Department
for Education

Guidance

Developing and delivering the Experts at Hand offer in year 1: supporting guidance

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Applies to England

Contents

About this Experts at Hand guidance
Experts at Hand – planning for implementation
Summary of support and engagement offer
Overview of the Experts at Hand offer
Structured support offer for settings
Workforce approach
Workforce roles
Partnership and commissioning
Delivery model
Year 1 expectations
Other SEND reform funding
Data and monitoring

Annex A: suggested questions for local areas partnerships when developing the Experts at Hand offer

Annex B: further examples for structured support offer

Annex C: examples of how elements of the core offer can be delivered

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This publication is available at https://www.gov.uk/government/publications/supporting-send-reform-developing-the-experts-at-hand-offer/developing-and-delivering-the-experts-at-hand-offer-in-year-1-supporting-guidance

About this Experts at Hand guidance

This guidance expands on the SEND reform plan to support local authorities and integrated care boards to continue to develop, refine and deliver their Experts at Hand offer from 2026 to 2027.

It includes minimum expectations for this first year, and how local area partnerships should work with system partners to design, develop and oversee the approach. This guidance has been co-drafted by the Department for Education (DfE) and NHS England. It will be updated annually as learning develops, and the minimum expectations of year 1 will set the foundation for the following years.

We use ‘local area partnership’ as a term to describe the collective local partners who should be involved in the strategic planning and commissioning of the Experts at Hand offer.

At a minimum this should include the:

- local authority
- integrated care board
- mainstream settings’ representatives

- alternative provision and specialist settings representatives
- health providers
- parent carer forums
- children and young people's voice

Local areas will need to establish a clear governance and accountability arrangement, as part of the local area partnership board. This must include a named local authority based Senior Responsible Owner (SRO) with responsibility for delivering the Experts at Hand offer, and a relevant senior representative from the integrated care board.

Local authorities and integrated care boards are equal partners in planning, decision-making and delivery.

Experts at Hand – planning for implementation

Context

On 23 February 2026, the Department for Education (DfE) published the schools white paper Every child achieving and thriving (https://www.gov.uk/government/publications/every-child-achieving-and-thriving) and the SEND consultation Putting Children and Young People First (https://www.gov.uk/government/consultations/send-reform-putting-children-and-young-people-first). These outline a vision for a single, inclusive system with high-quality, local support, backed by plans to strengthen laws for evidence-based early help and increased investment to integrate education, health and care services.

This is a long-term (10-year) reform, subject to outcomes from the consultation, with any new legislation expected to come into effect from September 2029. Until then, current systems remain, while support is improved to help more children thrive.

Around £1.8 billion will be invested over 3 years to develop an Experts at Hand offer, giving mainstream settings access to specialist support. Initial delivery begins in September 2026, expanding into full implementation by year 2.

Mainstream settings
Throughout this guidance, when we refer to mainstream settings, we are including:

- early years: maintained nursery schools, school-based nurseries, private voluntary and independent (PVI) early years settings, including independent nurseries specialising in SEND provision, and childminders
- mainstream schools
- mainstream post-16 including schools, colleges and other institutions delivering mainstream 16 to 19 provision

Fee-paying independent schools (‘public schools’) are not eligible.

In March 2026 we set out high level guidance in the Local SEND reform plan to support local areas to begin their planning to set up an Experts at Hand offer. In April 2026 we published the Experts at Hand and local authority SEND transformation fund publication (https://www.gov.uk/government/publications/experts-at-hand-local-authority-send-transformation-fund), which outlines the £429 million available for 2026 to 2027 and its permitted use. Local authorities and integrated care boards will have set out plans to deliver an offer based on this information.

This guidance will support local areas to reflect on, refine and update their plans, and support implementation.

Summary of support and engagement offer

DfE and NHS England will support local areas to set up and deliver the offer. These reforms require strong partnership working locally and in central government. Sector-led improvement will also play a key role in developing self-sustaining and ongoing learning.

Following the submission of local SEND reform plans, we will provide further support through workshops, practical examples of delivery, and case studies as practice emerges across local areas.

The DfE's and NHS England's support offer to local authorities and integrated care boards

DfE and NHS England will provide ongoing support throughout the offer by working closely with local partnerships using continuous feedback and insights from SEND reform plans to understand evolving needs and refine how support is designed and delivered over time.

We will look to:

- complement sector-led improvement as an effective and sustainable approach to improving mainstream inclusion
- focus on evidence-based practice including how-to guides and learning from other expert organisations
- share learning on implementation from the change programme local authorities
- facilitate multi-agency engagement and learning at all levels across health and education

National learning and engagement

National learning and engagement will involve local authorities, health and education partners, and their workforces. The focus will be on helping local areas understand what works, why it works, and how to apply it in practice. This will include learning from the implementation of the prototype Experts at Hand approach tested through the change programme (Local Inclusion Support Offers), and highlighting best practice and evidence-based approaches, such as:

- formal policy and programme guidance including grant conditions
- how-to guides to share learning and tools to support the design, implementation and delivery of the offer. Local partnerships can use evidence based learning from programmes and pilots such as:
  - change programme
  - Delivering Better Value (DBV)
  - partnerships for inclusion of neurodiversity in schools (PINS)
  - alternative provision specialist taskforces (APST)
  - supported internships (SI)

    - Early Language Support for Every Child (ELSEC)
- National webinars to help share information and evidence, and to showcase best practice from the sector on both policy and delivery

Overview of the Experts at Hand offer

The Experts at Hand offer will support mainstream settings across early years, primary, secondary and post-16 to better identify and meet the needs of children and young people with SEND. Delivered through local area partnerships, it provides dedicated professional expertise to help more children and young people access support within their settings.

The offer aims to remove barriers to access, enabling children and young people to achieve and thrive in education. It is designed to deliver responsive support to mainstream settings, and must be additional to, and not replace, support provided through an education, health and care plan (EHCP). Funding must not replace existing provision. It should be additional and strengthen local capacity, building on strong practice.

The Experts at Hand offer will provide support that is tailored to the needs of individual children and young people through observation, assessment and identifying appropriate targeted support. For example, recommending strategies or identifying the right group-based interventions. This support does not replace statutory provision set out in an EHCP. Rather, it enables needs to be identified and addressed earlier through evidence-based input. While the direct involvement of specialists is time-limited, their recommendations are intended to be embedded and sustained in practice by school staff, ensuring ongoing support at cohort or group level, with some one-to-one input where appropriate.

Experts at Hand is designed to transform how support for children and young people with SEND is delivered by bringing specialist expertise directly into mainstream settings. By embedding speech and language therapists, educational psychologists, occupational therapists and specialist teachers alongside school staff, the offer supports earlier identification of need, strengthens workforce confidence and capability, and provides timely, evidence-based support within everyday learning environments.

Through this approach, more children can be supported effectively without the need for escalation to specialist services, helping to reduce pressure on the system over time. Alongside stronger partnerships between education, health and families, this shift towards early intervention and inclusive practice will improve outcomes for children and young people while supporting a more sustainable, integrated SEND system.

The Experts at Hand offer should recognise the critical role of alternative provision (AP) and specialist settings within an inclusive system. High-quality AP and specialist settings are key partners in prevention, reintegration and supporting children and young people with more complex needs, and their expertise should be deployed across the system through the Experts at Hand offer.

The government recognises the important role of local parent carer forums in representing families' experiences and supporting system improvement. We are working to strengthen how these voices are heard across wider SEND reforms, including considering how to support more consistent and sustainable approaches to engagement over the longer term.

