

Special Educational Needs and Disabilities (0-25) JSNA

Health Highlights

1. Scope & Strategic Context

2. Wider determinants

3. SEN Population Profile

4. Education

5. Social Care

6. Health

7. Stakeholder engagement

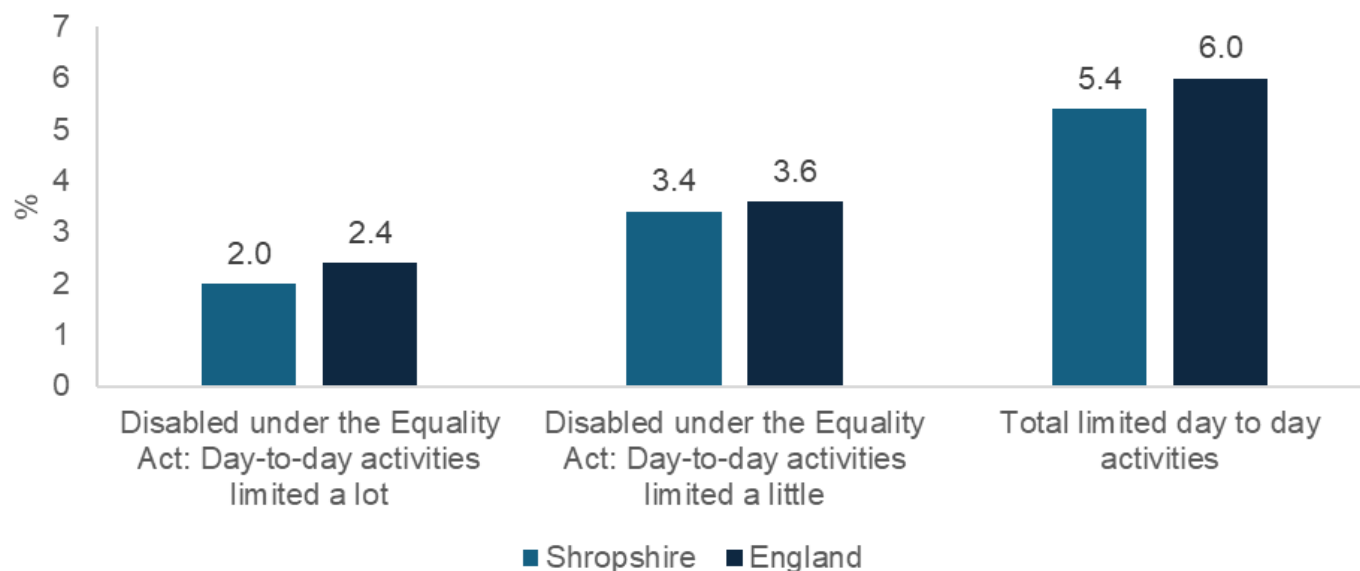
8. Recommendations

The health section of the SEND JSNA covers but is not limited to the following areas:

- Disabilities prevalence among 0-15 year olds (Census Data)
- Social economic and demographic profile of persons aged 0-25 on the GP learning disabilities register
- Uptake of the 14+ Annual Health Check for children and young people with learning disabilities
- Hospital admission episodes for tooth extractions, persons aged 0-19.
- ASD and ADHD estimated local prevalence.
- Recommendations

Disabilities prevalence among 0-15 year olds (Self reported Census Data)

Disability or long term health problems in young people
0 - 15 years old, Census 2021



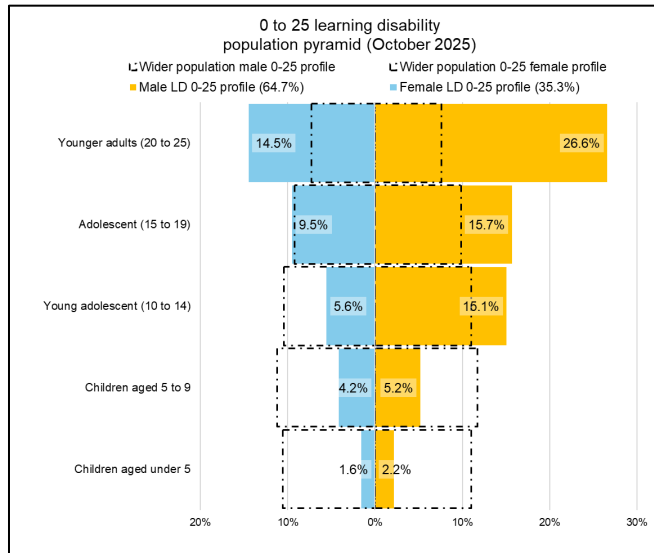
The chart highlights the proportion of young people aged 0–15 with disabilities or long-term health problems that limit their day-to-day activities, comparing Shropshire to the England average using 2021 Census data.

