

IThrive Report -Oct - Dec '25
11-19 years (25 SEND)



Bolton

Together

Table of Contents

1.0 Introduction	Page 3
2.0 Bolton Together Update	Page 4
3.0 Progress This Quarter	Page 6
4.0 Quantitative Data	Page 8
5.0. Qualitative Data and Case Studies	Page 14
6.0. Parent Peer Support	Page 17
7.0 Testimonials	Page 20
8.0. Summary and Next Steps	Page 20

1.0 Introduction

Welcome to our report for October–December 2025 for the Bolton Together IThrive 11–19 (25 SEND) programme.

This quarter has demonstrated the continued commitment and innovation of our partners delivering the 11–19 years (25 SEND) programme. Across all services, there has been a strong focus on promoting young people’s emotional wellbeing, resilience, and personal development through trauma-informed, youth-centred approaches.

Partners have delivered flexible and responsive support across schools, youth clubs, community spaces, and home settings, ensuring access through one-to-one counselling, group interventions, drop-in workshops, and targeted programmes. Services have prioritised safe, inclusive spaces where young people can express their emotions, explore challenges, and develop coping strategies.

Highlights from this quarter include rapid allocation of support for early intervention, meaningful improvements in emotional regulation and interpersonal functioning, and increased youth voice in shaping their own support. Strong family engagement and collaborative working with multi-agency partners have enhanced safeguarding, ensured young people’s voices remain central, and enabled tailored, effective support for those with complex needs or SEND.

Together, our partners are continuing to make a real difference in the lives of young people, supporting them to feel heard, valued, and empowered to navigate life with greater confidence, resilience, and emotional wellbeing.

119

**CHILDREN AND YOUNG PEOPLE
SUPPORTED THROUGH 11-19
(25 SEND) PROGRAMME**

2.0 Bolton Together Update

In November 2025, our IThrive Navigators for Neurodiversity, Emma and Lauren, joined the programme following a comprehensive induction. The induction included meetings with key partners, including Breaking Barriers, Urban Outreach, Fortalice, Bolton IAS, Woodbridge, CAHMS, MHIST, Bolton Council, and Bolton Toy Library. This preparation ensured they were ready to support families effectively from the outset, helping them navigate the challenges of raising neurodiverse children and connecting them to the right services.

Shortly after, we hosted the Bolton Together Annual Celebration, which showcased the achievements of our partners over the year and reinforced the value of collaboration across the borough. The event provided an opportunity for the Navigators and wider staff to deepen their understanding of the collective impact of Bolton Together's work.

Professional development this quarter included APT training on the Effective Treatment of Anxiety in Children and Adolescents, providing partners with the opportunity to deepen their understanding of evidence-based approaches to supporting anxiety and to apply practical strategies directly in their work with young people. In addition, the IThrive Hub team undertook training on Responding to Civil Unrest through ConnectFutures, allowing staff to consider the potential impact of civil unrest on our community and reflect on how the service and its messaging can be adapted to better support children, young people, and families during times of disruption or heightened community tension.



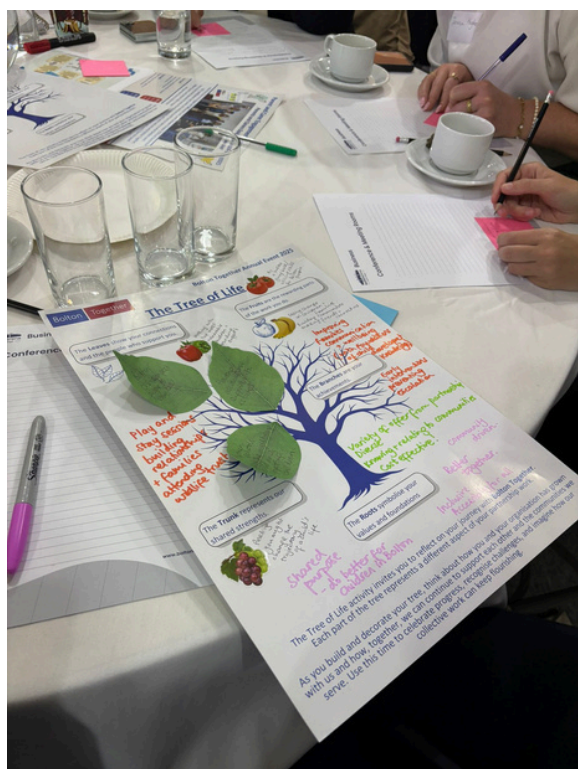
A Season of Warmth
winter wellbeing workbook



Stronger This Winter
wellbeing workbook

This quarter, we have worked closely with the Bolton CYP Neurodiversity Group to shape an Expression of Interest brief for Bolton Together members. This enables applications for up to £44,000 of funding to support families of children aged 5–10 years where there are neurodiversity concerns. This application is now open to members with the aim for support to begin on or just after April 2026.