Core functions of the offer

The Experts at Hand offer must make available additional health professionals (including therapists, support workers, and assistants) and specialist education professionals (including trainees and assistants).

They will work with children and young people in their mainstream setting, delivering support alongside setting staff, including:

- supporting teachers to provide individualised support through observation, light touch assessment and advising on strategies for individual children and young people
- jointly delivering time-limited group or whole-class interventions, while ensuring that agreed strategies are consistently embedded in daily learning. In some cases, and by agreement with the setting, time-limited one-to-one support may also be provided (in addition to, not instead of, statutory responsibilities, which must continue as usual). This may be appropriate where needs are highly specific or where the geographic isolation of the setting makes group delivery impractical
- jointly developing resources and workshops for parents to help them understand and support their child's development

They will work directly with mainstream education settings and their staff, providing support, advice and guidance, including:

- building staff knowledge and skills through effective strategies, evidence-based interventions and targeted approaches to improve early identification of needs
- providing routes for staff to access advice, coaching and tailored guidance to overcome barriers to inclusion and better meet diverse needs

- supporting settings with the co-production of inclusive approaches, working in partnership with parents and carers to shape setting culture, practice and interventions, ensuring their voices inform decision-making and provision

They will also deliver special school and alternative provision (AP) outreach at the following levels:

- Tier 1: support for children and young people in their mainstream setting to prevent issues escalating
- Tier 2: extra help or temporary direct support in a specialist setting with a view to integrate the child or young person back into a mainstream setting

In most cases, support from the Experts at Hand offer should be time-limited, with the aim of building the skills and confidence of settings so they can effectively support the child or young person independently. Experts at Hand delivery should operate as a partnership across mainstream, special and alternative provision, recognising SEND expertise as embedded across the whole system rather than located in discrete settings.

Principles

The Experts at Hand offer must be commissioned jointly by local authorities and integrated care boards within the local area SEND partnership joint commissioning arrangements. Local area partnerships must provide clear routes for mainstream education settings to access specialist support from a range of experts across education and health.

The Experts at Hand offer should be designed to provide tailored advice and guidance for staff from experts and expert-led evidence-based interventions and group support for children and young people. All support delivered through the Experts at Hand offer should be grounded in robust educational and clinical evidence and should ensure that evidence-informed practice is consistently applied and embedded within mainstream settings.

In establishing their offer, local area partnerships should start shifting local provision to focus on proactive and timely support for mainstream education settings, prioritising early identification and intervention so that staff are able to meet the needs of children more quickly and effectively within the setting.

Our expectation is that the interventions delivered by the Experts at Hand offer will be primarily group based or cohort led. There will continue to be children and young people with higher levels of need and lifelong conditions that require longer term, individualised and tailored support. The Experts at

Hand offer must be additional to such existing statutory and one-to-one support, and specialist level pathways for services such as speech and language therapy and occupational therapy. This means that one-to-one support specified in an EHCP is not within the scope of the provision delivered through Experts at Hand. Local areas must demonstrate that the Experts at Hand offer increases overall capacity rather than displacing or replacing existing services.

The Experts at Hand grant should only fund experts from the following disciplines:

- speech and language therapists – and support workers or assistants
- occupational therapists – and support workers or assistants
- educational psychologists – and trainees
- specialist teachers – both local authority-based and those based in specialist or AP settings

As the term specialist teacher can be used broadly, we define this as the workforce from early years to further education who currently work in services specifically focused on support of children and young people with defined SEND. For example, teachers of the deaf and visually impaired, Speech Language and Communication Need (SLCN) Advisory Teachers. They are experts in adapting pedagogical approaches in the design and delivery of the curriculum and/or those practitioners working in specialist and alternative provision (AP) settings who bring expertise in behaviour, curriculum adaptation and inclusive practice.

We have applied the following principles when determining which workforce roles are eligible for funding through the Experts at Hand grant, align with our reform ambitions and deliver greater inclusion in mainstream settings:

- evidence of a workforce shortage
- current utilisation within the statutory system
- the extent to which their expertise targets unmet needs in mainstream provision

We expect a wide range of specialists to continue to work with schools beyond those professionals directly funded through this grant. This includes, for example, mental health professionals, physiotherapists, and other relevant experts.

These eligibility criteria will be kept under review to ensure they remain responsive to emerging evidence, workforce needs and delivery priorities.

Where a local area proposes the incorporation of an APST model within the Experts at Hand offer, a limited extension of the workforce beyond those

specified above and in accordance with APST guidance may be supported through Experts at Hand funding.

Local areas will need to consider how to ensure they can secure a sufficient workforce to deliver their offer. To support this, we are investing £40 million to grow the specialist workforce of educational psychologists and speech and language therapists. Of this funding, £26 million will go towards training at least 200 educational psychologists per year in 2026 and 2027. The remaining £15 million (£5 million per year) will be invested to establish new speech and language therapy advanced practitioners in every integrated care board geographical area. Local areas will also want to consider the opportunities for different ways to attract, deploy and best use skills, including sharing best practice across different education phases where appropriate.

By enabling earlier, more effective support, the offer should help prevent needs from escalating. So over time, we expect reliance on individual referrals to health services and for statutory support to decrease. Local areas should particularly consider how their Experts at Hand offer targets intervention in the earliest years for children under 5, where earlier preventative action could reduce the escalation of need. This should include consideration of how to reach young children who are not accessing formal early education, including through Best Start Family Hubs and health visitors.

Local area partnerships are expected to begin delivering their Experts at Hand offer in 2026 to 2027, with delivery starting from September 2026, and to develop and expand this over the next 3 years so it improves local SEND provision. This should be delivered through a phased approach, with local areas determining initial priorities based on need, while building an evidence base to refine and strengthen the offer over time.

The offer should:

- enable more efficient use of multi-disciplinary professionals
- build capacity and skills across education settings
- support a flexible and sustainable workforce

It should promote joint working between practitioner groups and strong collaboration between health and education professionals in education settings, adopting whole-setting approaches. This should strengthen the strategic role of health professionals, enabling them to provide targeted support to mainstream settings while also contributing to wider system impact.

This guidance builds on existing good practice in local areas, including high-quality outreach from specialist settings and emerging evidence from ELSEC and partnerships for inclusion of neurodiversity in schools (PINS).

These highlight the benefits of embedding health and other specialist professionals in mainstream, bringing health professionals into settings to work with children and young people. The final evaluations for ELSEC and PINs are due to be published in the autumn. Evidence from the mental health support team trailblazer programme similarly shows the benefits of bringing health support closer to children and young people in their everyday environments. Evidenced learning of what works from the PINS and ELSEC programmes should inform the development of the Experts at Hand offer and build on established professional practice. Learning from these programmes can be used to inform and strengthen the wider offer. Areas should ensure they embed high-quality, consistent approaches aligned with the expectations set out in this guidance.

Structured support offer for settings

Local area partnerships should develop and publish a clear, accessible structured support offer that sets out what is available to education settings across early years, primary, secondary and post-16. This should reflect the differing needs of settings and age groups, and the expertise required to support them. Areas should ensure the offer aligns with the existing SEND code of practice requirements and ordinarily available provision local areas have in place, so this is a continuum of support.

The Experts at Hand offer should be published in an accessible place, such as the Local Offer website, to support transparency.

