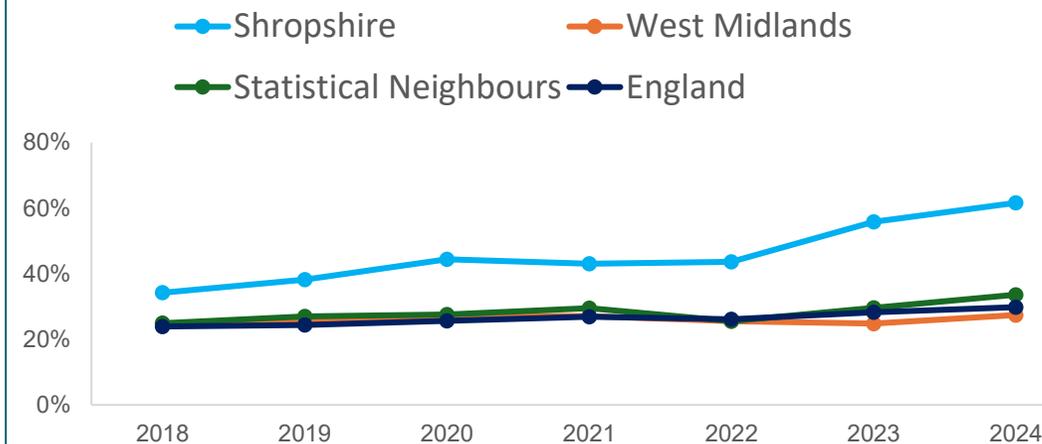


- Declining number of referrals into social care of children with disabilities and social work assessments.
- Notable rise across all vulnerable groups in the latest year, driven by EHCPs indicating that levels of needs are becoming more complex over time.
  - 73% of all **Children In Need (excl CLA and CPP)** in Shropshire have SEN –higher than nationally and regionally and rising since the pandemic. Driven by EHCPs
  - 53% of **Children Looked After** in Shropshire have SEN - similar regionally and lower than nationally but showing a rise in the most recent year.
  - Half (49%) of children with a **Child Protection Plan** have SEN- higher than nationally and regionally and rising since the pandemic showing a doubling in rate.
  - Children who are considered vulnerable are significantly more likely to have an EHCP than children in the general school age population (rate of 3.6%).
  - Abuse and neglect identified as primary concern among all vulnerable groups with SEND.
  - Care leavers with SEN has more than doubled since 2020. 1 in 5 carer leavers in Shropshire have SEN (2025).
- Steady fall in families with SEN accessing Early Help but repeat contacts into Early Help falling
- Less than one third of All In members accessed a short break during the year, particularly among younger age groups.

SEN prevalence (%) by social care group, 2023/24



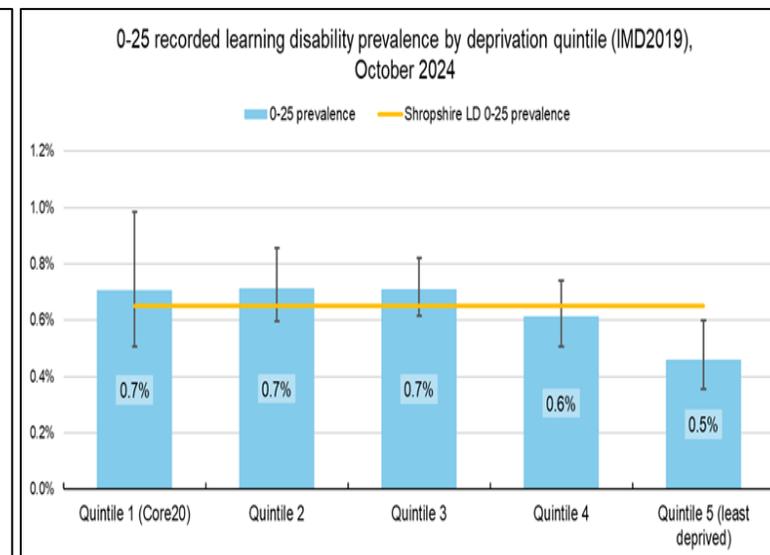
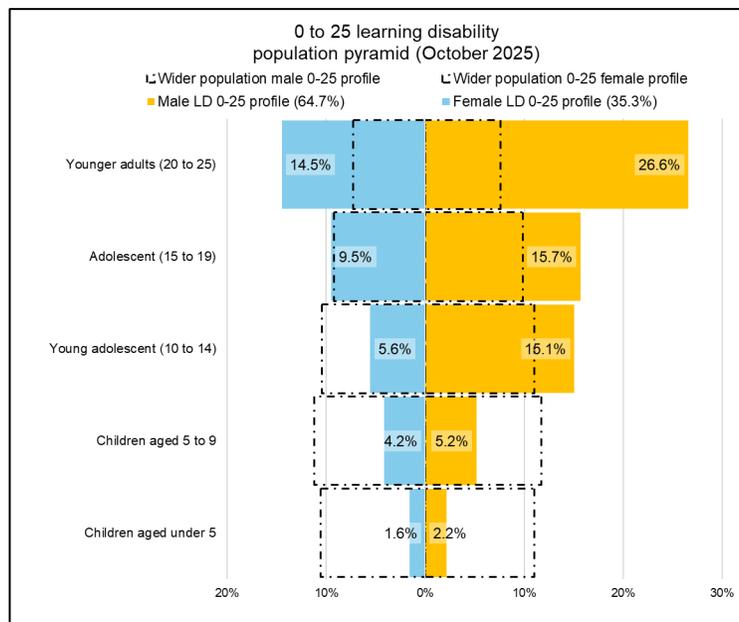
Children in Need with an EHCP



## GP Learning Disability Register 0-25

- More males than females, males accounting for two-thirds (64%)
- 66% are aged 15+
- 48% of all persons aged 0 to 25 on the learning disability register are of a White British ethnicity, compared to 37% of the general population.
- Most deprived quintile, had the highest 0-25 prevalence - inequality gradient is evident.
- Most common comorbidities of epilepsy (9%) and asthma (5%)
- 23% are underweight and 32% are overweight or obese

Admission episodes for hospital tooth extractions in 0-19 year olds statistically above the national average (23/24)



# Recommendations

- 1. Early Identification, Prevention and Inclusion:** getting help earlier, reducing escalation, and improving equity of access. (5 actions)
- 2. Child-Centred Practice:** ensuring children and young people are understood, heard, and supported appropriately (3 actions)
- 3. Integrated Pathways and Targeted Provision:** joined-up services across education, health, and care. (2 actions)
- 4. System Quality, Data and Assurance:** improve accuracy, accountability, and evidence. (2 actions)
- 5. Preparation for Adulthood and Life Outcomes:** sustained impact beyond compulsory education. ( 1 action)

See Recommendations Slide deck for full detail of actions.