Finally, we produced and distributed our Winter Wellbeing Workbooks, offering guidance and strategies for families to maintain positive emotional health over the holiday period. The workbooks provided clear information on local support services, coping strategies for children and young people, and practical tools to promote resilience and wellbeing within the home.



Bolton Together’s Annual Event



Bolton Together’s Instagram page

3. Progress this quarter

This quarter a total of **119 young people engaged** with partners under the 11-19 years (25 SEND) ICB programme, **268 young people engaged** through our National Lottery IThrive Plus offer, and **164 were supported** under our Parent Peer Support Network.

Key highlights from October to December:

- Breaking Barriers North West successfully delivered 1:1 and group support to 25 children and young people, providing 72 sessions focused on emotional regulation, coping strategies, safety planning, and promoting positive social connections, while continuing to adapt services to meet the needs of young people despite challenges with non-attendance and limited appointment availability.
- The Proud Trust: Delivered a fully inclusive, youth-led programme for LGBTQ+ young people in Bolton, including creative, reflective, and leadership activities, culminating in a “Teach the Youth Worker” session that empowered young people to lead and build confidence.
- Fortalice staff completed training on Child and Adolescent to Parent Violence.
- Urban Outreach successfully delivered a hybrid programme combining group and 1-1 support at the Amber Centre, enabling 75 young people aged 11–19 and their parents to access personalised emotional wellbeing support, including cookery, emotional health, and school transition activities.
- Fortalice counselling delivered therapy to 22 young people impacted by domestic abuse, successfully improving emotional wellbeing, family relationships, and self-confidence. For example, one young person, Josh, completed nine sessions and reported reduced anxiety, improved self-esteem, and a more harmonious home environment through a combination of person-centred and CBT approaches.



During Quarter 3 (October–December 2025), IThrive provider services delivered a range of tailored support to children and young people, focusing on emotional wellbeing, resilience, and social development. Across seven providers, over 387 young people engaged in group activities, 1:1 counselling, drop-ins and hybrid interventions, with many parents and carers also involved to strengthen outcomes at home. These sessions were funded by the ICB, National Lottery, and Bolton CVS. Services addressed key issues including anxiety, emotional regulation, trauma, grief, and coping with life transitions, while embedding trauma-informed and inclusive approaches.

Feedback from children, young people, and parents continues to be overwhelmingly positive. CYP reported feeling listened to, understood, and empowered, with notable improvements in confidence, coping strategies, and interpersonal relationships. Parents highlighted the consistency and effectiveness of support, particularly the personalised 1:1 and hybrid models offered by Urban Outreach and Fortalice. Interim outcomes data from BLGC Thrive and Counselling shows measurable early improvements in wellbeing, social functioning, and resilience, with longer-term gains expected as engagement continues.

Innovation and accessibility remained a priority. Hybrid café-style sessions, youth-led group activities, and creative interventions such as Three Houses and Box Theory helped engage young people in reflective, empowering work.

Alongside service delivery, audits of the programme database have been completed to assess compliance with reporting requirements and the completion of outcome measures, supporting data quality and consistency across partners.

Overall, Quarter 3 reflects sustained impact across emotional, social, and relational domains. Young people are making measurable progress in wellbeing and coping, while services continue to adapt to capacity, demand, and emerging needs. The focus on early intervention, relational approaches, and family engagement positions these providers to continue supporting positive outcomes for children and young people across Bolton.

4.0 Quantitative Data

4.1 Qualitative Data - REFERRAL DATA

Between July and September, the IThrive Hub received a total of 274 referrals, 137 related to children and young people aged 11 to 19 (25 SEND). Of these, 54.81% were accepted and allocated to an appropriate provider, ensuring timely access to early intervention support where this was the right pathway.

