

Health feedback- Just Say's open meeting on EHCP assessments and Health services on the 21st October.

What Does GOOD Look Like in Health Services for SEND Families?

A system that uplifts, listens, and acts — where children and families are met with dignity, expertise, and joined-up care.

Examples of Good Practice.

- Empowering Families
 - SALT (Speech and Language Therapy) training for parents
 - Online workshops and puberty awareness sessions
 - CYPD-led coffee mornings, training (TBC), and parent support
- Inclusive and Responsive Services
 - Mobility-inclusive activities for children and young people
 - Barking Hospital proactively flags SEN children
 - Community nursing team at Queens Hospital
 - Royal London's specialist dental team for children with additional needs
- Professionalism and Continuity
 - Professionals with clear understanding of SEND
 - Children with diagnoses remain on caseload — no arbitrary discharge
 - Services maintain up-to-date records and are accountable when things go wrong

- Joined-Up, Proactive Care
 - Reduced health inequalities through targeted support
 - Judgment-free services that listen to parent/carer needs
 - Creative use of budgets to fund auxiliary roles that bridge gaps

What Does BAD Look Like – and What Needs Urgent Attention?

A fragmented system that places the burden on families, undermines trust, and risks safety.

Systemic Issues.

- Lack of consistency – families see different practitioners each time, requiring repeated pre-work
- Poor communication and information sharing between NELFT and GPs
- Delays in prescriptions and medication reviews (especially for ADHD)
- Inaccurate or delayed patient notes; incorrect medical details

Gaps in Understanding and Support.

- Professionals lack training and understanding of SEND conditions
- Dietitian services unaware of or dismissive toward

children's needs

- No waiting areas adapted for SEN children
- No structured support after diagnosis
- Limited help with annual health checkups

Access and Accountability Failures.

- Difficulty contacting paediatric doctors
- GP services not integrated with NHS (independent providers)
- Reduced nursing duties — previous support withdrawn
- Families constantly chasing appointments with long delays
- Lack of joined-up working and shared responsibility

Recommendations for Commissioning Teams.

- Invest in SEND-specific training across all roles — clinical and administrative
- Ensure continuity of care and caseload retention for diagnosed children
- Fund auxiliary roles that support communication, coordination, and emotional safety
- Mandate joined-up record keeping and cross-agency communication protocols
- Create SEN-friendly environments — waiting areas, appointment systems, and follow-up pathways
- Recognize and replicate good practice models (e.g., Barking, Queens, Royal London)