The structured support offer should describe support across 3 core areas:

- support for children and young people, delivered with setting staff
- support for settings and staff, whole-setting approach
- support at system level, for mainstream settings across the local area

Support for children and young people, delivered with setting staff includes:

- joint delivery of time-limited group or whole-class interventions, alongside embedding agreed strategies in everyday teaching (for example, speech and language, motor skills, self-regulation). In some cases, and by agreement with the setting, time-limited one-to-one support may also be provided where needs are highly specific or group delivery is impractical, but this must be additional to, and not a substitute for, statutory responsibilities
- support for transitions and reintegration, including for children with attendance or engagement challenges

- short-term specialist input or placements to assess needs and inform ongoing support

Support for settings and staff, whole-setting approach includes:

- embedding inclusive practice through leadership support, coaching and workforce development
- training, modelling and joint working to build staff confidence in identifying and meeting needs
- classroom observation, feedback and co-developed action planning
- support to adapt teaching approaches, curriculum and environments
- development of specialist roles or champions within settings
- co-produced resources and workshops to strengthen engagement with parents and carers

Support at system level, for mainstream settings across the local area includes:

- clear routes to access advice and guidance – for example, helplines, drop-ins, digital platforms
- continuous professional development, including training, webinars and peer learning
- targeted outreach to smaller or early years providers – including PVIs and childminders
- sharing effective practice across settings and phases

All elements of the structured support offer should prioritise early intervention, prevention and inclusion, with support that is sustainable and focused on building capacity within settings, rather than replacing longer-term statutory provision. The structured support offer should make clear how settings access support and ensure equitable reach across the local area.

Workforce approach

The principles guiding the use of the Experts at Hand and local authority SEND transformation fund are to fund workforce roles that are in high demand within the statutory system, face recognised shortages, and have the greatest potential to enhance inclusion within mainstream settings.

Experts at Hand funding should primarily support fully qualified professionals, in line with established professional practice. Local areas

should maintain a clear emphasis on delivery led by trained professionals, while also recognising the important role that assistants, trainees and support workers play within the wider workforce. These roles may form part of the delivery model where appropriate.

The ELSEC programme has demonstrated that a workforce made up of a range of skills from speech and language therapists, support workers and specialist teachers, can provide effective and impactful support to education settings.

ELSEC case studies from the Change Programme (https://whatworks-send.org.uk/reach-change-programme-insights/) provide practical examples of how speech and language therapy assistants have been used to identify speech and language needs at an individual and cohort level, ensuring timely support. You can review case studies at what works in SEND (https://whatworks-send.org.uk/reach-change-programme-insights/).

Local areas will also be able to use the Allied health professionals' support worker competency, education and career development framework (https://www.hee.nhs.uk/sites/default/files/AHP_Framework%2520Final_0.pdf). This provides guidance on training, education and competencies for the allied health professional support worker or assistant workforce, including speech and language therapists and occupational therapists that must be part of the Experts at Hand workforce.

While this is the workforce that the Experts at Hand grant can fund, wider specialist input is essential to effective SEND wrap-around support. In many areas, this provision will extend and strengthen existing support available to mainstream settings. Local areas should therefore consider their full-service landscape, including:

- families first partnerships
- mental health support teams
- best start in life family hubs

They should consider how these can work alongside, reinforce and enhance the Experts at Hand offer. Taken together, these should form a coherent, joined-up 'team around the setting' approach that is clearly aligned, avoids fragmentation and ensures children and families can access the right expertise at the right time. This requires a shared, multi-agency approach across services, workforce and funding. Local area partnerships may also wish to draw on a broader pool of expertise, such as parent carer forums, through complementary funding routes.

Where a local area proposes the incorporation of an APST model within the Experts at Hand offer, a limited extension of the workforce beyond those specified above and in accordance with APST guidance may be supported through the funding available. However, the majority of spend must be on

other areas of the Experts at Hand offer and the spend on APST must be proportionate.

Experts at Hand funding must be used to provide additional capacity and should not be used to replace, displace or reduce existing health or education interventions or funding commitments. Local authorities and integrated care boards are expected to maintain baseline funding for services such as speech and language therapy and occupational therapy, with Experts at Hand funding used to enhance and extend provision rather than substitute for it.

Workforce roles

The following are funded disciplines and examples of the types of services they could be commissioned to deliver.

Local authority educational psychology services

Local area partnerships should ensure that early intervention and preventative approaches are embedded within local authority educational psychology (EP) services, alongside statutory duties. This should involve flexible use of the EP workforce, drawing on the full range of skills such as consultation, assessment, intervention, training, review and research to meet the needs of children and young people effectively.

Some examples of work may include the following.

Consultation and problem-solving
EPs work collaboratively with setting staff through consultation to explore concerns, understand underlying needs, and identify practical, tailored strategies to support pupils effectively within their context.

Assessment and formulation
They use a range of psychological assessment tools, observation, and discussion to build a holistic understanding of a child or young person’s needs, leading to clear, evidence-based recommendations.

Early intervention and preventative support
EPs help settings identify emerging needs and implement timely strategies, reducing the likelihood of difficulties escalating and promoting positive long-term outcomes.

Applying evidence-informed approaches

They support staff to select, understand, and implement interventions grounded in research, ensuring approaches are used effectively and consistently to maximise impact.

Training and capacity building
Through training, coaching, and professional dialogue, EPs build staff knowledge and confidence, enabling settings to develop sustainable, inclusive practices and respond independently to a range of needs.

Case study: Berkshire West integrated care board PINS – use of education psychologists
Whole-school EP model
Educational psychologists (EPs) worked at a whole-school level to increase capacity across a wider number of schools, enabling staff to respond more effectively to identified needs. The approach was designed around graduated response principles, use of ordinarily available provision, and evidence-informed practice, with a strong focus on building sustainable school capacity.

What the EP offer included:

- enhanced training: additional, tailored training beyond the core statutory EP offer, focused on strengthening staff knowledge and practice
- school review and reflection: EPs undertook structured reflective discussion with staff following a school environmental audit. This supported a consultative, strengths-based approach and led to clear, achievable action plans
- targeted professional development: bespoke training linked directly to priorities identified through the audit and discussions, ensuring support was relevant and responsive to each school's needs
- follow-up support: a planned 6 to 8 week review with the link EP to revisit actions, monitor progress, and adapt support based on emerging needs
- wellbeing consultation: Regular drop-in sessions, co-delivered with a health specialist, offering advice, consultation and signposting to help schools support pupils' emotional wellbeing and mental health
- strengthening parent support: Identification of gaps in support for parents and carers, with EP input to help schools enhance their offer and improve engagement

Impact
This approach led to practical, manageable changes within schools. It increased staff confidence, understanding and capacity to support pupils with neurodivergent needs. Schools became more effective at

using their existing resources and were less reliant on ongoing direct EP or SEND advisory involvement.

Specialist teachers

Local area partnerships should ensure that specialist teachers are embedded within the Experts at Hand offer to enable timely, preventative, and responsive support alongside existing SEND provision. Specialist teachers may be drawn from both mainstream and specialist settings, recognising that expertise is developed and held across a range of educational contexts.

This approach should make flexible use of specialist teachers' expertise, such as assessment, modelling, intervention design, coaching, and collaborative problem-solving, to support settings in meeting the needs of individual children and young people effectively within their everyday environments. This may include the following.