For referrals not accepted into IThrive provision, outcomes reflect careful triage to ensure children, young people, and families are directed to the most appropriate support. The Hub makes multiple contact attempts before closing cases, ensuring every opportunity is given to offer support and discuss options. Reviewing non-engagement will continue to inform improvements in accessibility and service delivery.

Referral outcomes:

- 15 signposted to specialist services (e.g., bereavement or sexual assault support)
- 12 referred to CAMHS or other Bolton Together partners
- 11 already receiving or awaiting support
- 5 not accepted due to complexity or suitability
- 2 no longer required support
- 15 closed after no response from families

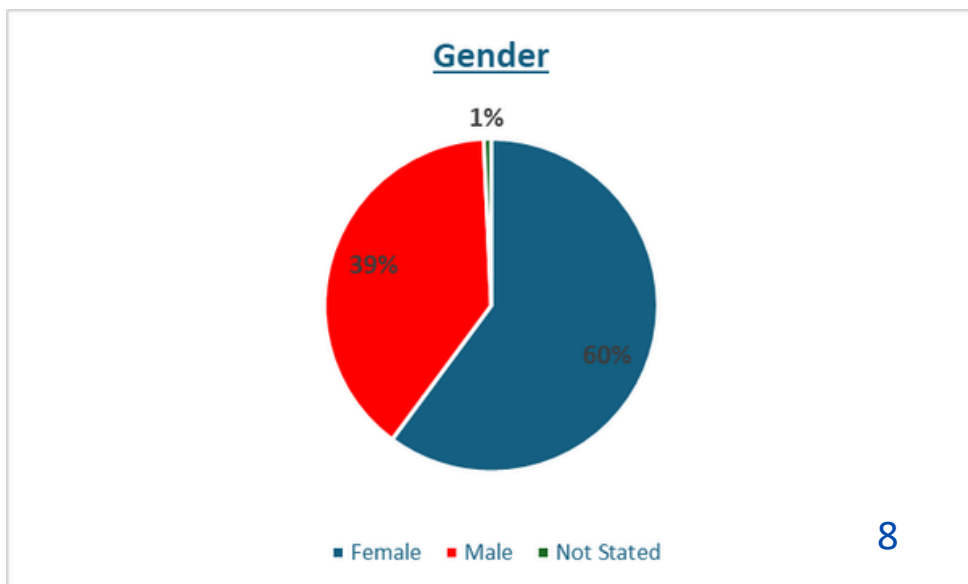
100%

FELT THEIR VIEWS AND WORRIES WERE TAKEN SERIOUSLY

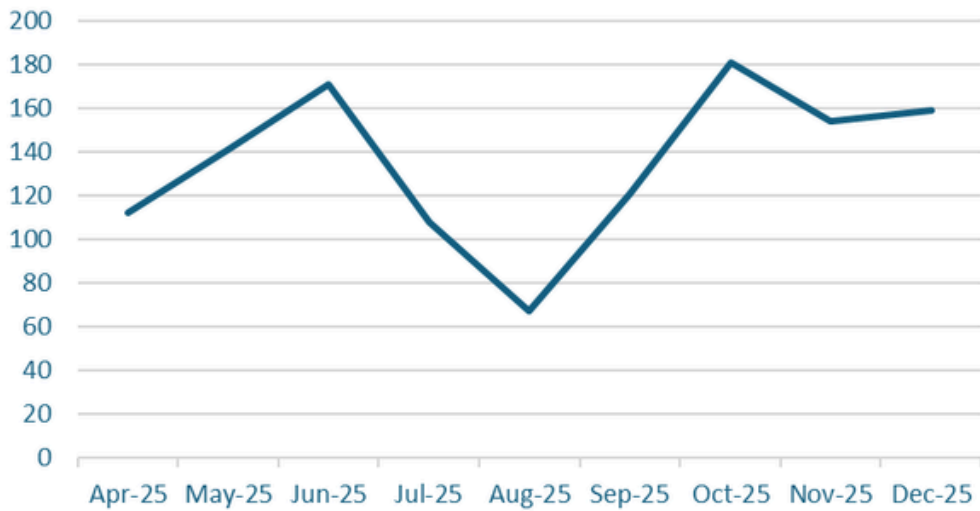
“I really enjoy these sessions i have built up confidence and learnt it is okay to be my self - I have settled in to sixth form really well but feel I couldn’t of done this with out all the support and encouragement I gained from my sessions. .”