In Shropshire, 2.0% of young people are classified as disabled under the Equality Act with activities “limited a lot”, slightly below the national figure of 2.4%. A further 3.4% have their daily activities “limited a little”, again marginally below the England average of 3.6%. When combined, a total of 5.4% of young people in Shropshire experience some limitation in their day-to-day activities due to a disability or long-term health condition, compared with 6.0% nationally.

This data indicates that while Shropshire’s rates of childhood disability and long-term health limitations are slightly lower than national averages, a notable proportion of young people still experience challenges that may impact their wellbeing, educational engagement, and access to opportunities.

Understanding this population group is important for planning inclusive services, ensuring adequate support in schools, and addressing potential health inequalities across the county.

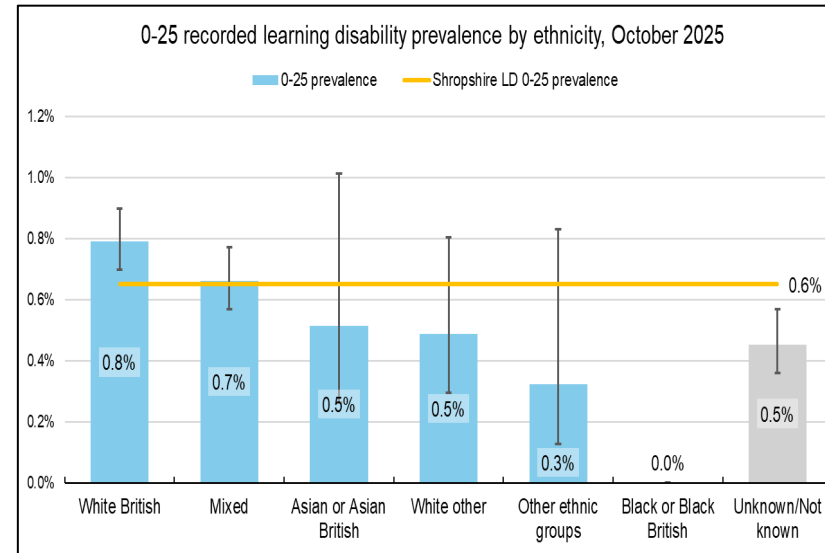
Learning Disabilities Register (GP)



Proportion of persons living within Shropshire, aged 0-25, on the learning disability register by age and gender, October 2025.

Males make up a far larger proportion of patients on the learning disability register than females, accounting for two-thirds (64%) of all persons aged 0-25, giving them an age-group prevalence of 0.8%, with females recording a prevalence of 0.5%. Age profiling indicated that the majority of learning disability patients, aged 0 to 25, are aged 20 to 25.

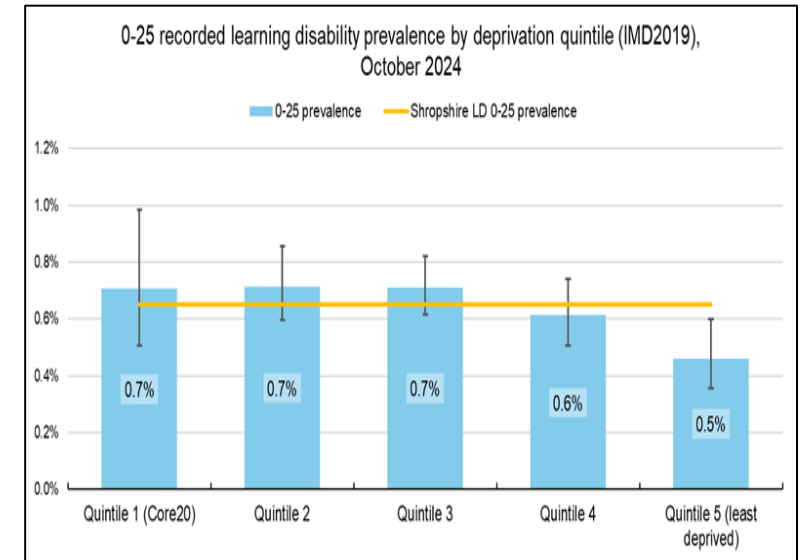
In the early years, the diagnostic label of early childhood developmental disability is given in place of the label 'learning disability'.



0 to 25 learning disability prevalence by ethnicity, Shropshire based patients, October 2025.