In-class modelling and coaching
Specialist teachers demonstrate practical strategies in live lessons (such as using appropriate scaffolding, using visual timetables, supporting communication, using adaptive ICT), while coaching teachers and teaching assistants (TAs) on how to apply these approaches independently, consistently, and flexibly, including via one-to-one support.

Rapid assessment and tailored planning
They quickly assess pupils' needs using observational and assessment tools and alternative ways of recording progress, interpret findings, and develop targeted strategies or interventions that can be implemented straight away within the classroom.

Adapting teaching for inclusion
They support staff to adjust teaching approaches such as chunking instructions, using multi-sensory methods, or reducing cognitive load, and providing advice on reasonable adjustments so pupils with SEND can access and participate in the same curriculum as their peers.

Problem-solving and responsive support
They help staff address emerging challenges, ensure the social and emotional wellbeing of individual pupils, and offer practical solutions that can be tested and refined in real time, including providing behaviour advice and targeted interventions.

Building staff confidence and independence

Through ongoing guidance, feedback, and mentoring, specialist teachers empower setting staff to develop their own expertise, reducing reliance on external support over time while improving outcomes for pupils.

Supporting and advising on access to further specialist support
This includes not only facilitating input from wider specialist services (for example, for sensory impairment, qualified teachers of the deaf or blind, habilitation experts, audiologists, intervenors, communication and other specialist support workers), but also drawing on leadership expertise from specialist and alternative provision settings to strengthen whole-setting approaches. This may involve advice on behaviour, curriculum design and adaptation, and inclusive practice at a strategic level, helping leadership teams embed effective approaches across the setting so that specialist support is fully integrated into everyday provision.

Supporting transitions
Drawing on strong pedagogical knowledge, they work alongside post-16 transition coaches in alternative provision and other settings to align approaches, share effective strategies, and ensure consistent, learner-centred support for young people moving into next stages of education or training.

Where appropriate, we would expect local areas to commission specialist settings including special schools and alternative provision to provide outreach and share their expertise, drawing on existing specialist work such as speech and language therapy and mental health support. Alternative provision, including hospital schools, can play a key role through outreach into mainstream schools, time-limited placements to assess and address needs with a clear route back to mainstream, and longer-term placements where a child has been assessed as needing specialist provision.

Speech and language therapists and occupational therapists

Local area partnerships should ensure that speech and language therapists (SALTs) and occupational therapists (OTs) are embedded within their Experts at Hand offer. This should enable timely, preventative, and responsive support. The model should draw flexibly on therapists' expertise such as assessment, intervention planning, environmental adaptation, coaching, and collaborative working with education staff to support children and young people to access learning and participate fully in their educational settings.

Joint commissioning arrangements between local authorities and integrated care boards should align therapy service specifications with the Experts at

Hand offer, ensuring a seamless continuum of support across universal, targeted and specialist provision, so that children and young people do not fall between gaps in service delivery.

Some examples of work may include the following.

Early identification and preventative support
SALTs and OTs work proactively with early years and mainstream settings to identify emerging needs at the earliest opportunity, using observation, screening approaches and collaboration with staff. Alongside coaching and advice to practitioners, they deliver direct, evidence-informed interventions with children and young people, particularly through structured group-based approaches (for example, for speech and language development or sensory processing needs). These interventions are integrated within everyday provision and aim to address needs early, reduce escalation, and improve longer-term outcomes. Therapists may also provide targeted support for parents and carers, including group sessions or workshops, to build understanding and confidence in supporting children's development consistently across home and education settings.

Functional assessment and analysis
SALTs and OTs assess children and young people within their everyday learning environments, identifying barriers to communication, motor skills, sensory processing, and independence, and translating these into practical, education-focused recommendations.

Embedding strategies in everyday practice
Therapists support staff to integrate strategies into routine teaching and education-based activities (for example, communication-friendly classrooms, use of visuals, sensory regulation strategies, adaptations to seating or equipment), ensuring support is consistent and sustainable.

Intervention planning and review
They co-design targeted evidence informed interventions with setting staff, focusing on functional outcomes (for example, participation, independence, language and communication), and support ongoing review and adaptation based on progress.

Environmental adaptation and inclusion
OTs and SALTs advise on adaptations to the physical and communication environment to reduce barriers to learning, enabling children and young people to access a broad and balanced curriculum alongside their peers.

Coaching and workforce development
Through coaching, modelling, and training, therapists build the confidence and capability of teachers and wider staff to understand needs and apply effective strategies independently.

Collaborative problem-solving

As part of a multi-disciplinary approach, SALTs and OTs work alongside education staff and other professionals to address complex or emerging needs, offering practical, solution-focused advice in real time.

Inclusive policy development
Therapists can support setting leaders when developing inclusive whole setting policies such as uniform and behaviour policies.

The Standardising Community Health Services (https://www.england.nhs.uk/long-read/standardising-community-health-services/) (NHS England) publication includes essential component descriptors which may support integrated care boards and local authorities when planning the Experts at Hand offer and aligning it with existing community services.

Local partnerships will be able to draw on the following resources from the Royal College of Speech and Language Therapists and the Royal College of Occupational Therapists when commissioning for their Experts at Hand. (https://www.rcslt.org/wp-content/uploads/media/docs/Education-Guide_Final.pdf)

Case study: Cheshire and Merseyside PINS

As part the PINS programme, schools were supported to strengthen their inclusive speech, language and communication practice with input from Speech and Language Therapists (SALTs). Key actions included:

- SALT audit to identify school strengths and areas for development in speech, language and communication practice
- developing consistent use of visual supports, for example, visual timetables, ‘Now and Next’ boards
- embedding structured language approaches, including differentiated questioning
- increasing use of sensory-informed regulation strategies, including planned movement breaks and flexible pacing
- developing structured approaches to teaching social communication and emotional understanding
- strengthening identification and targeted support through screening tools and clearer referral pathways
- extending communication strategies into the home through parent resources and guidance
- trialling targeted interventions for pupils awaiting specialist input

This has resulted in improved teacher and teaching assistant confidence in adapting language to meet pupils’ needs, so that children

receive more consistent support across the school day and show improved readiness to learn through more effective regulation.

Case study: Shropshire Telford and Wrekin PINS – use of occupational therapists

Each PINS school received bespoke occupational therapist (OT) support, depending on their need. By deploying OTs at cohort and school level 70 schools were reached. Environmental advice and support were a significant priority for schools.

Wider OT inputs included:

- OT informed environmental and sensory audits for individual schools with accompanying report of short, medium and long-term recommended improvements
- training to understand the impact of the school environment on children's ability to self-regulate and learn
- OT surgery to discuss children's needs and understand the appropriate strategies and pedagogical approaches
- understanding transitions, with strategies to support children's regulation during transitions
- introduction of 'Fun Moves', a whole school training opportunity, which allows staff to assess and develop children's gross motor skills
- staff training and introduction of sensory circuits, interoception and movement breaks to help children to regulate their senses and focus for learning
- sensory processing training to build staff understanding to meet children's needs
- OT audit tool introduced for ongoing school use

The impact
Through OT training teaching and support staff, understand and are more able to meet children's sensory needs. Schools have adapted learning environments and introduced no-cost changes such as decluttering and movement breaks, through to longer term improvements including calmer colour schemes and lighting. Children are more able to regulate themselves and are more engaged in learning with improved focus and reduction in dysregulation.

