Neighbourhood Peer Clusters

Session structure

WELCOME AND INTRODUCTIONS

INTRO TO THE OPPORTUNITY OF THE NEIGHBOURHOOD PEER CLUSTERS

INTRODUCTION TO SOUTH GLOS CLUSTER MODEL

HOMEWORK

Curriculum Campus Community

Schools, third sector, LA and NHS organisations as anchor institutions building a framework for integration so that:

- Health issues are prevented
- Education inequalities are reduced
- Social mobility is improved
- Individual needs are identified and met at the earliest opportunity
- Children and families are at the heart of thriving supportive communities

National priorities increasingly emphasise local, place-based care, community hubs, and reducing demand on overstretched services. Partnerships between schools and health align directly with these priorities.

What could a locally rooted cluster of schools and health partners working with third sector organisations achieve together that none can achieve alone?

- Stronger early intervention and prevention

- Accessible neighbourhood health services

- Joined-up support for children and families

- Innovation in school-based health programmes e.g. Asthma Ambassadors (students trained with NHS partners to support peers), on-site mental health practitioners working as part of the school team.

- Creating the future NHS workforce through place-based career pathways, hands-on experiences and local pipelines into NHS roles

UK Government — NHS

FIT FOR THE FUTURE

10 Year Health Plan for England

July 2025

Schools White Paper

Primary Care Networks

West integrated care area

1. Penwith
Network population: 67,114
Atlantic Medical Group
Bodriggy Health Centre
Marazion Surgery
Morrab Surgery
Rosmellyn Surgery
Stennack Surgery
Sunnyside Surgery

2. South Kerrier and Isles of Scilly
Network population: 33,571
Helston Medical Centre
Isles of Scilly Health Centre, St Mary's
Meneage Street Surgery
Mullion and Constantine Group Practice
St Keverne Health Centre

3. North Kerrier west
Network population: 38,940
Carn to Coast Health Centres
Godolphin Health

4. North Kerrier east
Network population: 25,490
Leatside Health Centre
Veor Surgery

5. Areas not involved in a PCN
Network population: 6,326
Harris Memorial Surgery

Central integrated care area

6. Falmouth and Penryn
Network population: 50,054
Falmouth Health Centre
Penryn Surgery
Trescobeas Surgery
Westover Surgery

7. Truro
Network population: 37,135
Lander Medical Practice
Three Spires Medical Practice

8. Coastal
Network population: 29,895
Carnon Downs Surgery
Chacewater Health Centre
Perranporth Surgery
St Agnes Surgery

9. Arbennek Health
Network population: 32,695
Brannel Surgery
Clays Practice
Probus Surgery
Roseland Surgeries

10. St Austell Healthcare
Network population: 37,534
Mevagissey Surgery
St Austell Healthcare

11. Watergate
Network population: 50,070
Narrowcliff Surgery
Newquay Health Centre
Petroc Group Practice

North and east integrated care area

12 Three Harbours and Bosvena
Network population: 44,224
Bosvena Health
Fowey River Practice
Lostwithiel Medical Practice
Middleway Surgery