(Young Person at Breaking Barriers)

100% would recommend the service to a friend

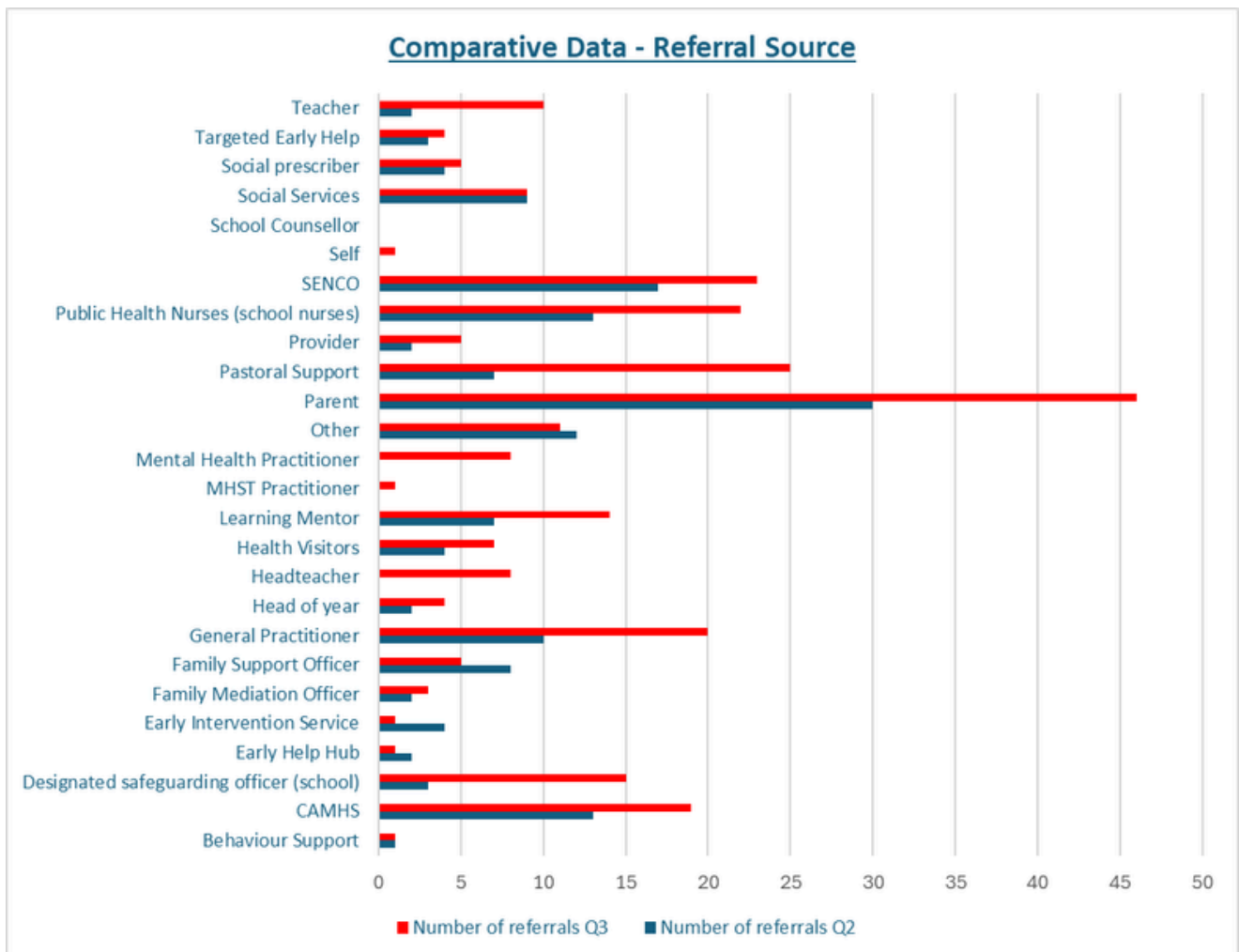


Number of iThrive Hub Referrals



During Quarter 3 (October to December 2025), the iThrive Hub saw a notable increase in referrals, making this the highest-demand quarter of the year to date. This follows a predictable dip in referrals during Quarter 2 (July to September), which aligns with the summer period, and represents a strong rebound compared to both Quarter 1 and Quarter 2. Overall, the annual data shows a clear seasonal pattern, with demand rising significantly once children and young people return to school and professionals are better able to identify and respond to emerging needs.