Speech and language therapy advanced practitioner role

As set out previously in Experts at Hand and local authority SEND transformation fund: funding for local authorities 2026 to 2027 (https://www.gov.uk/government/publications/experts-at-hand-local-authority-send-transformation-fund/experts-at-hand-local-authority-send-transformation-fund-funding-for-local-authorities-2026-to-2027#speech-and-language-therapist-saltadvancedpractitioners) we are providing funding to:

- establish new speech and language therapist advanced practitioners in every integrated care board's geographical area
- support local reform and work with universities, education settings and local speech and language services to get more speech and language therapists working directly with children and young people

Local authorities working jointly with integrated care boards and trusts should recruit a minimum of one new speech and language therapy advanced practitioner in every integrated care board geographical area, to operate over the next 3 years. Each advanced practitioner should work strategically within the local SEND partnership, linking with the integrated care boards, local authorities, health providers, parent carer forums and education settings, as well as local universities offering speech and language therapy qualification routes to:

- provide strategic clinical leadership in the development of the speech and language therapy workforce for education settings
- build relationships between universities, education settings and speech and language therapy services, to grow the speech and language therapy workforce, supporting children and young people in their education setting over time
- develop a strategic approach to increasing speech and language therapy student placements in education settings
- promote the speech and language therapy degree apprenticeship to both potential apprentices and employers, to encourage growth of the speech and language therapy workforce in education
- support the promotion and uptake of opportunities for speech and language therapy support workers to increase their skills and make best use of this workforce in supporting children and young people in education settings

We would expect local speech and language strategies to pay particular attention to addressing speech and language need in the early years.

Those applying for the role must:

- be a speech and language therapist registered with the Health and Care Professions Council (HCPC)

- have significant experience of leading and delivering services that work with children, young people and their families in education settings across targeted and specialist levels of intervention

They should have experience working in a multi-agency context, collaborating with children and young people, their families, and education staff to strengthen the inclusion of learners with speech, language and communication needs and to support improvements in their overall outcomes.

We would expect the role to be a minimum of an NHS Agenda for Change band 8a. This reflects the level of strategic leadership and breadth of scope to deliver outcomes for children and young people, with a salary matched to NHS Agenda for Change salary scales for that band as a minimum.

The multi-professional framework for advanced practice (https://advanced-practice.hee.nhs.uk/multi-professional-framework-for-advanced-practice/) describes the capabilities that underpin advanced practice and provides guidance for integrated care boards and local authorities who will be recruiting to these roles.

Suitable applicants could come from:

- a local NHS provider who have local knowledge and connections
- other independent speech and language therapy provider organisations with experience and expertise in working with children and young people in education settings

To ensure alignment with the national framework for advanced practice (https://advanced-practice.hee.nhs.uk/), further information will be provided to support local areas, which will include additional guidance, person specification and job description.

Further information will be provided to support local areas, which will include additional guidance, person specification and job description. We are working closely with NHS England and the Royal College of Speech and Language Therapists to develop these resources.

Partnership and commissioning

The Experts at Hand offer must be commissioned jointly by local authorities and integrated care boards within the local area SEND partnership joint commissioning arrangements.

Local areas will need to establish clear governance and accountability arrangements as part of the Local Area Partnership Board. This must include a named local authority based Senior Responsible Owner (SRO) with responsibility for delivering the Experts at Hand offer, and a relevant senior representative from the integrated care board.

Key partners should also include (not an exhaustive list):

- education settings across early years providers (including PVIs and childminders), primary and secondary schools and post-16 (across mainstream and specialist settings) – including local multi-academy trusts (MATs) and out of area providers
- community health services and providers such as speech and language and occupational therapy, physiotherapy, community paediatricians, community nurses and public health nurses (health visitors and school health nurses)
- local authority services, including educational psychology services
- children, young people and their families
- system partners including Best Start Family Hubs
- the voluntary, community and charitable sector
- parent carer forums

How multi-academy trusts and education settings contribute to the Experts at Hand offer

MATs and education settings can be recipients of the Experts at Hand offer and could be commissioned to deliver support (for example, AP outreach, specialist teachers). They should support local area partnerships by:

- shaping the offer based on identified need, drawing on intelligence from across their settings about demand, pressures and gaps in specialist support
- acting as strategic partners in the design, development and ongoing review of the Experts at Hand offer, working alongside local authorities, integrated care boards, and wider system partners
- embedding and sustaining inclusive practice, supporting consistent approaches to early identification, intervention and workforce development across settings

- being commissioned partners where their special school or AP expertise is required to support delivery of the offer, for example, AP or Special School Outreach

The local area partnership will need to ensure joint governance, monitoring and shared accountability arrangements across education and health partners, including:

- conducting strategic engagement and consultation so the design and development of the offer is co-produced with key system partners
- establishing effective joint commissioning arrangements to secure provision, including long-term workforce planning
- agreeing and monitoring budgets and funding arrangements
- setting up clear oversight routes for delivery of the Experts at Hand offer, including quality assurance and robust data collection procedures
- setting ambitious performance targets to support monitoring and continuous improvement, including establishing escalation processes and accountability measures to ensure effective delivery of the Experts at Hand offer

The strategic joint commissioning of the Experts at Hand offer should be underpinned by a memorandum of understanding (MoU) between local authorities and integrated care boards.

Delivery model

Local area partnerships should determine the most appropriate delivery model, based on their local context. For example, delivery could be local authority-led, or through an external or independent partner. Some areas may wish to work in partnership with other areas, such as those that share an integrated care board, or those across a mayoral strategic authority.

Areas impacted by local government reform (LGR) will need to consider how to set up and deliver their Experts at Hand offer pre-vesting day. As set out in Ministry of Housing, Communities and Local Government criteria, areas should implement approaches that improve services without disruption from LGR.

The Department for Education is working with the Ministry of Housing, Communities and Local Government, alongside other government departments, to identify effective support and oversight options. The aim

is to consider how the government can take a more active role in supporting areas undergoing local government reorganisation, ensuring that children's services continue without disruption and that these areas are able to deliver reforms successfully.

Local area partnerships must have a robust understanding of their population and its needs, including patterns of demand and how these may change over time. This should reflect the current and future (for local government reorganisation areas) circumstances of the local area, including:

- geography
- size
- the make-up of the education system
- variations in need such as rural and coastal deprivation

This understanding should inform a flexible, locally determined approach to delivery, recognising differences in workforce capacity, access to services and that the type, frequency and intensity of support to mainstream settings will vary according to local need.

Year 1 expectations

As set out in the Local Area SEND Reform Plan (March 2026), local area partnerships are expected to develop a clear commissioning and implementation approach for the Experts at Hand offer from 2026 to 2027, aligned with their wider reform plan. This should include clarity on resources, use of Experts at Hand, and jointly agreed delivery arrangements between local authorities and integrated care boards. We expect local authorities and integrated care boards to deliver elements of their Experts at Hand offer from September 2026. We know that delivery of the offer will be iterative and grow over time.

Building on these requirements, partnerships should use this opportunity to:

- promote research-informed practice
- make best use of existing resources
- develop innovative approaches that contribute to the wider evidence base
- ensure the offer is clearly communicated and accessible and should be published on the Local Offer website

In line with the SEND reform plan expectations for first-year implementation planning, local area partnerships should focus on the following aspects.