Analysis by ethnicity indicated that just under half (48%) of all persons aged 0 to 25 on the learning disability register are of a White British ethnicity, compared to 37% of the general population. However, it should be noted that 21% of patients and 14% of patients on the LD register had an 'Unknown/Not known' ethnicity.

This suggests an over representation of people who are White British, which may be indicative of the availability of advocacy to get a learning disability label.



0 to 25 recorded learning disability prevalence by deprivation quintile (IMD2019), Shropshire based patients, October 2025.

Analysis by deprivation quintile (Index of multiple deprivation - IMD2019) indicates that the most deprived quintile, had the highest 0-25 prevalence (0.7%) and an inequality gradient is evident with the least deprived quintile recording the lowest prevalence. **However, statistically there is no observable difference between the different quintiles.**

Learning Disability Comorbidities, BMI and Annual Health Checks

Condition	Count of patients	Prevalence among 0-25 learning disability population
Epilepsy	45	8.9%
Asthma	26	5.2%
Depression	14	2.8%
Heart Failure	5	1.0%
Hypertension	<5	0.8%
Hypothyroid	<5	0.8%
Cancer	<5	0.4%
Diabetes	<5	0.4%
Mental health	<5	0.4%
Stroke	<5	0.4%
COPD	<5	0.2%
CKD	<5	0.2%
CHD	<5	0.0%
AF	<5	0.0%
Dementia	<5	0.0%
Osteoporosis	<5	0.0%
PAD	<5	0.0%
Rheumatoid arthritis	<5	0.0%

Number less than five have been suppressed

Excludes Type 2 opt outs

May include double counting as there is no limit to the number of disease registers a patient can appear on.

Prevalence of comorbidities among the aged 0-25 learning disability patients residing within Shropshire, October 2025.

Local analysis tells us that as of October 2025 the most common comorbidities within the Shropshire 0-25 learning disabilities population were epilepsy (9%) and asthma (5%), whilst 23% were found to have a GP record of being underweight, 16% overweight and 16% obese (based on last known GP recorded BMI).

BMI	Count	Prevalence among 0-25 learning disability population	Total 0-25 prevalence
1. Not known / Not specified	74	15%	65.0%
2. Underweight	117	23%	13.5%
3. Healthy weight	150	30%	13.7%
4. Overweight	83	16%	4.4%
5. Obese	67	13%	2.6%
6. Severe obese	13	3%	0.7%
Total	504		77,564

0-25 BMI profile of the learning disability patient population and total 0-25 patient population, October 2025.

The table above outlines the BMI profile of the 0-25 learning disabilities population, compared to the total 0-25 BMI profile, limited to patients living within Shropshire. The table shows that a smaller proportion of the LD population has an “Not known / Not specified BMI” than the total 0-25 population and this likely due to the impact of the regular health checks that people with learning disabilities receive. Whilst this prevents any meaningful comparisons it does highlight the one of the key positives of routine health checks.

What this data does tell us, is that 23% of the 0-25 learning disability population are underweight and 32% are overweight or obese.

Dental

Area	Admission episodes	Population	Crude rate per 100,000	Lower C.I (95%)	Upper C.I (95%)	Compared to England
England	30,587	13,347,407	229.2	226.6	231.7	-
ICB	395	111,792	353.3	319.3	390.0	Higher
Shropshire	185	65,597	282.0	242.8	325.7	Higher
Telford and Wrekin	215	47,609	451.6	393.2	516.2	Higher

Admission episodes for hospital tooth extractions in 0-19 year olds, 2023/24.

Analysis of hospital admission episodes with a primary diagnosis of tooth decay for 0-19 year olds indicates that there were 30,587 episodes across England during the 2023/24. 400 of which were recorded to patients from the **Shropshire, Telford and Wrekin giving the ICB a rate of 353.3 per 100,000 statistically, above the England rate of 229.2.** At a local authority level, both Shropshire and Telford and Wrekin recorded rates that were statistically above the national average, with Shropshire recording a rate of 282.0 per 100,000 after 185 admission episodes were recorded.

Individuals with Learning Disabilities are more likely to undergo tooth extractions rather than restorative treatments for decay. The demographic also experiences higher rates of missing teeth and toothlessness, as highlighted by Public Health England in their report on oral care for people with Learning Disabilities. The NHS Long Term Plan, published in 2019, highlights the **critical need for oral health, vision, and hearing assessments for autistic children and young individuals, as well as those with learning disabilities in residential special education settings.** Research indicates that individuals in these settings often experience suboptimal oral health outcomes that go beyond simple tooth decay.

