

Suffolk SEND Joint Commissioning Strategy

October 2026

NHS
Norfolk and Suffolk
Integrated Care Board

Suffolk
County Council

Special Educational Needs and Disability Information, Advice & Support Service
sendiass in Suffolk

Young Person's Network

Joint Commissioning – Coproduction Timeline



Open the conversation

Turn insight into vision

Make strategic choices

Build and test the draft

Final co-production

Golden thread: children, young people and families at the centre, with education, health, care, commissioners, providers, finance and voluntary-sector partners sharing responsibility.

January and February: building the shared foundations

23 January (LGA facilitated session): explore

Set the scene, examine case studies, identify Suffolk opportunities and begin the vision.

11 February (LGA facilitated session): refine

Reflect on session one, test opportunities, develop the vision and convert ideas into actions.

What emerged

CYP at the centre; partners working together; clear distinction between joint commissioning and funding alignment; action at pace; and learning from best practice.

Early action themes

Clarify accountability, improve information, use parent-carer and CYP voice, strengthen complex-case decisions, develop specifications and create a consistent commissioning process.

March: turning shared insight into strategic choices

VISION

Blend early identification, co-production and a consistent countywide offer.

PRINCIPLES

Strengthen transparency, early family involvement and clear communication.

IMPACT

Make life easier for families through earlier, clearer and more equitable support.

GOVERNANCE

Define reporting, decision rights, parity of membership and deputy arrangements.

CYP VOICE

Use daily-life outcomes and extend engagement to complex and non-verbal needs.

PRIORITIES

Prioritise therapies, emotional wellbeing and mental health, and preparation for adulthood.

The strategy moved from broad ambition to choices about what must change, who must be involved and how accountability will work.

August: final coproduction tested the whole strategy

1

Listen

Targeted conversations with parent-carer, CYP and voluntary-sector organisations.

2

Test

Challenge with council services, education representatives, health commissioners and providers.

3

Refine

Adjust the definition, vision, principles, priorities, Year 1 focus and governance.