Establishing a shared vision

Agreeing a clear, shared framework of aims and outcomes, including:

- a whole-system vision for inclusion and how the Experts at Hand offer supports this
- priority areas of need
- targeted improvements in outcomes
- measures for assessing impact

Understanding local starting points

Undertaking a focused review of the current system to inform delivery. This will include assessing existing inclusion support and services to identify strengths, gaps, and workforce requirements, ensuring new investment enhances (rather than replaces or maintains) current provision. This should include using year 1 as a baselining and diagnostic phase, drawing on and refining local data sources such as the Joint Strategic Needs Assessment (JSNA) to better understand patterns of need across different communities and settings. Local areas should consider how to adapt and flex existing needs assessments to reflect the Experts at Hand model, recognising that need will vary and that support should not be distributed uniformly across all settings. This should inform a clear trajectory for how the offer will be targeted and developed in years 2 and 3.

The focused review of the current system will also include:

- engaging system partners in line with the SEND reform plan expectations on co-production and partnership working, including education settings, local practitioners, health services, parent carers, and children and young people
- drawing on existing engagement routes such as parent carer forums and Best Start Family Hubs

Developing the delivery model

Co-designing the Experts at Hand offer with stakeholders to determine the most appropriate local delivery model, including consideration of existing partnerships and infrastructure. Local area partnerships should ensure that alternative provision and specialist settings are included in system-wide mapping, planning and commissioning, with their expertise deployed not only through outreach but also to support culture change at a leadership level including the development of behaviour, curriculum and inclusive practice across mainstream settings.

The offer should build on learning from national programmes referenced in the SEND reform plan, such as the change programme, including Local Inclusion Support Offer (LISO), PINS, ELSEC and APST, to inform offer development. Areas should provide a navigation function that allows settings to effectively link with and access the Experts at Hand offer. This should be supported by mechanisms that help settings understand their needs, so access can be shaped according to their context.

Strengthening commissioning and workforce arrangements

Develop joint commissioning and workforce plans that reflect both national expectations and local needs, including:

- working across education and health partners to plan workforce recruitment, retention and deployment
- considering innovative workforce deployment, including repurposing existing resources, without diverting NHS staff from commissioned services outside the Experts at Hand offer
- developing deployment plans for assistants and support roles (for example, speech and language and occupational therapy), including training, supervision and appropriate delegation
- developing a deployment plan for trainee EPs, recognising that expansion of the fully qualified workforce will take time, particularly in the early phases

Local areas who already utilise therapy support workers or assistants and specialist speech, language and communication needs teachers will be able to build on this as part of their Experts at Hand offer.

In the first year, local area partnerships are encouraged to engage with neighbouring authorities through their Regional Improvement and Innovation Alliance (RIIA) to share and learn from evidence-based best practice.

Local areas will need to ensure that their Experts at Hand plan includes a minimum of 90% of the funding being spent on Experts at Hand direct delivery for all settings, staff and their children and young people. Where a local area proposes the incorporation of an Alternative Provision Specialist Taskforce (APST) model within the Experts at Hand offer, this should be no more than 10% of direct delivery.

Use data to set baselines and ambitious targets to monitor and measure success. This will also help to build the evidence base for years 2 and 3.

For years 2 and 3, local areas should:

- build on what they have learnt in year 1
- provide further detail on how they are engaging across 0 to 25, specifically early years (including PVIs and childminders) and post-16. Subject to review of year 1, DfE will consider taking a more prescribed approach in years 2 and 3 where plans lack sufficient detail on how local areas are engaging system partners across the full 0 to 25 age range, particularly with early years (including PVIs and childminders) and post-16
- continue to test and learn from adaptations to the offer
- draw on updated guidance that the department will provide as local areas progress

Other SEND reform funding

The Experts at Hand offer should complement and build on the work settings undertake using the inclusive mainstream fund (https://www.gov.uk/government/publications/inclusive-mainstream-fund-2026-to-2027/inclusive-mainstream-fund-for-schools-methodology-2026-to-2027) or inclusive early years fund (https://www.gov.uk/government/publications/inclusive-early-years-fund-2026-to-2027). Settings should use this funding to understand their cohort's needs and implement whole-setting approaches to inclusion that remove common barriers to learning, while also developing targeted, evidence-based support for those whose needs go beyond the universal offer. As part of this, settings may use the funding to engage with the Experts at Hand offer, increasing capacity to translate expert advice into practical action.

Data and monitoring

This section outlines how local areas should collect and monitor data to support the delivery of the Experts at Hand offer, aligning with the Local SEND Reform Plan (March 2026). It translates national expectations into a practical, consistent local framework.

Local areas should establish a clear dataset, beginning with a baseline of workforce capacity across key services such as speech and language therapy, occupational therapy and educational psychology, alongside plans for workforce growth. This will demonstrate how the offer can scale over time.

Access to support across all early years, primary, secondary and post-16 education settings must be defined and measurable. Indicators should capture both the volume of support delivered and the level of engagement from settings, enabling assessment of reach and equity.

Monitoring should include who benefits from the offer, particularly the number of children and young people supported across different ages and settings, with a focus on those without EHCPs or specialist placements to support inclusive mainstream provision.

If working as intended, Experts at Hand ought in time help to reduce pressure on waiting lists. However, a diagnosis must never be a prerequisite for accessing Experts at Hand support. Despite this, we would like local areas to assess demand and system performance. Local areas should track waiting times, waiting lists and referral activity, including both volume and quality, with clear targets for improvement. It should also be recognised that wider contextual factors may influence these metrics, meaning they may not necessarily decrease in all circumstances.

The model should also measure impact, including improvements in inclusive practice, staff confidence and learning environments, as well as outcomes for children and young people through assessment data and feedback.

Engagement with parents and carers, including satisfaction and confidence, should be monitored, alongside financial data to ensure transparency and value for money.

Overall, this data should support baseline mapping and target-setting from 2026 to 2027 and evolve over time to enable more detailed tracking. It should also align with wider SEND data and reporting frameworks to provide a coherent view of performance and need across the system.

Annex A: suggested questions for local areas partnerships when developing the

Experts at Hand offer

Local areas may wish to consider using evidence from What Works in SEND reports, such as the 'What makes joint commissioning effective in local SEND partnerships' report (https://whatworks-send.org.uk/resources/what-makes-joint-commissioning-effective-in-local-send-partnerships/).

The following questions have been developed from work on the change programme. These questions helped change programme partners to create impactful Local Inclusion Support Offers.

More information on lessons from the change programme on how to effectively develop and implement a local inclusion support offer can be found in the REACh Change Programme Insights (https://whatworks-send.org.uk/reach-change-programme-insights/).

How we can focus on the right things to have the biggest impact

- What is our overall vision for inclusion and how can we use this enhanced offer to help us achieve it?
- What do we know about needs of our children and young people? Are there particular needs that the system is not meeting well or early enough that we should focus on?
- What are the outcomes across our system that we most want to improve and how would we know if improved support is having an impact?

How we can develop an offer that works for settings and enables young people to get the support they need

- What is the nature of our relationship with settings across the local area (and beyond) and do we know what settings feel they want/need?
- What is currently available as part of the offer that settings can draw upon? Do we know how effective these services or interventions are?
- What resources do we need to have the capability to deliver an enhanced offer and how would we organise this?
- How do we ensure that the offer is taken up by settings across the age range, including Early Years and post-16?

- How do we identify barriers to Early Years and post-16 students benefiting from the offer?
- How do we ensure that experts have expertise that is applicable across the age range?

How we can take people with us and ensure this will be sustained

- Does our current culture around inclusion help all our settings and services to be working towards the vision? If not, what needs to change?
- How will we involve parent carers and children and young people at a strategic level to coproduce an enhanced offer to settings so that it builds confidence and meets their needs?
- Where do we need to strengthen or extend partnership working to make the most of the resources across our local area, for example, joint planning and commissioning, governance, etc?