13 North Cornwall Coast
Network population: 21,438
Bottreaux Surgery
Port Isaac Practice
Wadebridge and Camel Estuary Practice
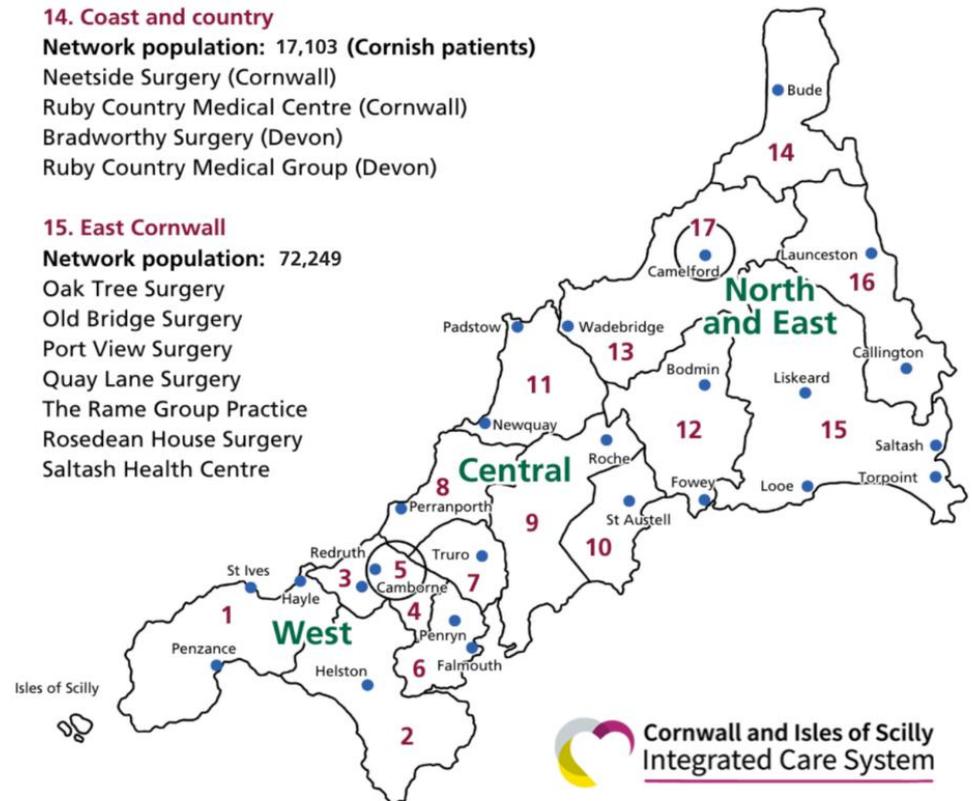
14. Coast and country
Network population: 17,103 **(Cornish patients)**
Neetside Surgery (Cornwall)
Ruby Country Medical Centre (Cornwall)
Bradworthy Surgery (Devon)
Ruby Country Medical Group (Devon)

15. East Cornwall
Network population: 72,249
Oak Tree Surgery
Old Bridge Surgery
Port View Surgery
Quay Lane Surgery
The Rame Group Practice
Rosedean House Surgery
Saltash Health Centre

16. Launceston and Tamar Valley
Network population: 35,589
Launceston Medical Centre
Tamar Valley Health

17. Areas not involved with a PCN
Network population: 6,641
Camelford Medical Centre

Population sizes as of January 2025 / Designed by NHS Cornwall and Isles of Scilly

Cornwall and Isles of Scilly
Integrated Care System

The South Gloucestershire Cluster Model

9th March 2026

South Gloucestershire Clusters

Pete Barnard: Lead Headteacher in Cluster 2

Kim Garland: Lead Headteacher in Cluster 3

Will Pritchard: Strategic Lead for Inclusion and SEND

Julia Chapman: School Effectiveness Lead for SEND

Claire Heron: Cluster Commissioning Officer

Session outline

- How our cluster model works

- The wider impact of clusters

- Next steps and considerations

- What we would do differently

- Recommendations for implementation

- Q and A

'The learning from the SEND clusters in South Gloucestershire would be relevant to any local SEND system seeking to build **inclusive capacity in mainstream education, foster collective responsibility for meeting the needs of all children and young people, and develop a more responsive offer of targeted support based on the needs of specific localities**.' *What Works in SEND: Effective Practice case study, September 2024*

'Underpinned by the strength of the cluster model, children and young people are experiencing an increasingly inclusive education system.' *South Gloucestershire Area SEND Inspection Report, July 2025*

The new white paper proposes that **"every school should be part of a local group to work together on SEND".** These groups would need to be **"actively engaged"** with their local authority and integrated care board. *Every Child Achieving and Thriving, DfE, February 2026*

Funding of clusters

- Schools Block
- Schools' Forum – amount and longevity
- The funding is shared across the five clusters based on a funding formula which includes the number of pupils and levels of deprivation.
- Strategic focus rather than individual needs
- High Risk Group (via cluster)

Collective responsibility for meeting children's needs

Cluster strategic outcomes:

1. Earlier and more accurate identification of special educational needs to enable provision to be more effectively aligned to individual needs
2. Improve educational outcomes for children identified at SEN Support
3. Meet the needs of children and young people with behaviour that challenges and reduce the number of suspensions and permanent exclusions
4. Strengthen system leadership and shared ownership of SEND priorities with schools
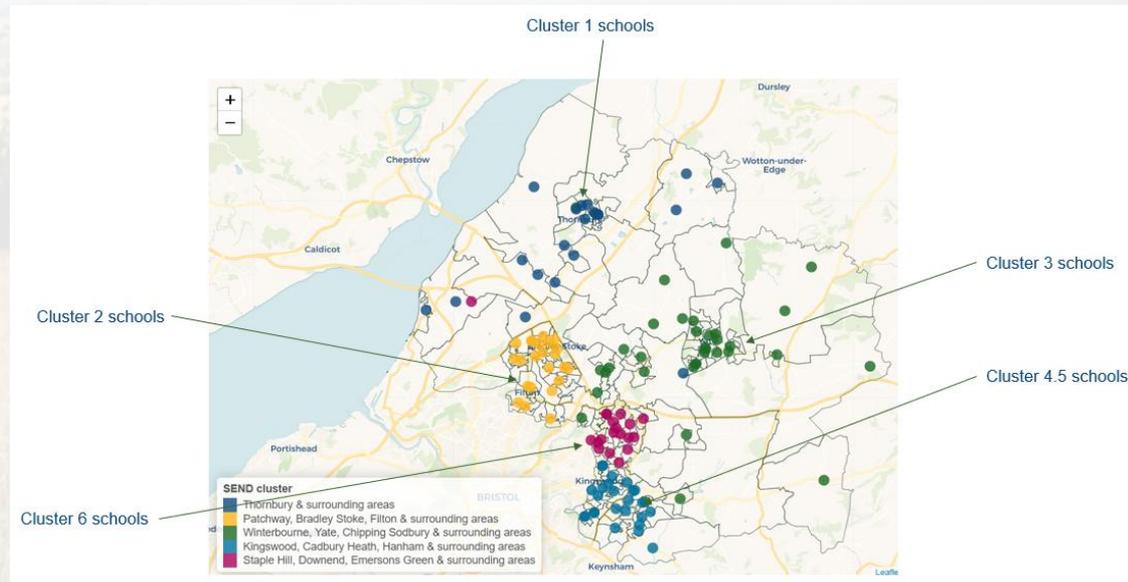
The Cluster Structure

Governance: Cluster Project Board

Head of Education, Learning and Skills

Strategic Lead for Inclusion and SEND

Strategic Lead for Early Years and School Support

Strategic Lead for Statutory Education

School Effectiveness Lead for SEND

Principal Educational Psychologist

Children's Commissioning Lead

South Glos Parent/Carers Forum

Cluster Lead Headteachers and SENCos

Cluster leadership

Lead Headteacher (primary)

Lead Headteacher (secondary)

Lead SENCo (primary)

Lead SENCo (secondary)

Central Cluster Support Team

Cluster Commissioning Officer

Cluster Administrator

Finance Officer

Phases of development

Timeline	Phase of Development	Key Actions
2019 – 2020	**Pilot Phase** Led by external SEN Consultant **Purpose:** Test the model on a small scale and gather early evidence	Model co-designed with education, health and social care colleagues 2 clusters established to test the model with 3 strategic aims Early impact monitoring data gathered to understand feasibility, demand and core functions Learning used to refine the operating model before expansion
2020 – 2022	**Expansion Phase/ Early Development** Led by the Partnerships and Planning Lead for Clusters with oversight by the Cluster Board **Purpose:** Scale the model and strengthen operational structures	5 clusters established across LA Building links with local providers and testing ways of working Impact monitoring of whole project and clusters, including development of data dashboards and impact tools Evidence shared with Schools Forum and further funding agreed
2022 – 2025	**Local Establishment** Led by Cluster Leads with oversight by the Strategic Lead of Inclusion and SEND and Cluster Board **Purpose:** Embed the approach so it becomes part of the LA's SEND system	Funding agreed until March 2027, allowing for longer scale planning What Works in Education report produced for DfE Offer and commissioning refined and relationships with providers developed further Cluster leaders in schools taking increased strategic ownership, with LA strategic oversight Co-production of KPIs to improve evidencing and monitoring of impact at cluster level and regular reporting to LA Area SEND Inspection July 2025
2025 - 2027	**Maturity Phase/ Shared Structures** Led by Cluster Leads with oversight from Strategic Lead of Inclusion and SEND and Cluster Board **Purpose:** Move towards a consistent, system-wide model with shared processes.	Funding agreed until March 2028 Increase in collaboration between clusters with shared central roles introduced, allowing for growth and development of the cluster offers Development of common SLAs, KPIs, and use of shared tools Focus on refining processes for whole cluster efficiency, sustainability, greater strategic insights and planning Peer and Challenge Support Group established