Comparative Data - Referral Source



Referral source	Number of referrals Q2	Number of referrals Q3
Behaviour Support	1	1
CAMHS	13	19
Designated safeguarding officer (school)	3	15
Early Help Hub	2	1
Early Intervention Service	4	1
Family Mediation Officer	2	3
Family Support Officer	8	5
General Practitioner	10	20
Head of year	2	4
Headteacher	0	8
Health Visitors	4	7
Learning Mentor	7	14
MHST Practitioner	0	1
Mental Health Practitioner	0	8
Other	12	17
Parent	30	46
Pastoral Support	7	25
Provider	2	5
Public Health Nurses (school nurses)	13	22
SENCO	17	23
Self	0	1
School Counsellor	0	0
Social Services	9	9
Social prescriber	4	5
Targeted Early Help	3	4
Teacher	2	10

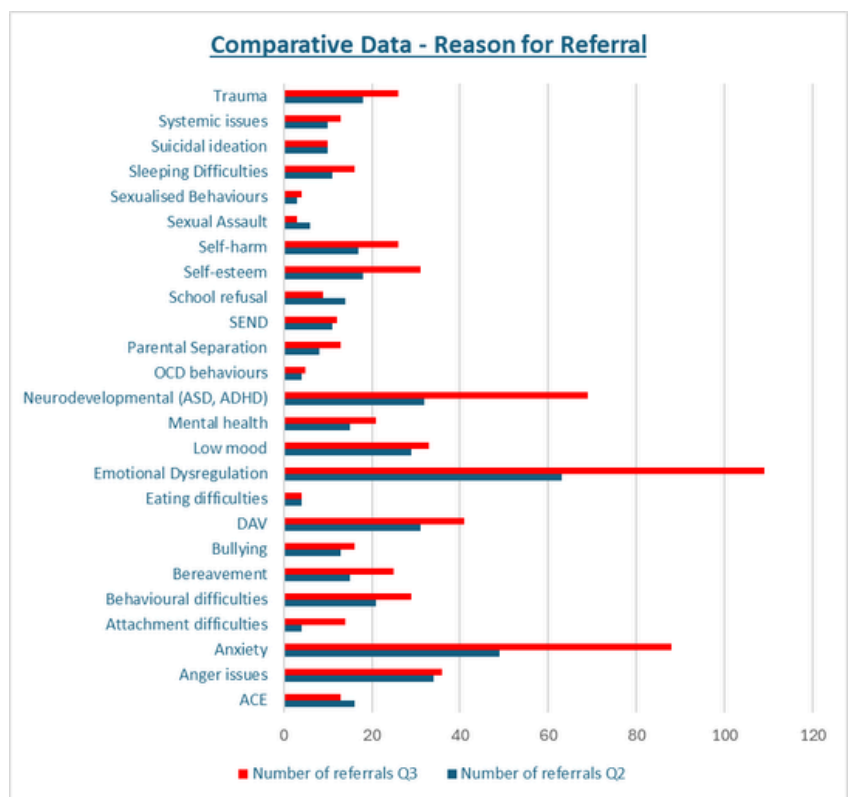
Schools remain the largest referral source in Quarter 3, reinforcing their key role in identifying and advocating for children and young people's emotional wellbeing needs.

Referrals from parents and carers also continue to feature strongly, demonstrating growing awareness of the Hub as a point of access for support.

Across the year, there has been a shift from lower referral activity during the summer months to increased professional referrals in the autumn term, suggesting improved engagement once routine contact with children and families resumes.

Reason for referral	Number of referrals Q2	Number of referrals Q3
ACE	16	13
Anger issues	34	36
Anxiety	49	88
Attachment difficulties	4	14
Behavioural difficulties	21	29
Bereavement	15	25
Bullying	13	16
DAV	31	41
Eating difficulties	4	4
Emotional Dysregulation	63	109
Low mood	29	33
Mental health	15	21
Neurodevelopmental (ASD, ADHD)	32	69
OCD behaviours	4	5
Parental Separation	8	13
SEND	11	12
School refusal	14	9
Self-esteem	18	31
Self-harm	17	26
Sexual Assault	6	3
Sexualised Behaviours	3	4
Sleeping Difficulties	11	16
Suicidal ideation	10	10
Systemic issues	10	13
Trauma	18	26