How we can ensure this is right for our local area and where we are on our inclusion journey

- What are the key features of our local context that will constrain or enable how we implement a strengthened support offer, for example, scale, geography, provider market, footprint of MATs and integrated care boards?
- How does this work build on what we've been working on together to date and what have we learned from this experience?

Annex B: further examples for structured support offer

Educational psychology services

Educational psychology (EP) services can offer:

- consultation and review to develop a depth and breadth of understanding of concerns
- assessment providing culturally and contextually informed insights into learning barriers
- intervention that is evidence-informed and delivered using robust implementation frameworks
- training at setting, group or individual level to strengthen or develop workforce skills
- research that translates peer-reviewed evidence into practice and supports local action research

There are already strong examples of EPs supporting local systems, including:

- leading programmes and working groups for pupils with emotional barriers to school attendance
- delivering communities of practice such as emotional literacy support assistants (ELSA) and mediated learning support approach (MeLSA)
- supporting settings following significant loss or traumatic events
- working within Best Start Family Hubs and directly with families and young people.
- training early years staff on early identification
- providing families with accessible research-based information
- offering reflective practice and supervision for teachers, SENCOs and senior leaders
- supporting local PINS initiatives

EPs can also provide professional development to the wider local authority workforce (for example, social care, youth justice, attendance services, Best Start Family Hubs). Strategically positioned Principal Educational Psychologists (PEPs) can positively influence system-level decision-making, including work on trauma-informed practice, children's wellbeing and mental health, reducing exclusions and supporting transitions. With robust supervision, local authority EP services are well placed to support and deploy trainee and assistant EPs.

Children and young people's therapy offer

Community services providers are responsible for delivering a range of therapy interventions for children and young people. Joint commissioning

between local authorities and integrated care boards should align service specifications for core therapies (such as speech and language therapy and occupational therapy) with the Experts at Hand offer, ensuring children and young people do not fall between Experts at Hand and specialist pathways within the local offer.

Local areas should consider therapy needs across early years, primary, secondary and post-16 mainstream settings, recognising the differing skills and expertise required for different age groups.

The therapy offer should aim to:

- improve early and reliable identification of need across all year groups
- deliver evidence-informed, setting-based interventions supporting communication, participation and functional everyday activities (for example, classroom learning, PE, mealtimes, breaktimes and trips)
- provide practitioner-led training, advice, coaching and support to setting staff.
- enable joint working across professions within the Experts at Hand offer (for example, therapists, EPs, specialist teachers)
- maintain access to therapist-led individual assessment and intervention where clinically required
- strengthen co-production with parent carers in shaping and delivering the therapy offer and communication with families of children supported through Experts at Hand

This approach requires local areas to consider new workforce models, including the use of therapy support workers and assistants working under the supervision of registered allied health professionals.

Local areas can draw on the Allied Health Professionals' Support Worker competency, education and career development framework (https://www.hee.nhs.uk/sites/default/files/AHP_Framework%2520Final_0.pdf), alongside the practice guide 'Developing speech, language and communication assistant roles within the Experts at Hand offer' on the What Works in SEND website (https://whatworks-send.org.uk/reach-change-programme-insights/). The practice guide will support the set-up of these roles ensuring staff are skilled, deployed safely and tasks appropriately delegated.

Occupational therapy

A whole setting approach promotes participation, independence and wellbeing for all children and young people, regardless of diagnosis, by supporting inclusive environments and best practice across a whole setting team including:

- teaching assistants
- lunch time supervisors
- teachers
- SENCOs
- senior leadership team
- governors

Whole setting support may include:

- developing inclusive policies and improvement plans (for example, PE and uniform policies) with leaders, parents and learners
- conducting inclusive environment audits or learning walks with education staff and other Experts at Hand practitioners
- embedding inclusive practice across areas such as breaktime and mealtime inclusion, functional motor skills for learning, children's well-being and self-regulation
- jointly developing parent workshops and resources
- training and coaching staff on inclusive strategies – for example, effective seating for learning, pre-writing skills

A focused -level approach supports children and young people with emerging needs and should be delivered in partnership with education staff. It aims to prevent escalation and reduce the need for specialist interventions.

Support may include:

- evidence-based interventions for classes, groups or individuals (where clinically appropriate) such as improving sensory regulation, personal organisation, anxiety management, or supporting learning through adapted activities, tools or equipment
- training, coaching and advice to support early identification, inclusive environments and early intervention programmes, for example, foundation motor skills for learning
- developing targeted resources and workshops for parents of children receiving intervention -establishing occupational therapy leads or champions within settings

Helpful resources include the Royal College of Occupational Therapists (RCOT) information and guidance such as:

- Occupational therapy in schools (https://www.rcot.co.uk/explore-resources/children-young-people-families/ot-schools)
- Sensory approaches (https://www.rcot.co.uk/explore-resources/children-young-people-families/sensory-approaches)
- Making great occupational therapy referrals (https://www.rcot.co.uk/explore-resources/children-young-people-families/making-great-occupational-therapy-referrals)

Speech and language therapy

A whole setting approach supports the speech, language and communication development of all children and young people, regardless of diagnosis, by creating communication supportive environments and building staff capability across a whole setting team including:

- teaching assistants
- lunch time supervisors
- teachers
- SENCOs
- senior leadership team
- governors

Whole setting support may include:

- developing whole-setting communication strategies or improvement plans with leaders, parents and learners
- conducting communication supportive environment audits or learning walks with education staff and other Experts at Hand practitioners
- supporting early identification across year groups or pupils at risk of developing speech, language and communication needs
- developing resources and workshops for parents
- training and coaching staff to build communication supportive practice

A focused level approach supports children and young people with emerging speech, language and communication needs or those with associated risk factors and should be delivered in partnership with education staff. It aims to prevent escalation and reduce the need for specialist intervention.

Support may include:

- evidence-based interventions for classes, groups or individuals (where appropriate) such as vocabulary development, storytelling and social communication skills
- training and coaching staff to support early identification, deliver targeted interventions and track progress
- developing targeted resources for parents of children receiving focused intervention.
- establishing speech, language and communication leads or champions within settings

Helpful resources include:

- guidance for education settings on commissioning (buying in) speech and language therapy services and training (https://www.rcslt.org/wp-content/uploads/media/docs/Education-Guide_Final.pdf)
- DfE evidence reviews on SEND in mainstream settings (https://www.gov.uk/government/publications/identifying-and-supporting-the-needs-of-children-with-send-in-mainstream-settings)
- Foundations toolkit (https://foundations.org.uk/toolkit/guidebook/)
- EEF toolkits and hubs (https://educationendowmentfoundation.org.uk/education-evidence)
- What Works database (RCSLT) (https://speechandlanguage.org.uk/educators-and-professionals/what-works-database/)
- recent DFGE evidence reviews (https://www.gov.uk/government/publications/identifying-and-supporting-the-needs-of-children-with-send-in-mainstream-settings)

Example of how occupational therapy or speech and language therapy lead role or champion might work in education settings:

- promote best practice and embed strategies in their setting
- share knowledge and skills with other members of staff
- complete audits of communication/sensory environment
- work collaboratively to identify appropriate support
- deliver small group intervention
- recognise when specialist level support is needed and make appropriate referrals
- act as a point of contact for therapy services.
- act as a point of contact for parents

These roles could link with the Best Start Inclusion Practitioner (BSIP) and Early Language Leads to share knowledge and good practice.