Key Information and Performance Indicators

Category	Key Performance Indicators
Population	Number of schools Number pupils SEN E SEN K
Distribution of needs (primary, secondary and special settings)	SEMH C&I C&L P&S
Belonging	Cluster EHCP applications % successful SEN K PEX SEN K suspensions Part-time t/table Attendance Persistent absence
Academic progress	GLD Phonics KS2 SATS KS4 Eng, Ma, Sci Transitions to P16

Category	Key Performance Indicators
Stakeholder engagement	Training engagement/uptake Training feedback Cluster service engagement Peer support engagement Stakeholder feedback analysis Parent Carer Forum survey Online Pupil Survey Participation Team/FACE
Workforce development analysis	Autism Package SEMH Package SaLT Package Specialist Outreach EPS SENCo retention
Expenditure analysis	Enabling functions Cluster priorities Services Individual CYP support Workforce development School Projects

2025/26 Cluster offers

Offer area	Cluster 1	Cluster 2	Cluster 3	Cluster4.5	Cluster 6	Total spend
SEMH	PLC/EIO EI Project Signature Sports Krunch EPS ELSA Step Therapeutic Specialist training	PLC/EIO PLC PEx support CY Network Signature Sports Priority Sports SEMH outreach Inclusion Leader ELSA MeLSA	MH HLTA EPS – SEMH & EBSA training SEMH Package ISS BSS EIO PLC outreach	PLC/EIO ADHD Fnd North Star outreach EI Project Signature Sports Support worker PEx reduction	PLC/EIO EI Project Belonging HLTA NHLC outreach North Star EPS Signature Sports Sporting Chance Boxall	34.5%
C&I	EPS training SaLT Package Autism Package DA training	Autism Package Support worker SALT Package	SaLT Package Talk Speech (PEx) Autism Package	Autism Package SaLT Package EPS – training HLTA	Autism Package SaLT Package DA training	19%
C&L	EPS Casework Family Support	EPS PIVATS	EPS Casework Family Support	EPS EHCP team	EPS PIVATS Dyslexia	7%
P&S	OT	OT	OT	OT	OT	4.5%
Other	Nutshell data	Nutshell data Transitions SEND Reviews	Transitions Nutshell data	Transitions SEND Reviews Nutshell data	Transitions SEND Reviews Nutshell data	12%
Enabling Functions						23%

'Cluster leads work collaboratively to identify what services are most needed in each cluster to improve the experiences of children and young people with SEND. This has led to improved, targeted support based on the contextual challenges of each cluster area.' *South Gloucestershire Area SEND Inspection Report, July 2025*

SEND Clusters SENCo Survey (December 2025)

The cluster model is considered 'invaluable' by most SENCos in South Gloucestershire, with **96%** of responders rating it as valuable or highly valuable.

SENCos identify the main benefits of being part of a cluster as **access to wider support**, **training** and **resources**, and providing a **SENCo support network**, indicating the value of building capacity and collaborative support. **Sharing best practice** and **SEND data and analysis** also feature prominently, reflecting the importance of evidence-based practice.

84% state that the Cluster Offer helps their school to **identify** children and young people's **needs earlier** and **more accurately**.

93% agree that the Cluster Offer improves teaching staff's and SENCo confidence in supporting children and young people with SEND.

88% say the Cluster Offer contributed to embedding a culture of inclusion in your school.

SENCos report that the Cluster Offer has had the greatest positive impact on **engagement** and **wellbeing**, followed closely by **progress**. Reported improvements in **attainment** and **attendance** are also notable, while **reductions in exclusions and suspensions** indicate progress toward a more inclusive culture.