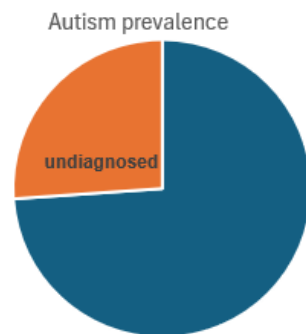
Data from 2023 to 2024 indicates that **22.4 percent of five-year-olds are affected by tooth decay**, a decline from the 23.7 percent reported in 2021 to 2022, according to the Office for Health Improvement and Disparities (OHID). While the West Midlands region continues to report high rates of decay among young children, there have been notable improvements since the previous figures. In **2024/25, an estimated 57% of the child population for England in mid-year 2024 was seen by an NHS dentist.** Similarly to the pattern for adult patients seen, **the percentage of child patients seen varies across ICBs, with Shropshire Telford and Wrekin ICB reporting 63%.** In 2024, the NHS and the Government introduced a strategy to rejuvenate NHS dentistry, focusing on a strong commitment to preventive care and the promotion of oral health among young children, while also outlining plans to increase the dental workforce.

ASD and ADHD

Prevalence of Autism Spectrum disorder (ASD) per 1000

Autism

20 people, of which fewer than 15 diagnosed

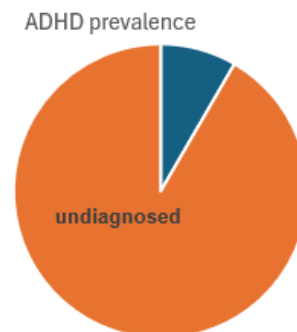


Equivalent to more than 10,000 people in STW, of which around 2600 are undiagnosed.

Prevalence of Attention Deficit/Hyperactivity Disorder (ADHD) per 1000

ADHD

35 people, of which 3 or 4 diagnosed

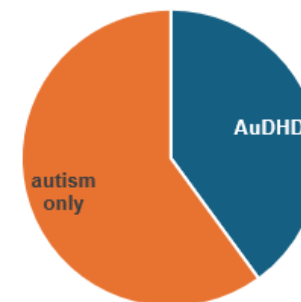


Equivalent to more than 18,000 people in STW, of which 17,000 undiagnosed.

Prevalence of ASD with ADHD, per 1000

Autistic people with ADHD

Around 8 people



Estimated proportion of autistic people with ADHD (combination sometimes known as AuDHD)

Equivalent to around 4,700 people in STW.

N.B. The figures for ASD and ADHD are estimates/assumptions of local figures using national rates as guidance.

People with ADHD are more likely to suffer from:

- Increased usage of Alcohol, Smoking and other Substances
- Sleep Disturbance
- Mental Health Issues – Including risk of Suicide
- Unemployment
- Risky Behaviour and Accidents
- Contact with the Justice System
- Cardiovascular Disease
- Homelessness
- Reduced Life Expectancy

People with Autism are more likely to suffer from:

- Epilepsy
- Migraines
- Insomnia
- ADHD
- Dyslexia
- Dyspraxia
- Mental Health Issues – Anxiety, Depression and OCD
- Gastro-Intestinal Disorders and Allergies
- Joint Mobility Issues

Data Sources for National Prevalence:

ADHD Prevalence - [ADHD Management Information - NHS England Digital](#)
 Autism Prevalence - Fletcher, 2023. Under diagnosis of autism in England: a population-based study. *National Autistic Society*
<https://www.autism.org.uk/advice-and-guidance/professional-practice/under-diagnosis-of-autism-in-england>
 AuDHD Prevalence - Rong, Y., Yang, C.J., Jin, Y. and Wang, Y., 2021. Prevalence of attention-deficit/hyperactivity disorder in individuals with autism spectrum disorder: a meta-analysis. *Research in Autism Spectrum Disorders*, 83, p.101759.
[Prevalence of attention-deficit/hyperactivity disorder in individuals with autism spectrum disorder: A meta-analysis - ScienceDirect](#)

Demand for Health Services

Speech, Language and Communication Needs

- Nationally 10% of children will have some form of speech, language and communication need (SLCN) that they won't grow out of. These children's SLCN needs will be met by a range of professionals and a smaller proportion will require access to Speech and Language Therapy services at any one time. Locally we have an agreed vision that SLCN is everyone's business, and everyone can support SLCN.
- In Quarter 1, and Quarter 2 of 2025 the SLT service received an average of 121 referrals per month for Shropshire.

Emotional Wellbeing and Mental Health

- NHS England have set out a single key performance indicator in their long term plan for children's mental health services. This being the 'number of CYP aged under 19 supported through NHS funded mental health with at least one contact, 12 month rolling period'.
- Based on the STW population NHS England have anticipated that 8341 STW CYP should be seen by MH services 25/26.