Annex C: examples of how elements of the core offer can be delivered

The ELSEC programme launched in September 2023 and is jointly funded by DfE and NHS England. It is a test-and-learn programme funding innovative workforce models to support early intervention for children with unidentified speech, language and communication needs. The programme allows flexibility to reflect local system capacity and aims to prevent escalation to specialist speech and language therapy or EHCP referral.

ELSEC aims to:

- improve early identification and support for speech, language and communication needs
- reduce specialist referrals through universal and targeted support
- increase workforce capacity, with a focus on speech and language therapy assistants (SLTAs)
- develop a national SLTA training framework
- strengthen data and evidence to inform future policy and legislation
- improve integration between education and health systems

Early outcomes from pathfinder sites show measurable improvements in children's communication, confidence and readiness to learn. Universal screening identified many previously unmet needs, while targeted interventions in mainstream settings supported progress.

For more information on ELSEC, you can read:

- ELSEC interim evaluation report, 2026 (/government/publications/early-language-support-for-every-child-interim-evaluation-report)
- ELSEC Change Programme 2026 case studies, including 'NHS England and DfE - introduction of new workforce models to provide ELSEC support and reduce demand for specialist services', on the What works in SEND website (https://whatworks-send.org.uk/reach-change-programme-insights/)

Supported internships

Between 2022 and 2026, DfE funded the Internships Work programme to provide grants and support to local authorities to establish SEND employment forums and strengthen supported internship provision. Local authorities may continue this focus using Experts at Hand funding.

Many authorities funded SEND employment officers to run forums, bringing together providers, employers and local authority teams to develop strategic plans aligned with wider governance. Some authorities collaborated regionally or linked forums to wider SEND and economic growth agendas, including alignment with DWP's Connect to Work scheme. Read the case study 'LA Story: Somerset's approach to linking supported internships and Connect to Work' (https://www.ndti.org.uk/resource/la-story-somersets-approach-to-linking-supported-internships-and-connect-to-work/).

Forums monitored progress through action plans focused on data quality, programme improvement, employer engagement, shared employer networks, recruitment targets and sustainability. Supporting resources included job profiles, terms of reference, action plan templates (action plan, NDTi), and self-assessment tools, available in the advice pack for local authorities (https://www.ndti.org.uk/resource/resource-pack-for-local-authorities/).

Key takeaways for effective SEND employment forums:

- strong leadership, partnerships and consistent representation are essential
- employer engagement and employer ambassadors drive opportunity and sector diversity
- robust SEN2 data supports planning and sustainability
- joint forums reduce duplication and strengthen networks (for example, Staffordshire and Stoke-on-Trent)
- sharing success builds momentum and spreads good practice
- long-term sustainability should be planned from the outset
- young people's participation must be meaningful, accessible and well-supported

Further considerations include job coach sufficiency and quality and strengthening preparation for adulthood locally.

Evaluation
An independent evaluation of the investment in supported internships showed increased supported internship numbers and improved quality.

Providers reported that 48% of interns entered permanent paid employment by the end of or shortly after their internship. Wider outcomes included improved confidence, independence, employability skills, wellbeing and social participation, with evidence suggesting good value for money and potential local authority savings where EHCPs ceased following employment.

Read the supported internship programme evaluation report (https://www.gov.uk/government/publications/supported-internship-programme-evaluation-of-investment).

Partnerships for inclusion of neurodiversity in schools (PINS)

PINS brought specialist health and education professionals and expert parent carers into mainstream primary schools to:

- shape whole-school SEND provision
- deliver early, school-level interventions
- upskill staff
- strengthen school-parent carer partnerships

PINS worked with approximately 2,800 schools across 41 integrated care board areas, operating until March 2026.

Case study: Derby and Derbyshire

The Derby and Derbyshire project was co-designed and governed by the integrated care board, local authorities, schools and the parent carer voice group, with dedicated project management and strong senior leadership oversight. Specialist input included speech and language therapists, educational psychologists, NHS teams, schools and parent carers, supplementing existing inclusion support advisory services.

Using school data, self-assessment and parent carer surveys, schools received tailored universal and targeted training, coaching and support.

Support included:

- 2 full days of training for school leaders
- 4 half-day workshops for heads and SENCOs
- 12 webinars for staff, professionals and parents
- health-informed environmental audits
- bespoke specialist coaching

- parent carer support facilitated by the Derbyshire Parent Carer Voice (DPCV)

Practical changes included:

- sensory adjustments to the school day and environments
- sensory tools and regulation strategies
- neurodiversity-positive language and communication
- reduced cognitive and sensory load
- improved anxiety support
- strengthened pupil voice
- communities of practice across schools

Across 38 participating primary schools (2024 to 2025):

- permanent exclusions fell by 83% (compared with 39% county-wide)
- suspensions reduced by 42%
- time spent in school increased for pupils on part-time timetables
- referrals to inclusion support advisory services reduced by 66%

The PINS model illustrates how Experts at Hand support could combine school self-assessment, sensory audits, multidisciplinary professional input and parent carer engagement to improve inclusion.

This is an illustrative example, local delivery models will vary.

You can read more in the Partnerships for inclusion of neurodiversity in schools (PINS) (/government/publications/partnerships-for-inclusion-of-neurodiversity-in-schools-pins-interim-evaluation-report). The interim evaluation report for PINs was published in December 2025

A final evaluation report is expected later in 2026.

Alternative Provision Specialist Taskforces (APST)

APSTs are co-located, school-based multidisciplinary teams delivering direct support while advising schools and improving practice. Teams may include educational psychologists, mental health therapists, post-16 transition coaches, family workers, speech and language therapists, youth justice workers and youth workers.

Evaluations show APSTs:

- improve whole-school culture and practice
- provide quicker, more accessible support to pupils and families
- improve attendance, particularly in years 7 to 10
- build trusted relationships with vulnerable families
- strengthen local coordination and information sharing

APSTs can operate within AP or mainstream settings, supporting prevention, inclusion and reintegration through outreach, cohort-based support or time-limited AP placements.

Case study: APST
Located in a large city AP serving a diverse community, the taskforce is led by a taskforce manager and includes a speech and language therapist, mental health practitioner, youth justice worker, family worker, youth workers, a school engagement officer and educational psychologist input. The team works through a central hub and outreach into mainstream schools.

Frankie (not their real name), a young person with dyslexia, ADHD traits and social communication difficulties, received coordinated support led by a youth worker. Interventions included mentoring, neurodevelopmental assessment, wellbeing support and family engagement. Frankie was successfully reintegrated into mainstream school with improved attendance, engagement and behaviour, supported by ongoing light-touch advice.

The taskforce also strengthened school capability through:

- responsive training and reflective practice
- holistic information sharing
- accessible specialist advice
- early identification of root causes of behaviour
- outreach and reintegration support

Outcomes and resources
- Implementation guidance: Alternative provision specialist taskforces (APST) (/government/publications/alternative-provision-specialist-taskforces-apst)
- Evaluation Report: Alternative Provision Specialist Taskforce, Youth Endowment Fund (https://youthendowmentfund.org.uk/funding/evaluations/alternative-provision-specialist-taskforce/);

- Case study: Saffron Valley, Youth Endowment Fund (https://youthendowmentfund.org.uk/story/saffron-valley/)

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