'Being part of the cluster has significantly strengthened our approach to inclusion across the school.' *SEND Clusters SENCo Survey, December 2025*

Wider impact of clusters

1. **Early identification of need** has improved markedly through, for example, systematic screening, PIVATS, Boxall profiling, specialist training (EPS, ISS, SaLT etc.), resources, and specialist toolkits, enabling more accurate assessments and timely interventions. It has also had an impact on our number of EHCPs and SEN Support which is now in line with National.

2. **Inclusive practice** is being embedded through the Graduated Approach, trauma-informed practice, and development of sensory and regulation spaces, creating environments that support pupil resilience and engagement.

3. **Improved engagement, attendance, and progress** of children and young people through mentoring, resilience skills (Y6–7), targeted 1:1 EBSA support, to improve attendance and engagement, and transition funding for the EYFS cohort resulting in attendance at 95.6%.

4. **Permanent exclusion rates remain low** despite the increasing complexity of SEND, supported by targeted EIO/EIP work and EBSA strategies that have enhanced attendance and engagement. 91% of children seen by an EIO were not permanently excluded and the risk of PEx reduced for 92% of children and young people who participated in the EIP.

5. **High engagement with workforce development**, in a strong uptake of training offers, particularly in Autism, Speech and Language, and SEMH, resulting in increased staff confidence and expertise. For example, 897 staff across the Local Authority accessed Autism training through the Cluster Offer, 98% of attendees reporting high levels of confidence after the training and there has been strong attendance at SENCo meetings.

6. **Collaboration across schools has strengthened**, promoting the sharing of best practice, increased joint work with EYFS providers (including transition funding), implementation of PIVATS and the SaLT toolkit, and capacity-building through specialist HLTAs and Engagement Workers.

Next steps and considerations

1. Financial planning and sustainability

- Consistent monitoring of how expenditure is spread across the year to ensure spending patterns remain affordable and align with the planned financial profile.

- Funding has been static while specialist service costs rise, creating pressure on sustainability.

2. Consistency and quality assurance across clusters

- While variation is appropriate to local context, there needs to be equitable consistency, relevance and quality of offers in addition to embedding universal SLAs, KPIs and the Planning and Evaluation tool.

3. Engagement gaps

- Average attendance at SENCo meetings is 56% (with some clusters at ~88%). Targeted work with schools not engaging with meetings and/or taking up aspects of the Cluster Offer is needed.

4. Evidence and impact

- Ensure a consistent approach to gathering high quality impact evidence, embedding monitoring/QA, and a clear method for tracking outcomes from school level projects.

5. Secondary phase attainment and behaviour

- KS4 outcomes are slightly below national (although improving), suggesting further focus on secondary phase inclusive practice and targeted support is needed.

- Secondary suspensions are declining but a continued focus on EBSA/SEMH practice and timely interventions is prudent.

6. Cognition and Learning (C&L) identification

- C&L (MLD) is below national, indicating potential under identification; a next step is to review screeners and PIVATS implementation to ensure accurate identification.

What would we do differently

From the outset, ensure the following is agreed and in place for all clusters:

- **central support roles**: commissioning officer, finance officer, administrator

- **spend parameters** in core areas e.g. enabling functions

- consistent **service level agreements** for all providers

- quarterly **financial monitoring** meetings to track spend centrally to ensure spending patterns remain affordable and align with the planned financial profile

- consistent format for **cluster offers** and **impact reports** e.g. Planning and Evaluation Tool

- consistent approach to gathering **high quality data** to evidence impact i.e. KPIs

- clear **monitoring/QA cycle** to track outcomes

- peer support and challenge group to facilitate more opportunities to **share best practice** and solution-focused **problem solving** outside Cluster Project Board meetings

Clusters ensure **equity** by giving every school access to **high-quality services** and **specialist support**. By working at a **local** level, clusters bring schools together around **shared priorities**, **collaborative problem-solving**, and **shared resourcing**, facilitating **stronger inclusive practice**, **earlier intervention** and **improved outcomes** for **all** children and young people.

Homework

Read

Present Next Session

Co-Creating Healthy Futures: Schools and Health

A Framework

Windsor Academy Trust