4

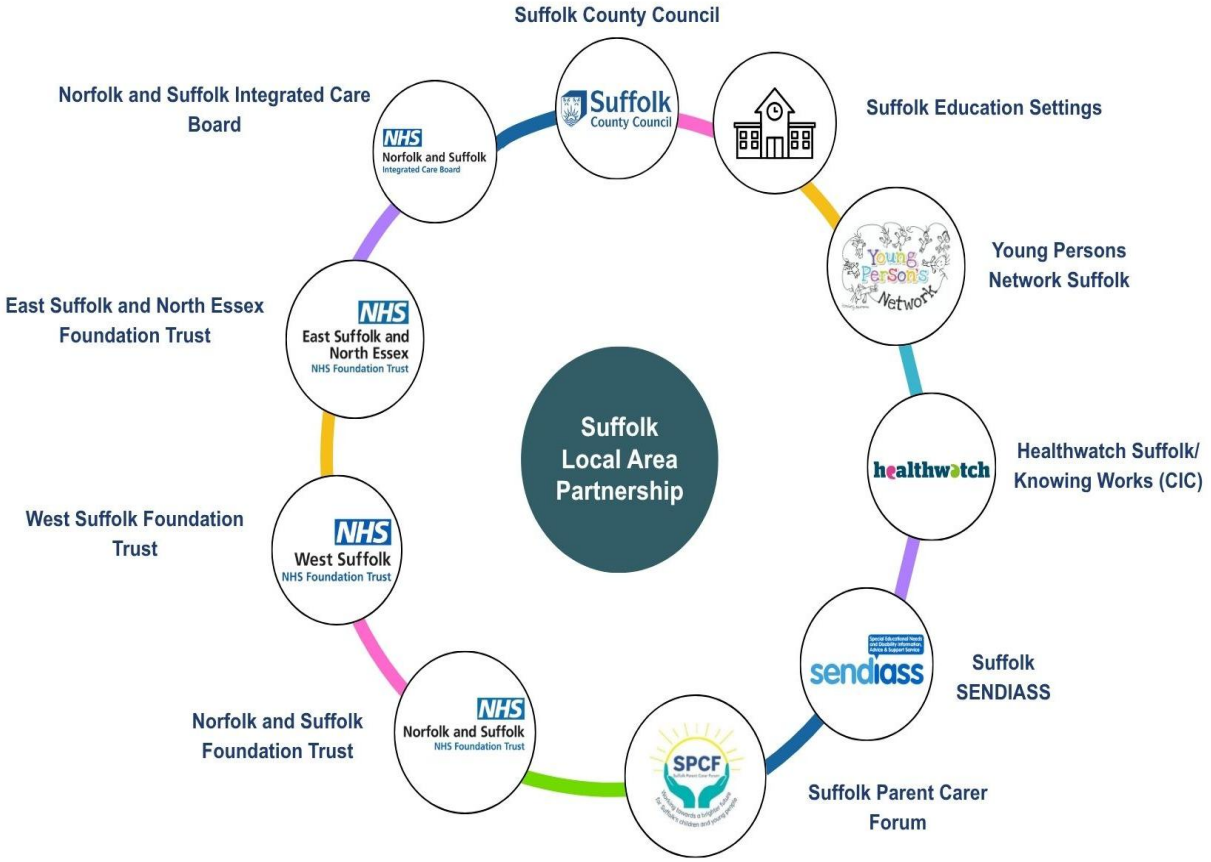
Show

Make clear how feedback changed the strategy and what moves into implementation.

Co-production was treated as an ongoing design discipline, not a one-off consultation.

Who shaped the strategy?

- Children and young people
- Parent carers and Suffolk Parent Carer Forum
- SENDIASS
- Voluntary and community sector partners
- Early years, schools, special schools, AP and FE providers
- Suffolk County Council commissioners and operational services
- Social care, early help and public health teams
- Education leaders and SEND professionals
- Suffolk and Norfolk ICB
- NHS provider trusts (NSFT, WSFT, JPUH, ESNEFT)
- Designated Clinical Officer/ Social Care Officer
- Finance, data and intelligence specialists
- Local Government Association advisers
- Strategic leaders from across the Local Area Partnership



Suffolk Joint Commissioning Priorities

1. Early identification and timely support
2. Inclusion in local communities/settings
3. Sufficiency: right provision in the right place
4. Integrated pathways and joined-up delivery
5. Experience and outcomes for children/families
6. Preparation for adulthood
7. Emotional wellbeing and mental health
8. Effective resources and sustainability
9. Quality, accountability and improvement
10. Workforce development and capability

Year 1 Implementation

CO-PRODUCTION

Formalise how CYP, families, SENDIASS, Knowing Works, settings, health and VCFSE partners shape every stage.

THERAPIES

Develop an equitable, integrated model for SaLT, OT and sensory support, aligned to early intervention and Experts at Hand.

MENTAL HEALTH

Create a more integrated emotional wellbeing and mental health offer across education, health, care and the voluntary sector.

COMPLEX CASE PANEL

Reshape multi-agency decisions through clearer representation, shared decisions, outcomes data, transparency and family involvement.

Each priority needs a named owner, phased milestones, outcome measures, dependencies and an agreed route for decisions and escalation.

From strategy to implementation

1

Finalise & approve

Complete final changes; secure SEND Operational Group approval and Improvement Board endorsement.

2

Mobilise the subgroup

Confirm chair, balanced membership, deputies, decision rights, meeting rhythm and governance routes.

3

Approve the action plan

Phase Year 1 work, assign owners, agree milestones, measures, dependencies and escalation.

4

Create the evidence rhythm

Bring data, quality, finance, CYP/family feedback, risks and impact to every meeting.

5

Close the loop

Tell contributors what changed and maintain co-production through delivery and evaluation.



Implementation test: is shared action improving access, experience, outcomes and sustainability?