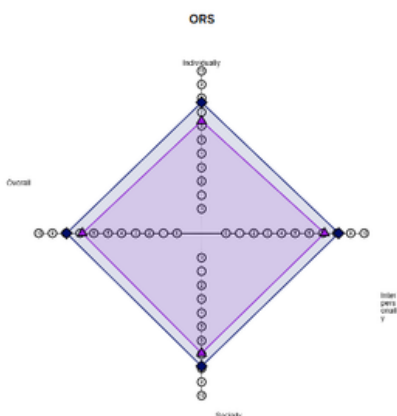
The primary reasons for referral in Quarter 3 continue to reflect emotional wellbeing needs, including anxiety, low mood, emotional regulation difficulties, and challenges linked to school and peer relationships. This mirrors themes seen across the year and highlights ongoing pressures within local communities, particularly as children and young people transition back into structured environments after the summer. The consistency of presenting needs suggests sustained emotional health pressures rather than short-term or crisis-led demand.



Ethnicity	Number of referrals Q2	Number of referrals Q3
Arab	1	0
Asian/Asian British: Indian	1	2
Asian/Asian British: Other	0	4
Asian/Asian British: Pakistani	9	10
Black/Black British: African	3	2
Black/Black British: Other	1	0
Black/Black British: Caribbean	0	1
Mixed: Other	2	5
Mixed: White and Asian	4	3
Mixed: White and Black African	1	3
Mixed: White and Black Caribbean	1	5
Not known	5	3
Not stated	0	7
Other Ethnic Group	1	1
White: British	122	221
White: Irish	0	1
White: Other	5	5

The ethnicity data for Quarter 3 broadly reflects patterns seen across the year, with the majority of referrals relating to children and young people from White British backgrounds, alongside representation from a range of ethnic minority communities. While this suggests ongoing engagement with core population groups, it also indicates that some communities may remain under-represented within referral pathways. This highlights the continued importance of targeted outreach and culturally responsive engagement to ensure equitable access to emotional wellbeing support. In response, we have now partnered with LinguaGM CIC to support partner organisations in working more effectively with families whose first language is not English and who require interpreters or translation services, helping to reduce language barriers and improve access for diverse communities.

4.2 Quantitative Data - OUTCOME DATA



Between October and December 2025, young people supported by IThrive made meaningful progress in wellbeing, with overall ORS scores increasing by 1.14 points and 59% showing improvement across personal, social, and interpersonal domains. Goal-based outcomes were strong, with 90% achieving their first identified goal. SDQ results also showed positive changes, with over half reporting improvements in emotional symptoms, conduct, hyperactivity, and peer relationships. These outcomes demonstrate that IThrive provider's targeted support is helping young people make measurable progress and achieve their goals.

4.3 Safeguarding

During this reporting period, safeguarding activity within the 11–19 (up to 25 for SEND) programme reflected a high level of complexity, requiring robust risk management and sustained multi-agency collaboration. While the number of safeguarding concerns raised during the quarter was limited, the nature and intensity of need associated with some cases required significant professional input.

15 young people presented with high-complexity safeguarding needs, including suicidal ideation, which necessitated comprehensive risk assessment, protective planning, and close monitoring. These cases required coordinated responses across services to ensure that appropriate safeguards were in place and that risk was effectively managed.

Referral data demonstrates varying safeguarding statuses at the point of referral. Three young people had safeguarding issues arise during support, while others were supported at Early Help, Targeted Early Help, Child in Need, or Child Protection Plan levels. This highlights the breadth of need and the importance of responsive safeguarding systems within the service.

Services maintained robust safeguarding processes throughout the quarter, including:

- Active engagement in Core Group meetings, Child in Need meetings, and Initial Child Protection Conferences
- Completion of risk assessments and protective planning for high-risk cases, including those involving suicidal ideation
- Ongoing information sharing to ensure the voice, safety, and wellbeing of children and young people remained central to decision-making

Some children and young people required intensive, ongoing multi-agency coordination due to the complexity of their safeguarding needs. This level of demand places pressure on service capacity, and additional resource may be required to sustainably support high-risk cases while maintaining safe and effective practice across the wider cohort.

Safeguarding concerns continue to be managed in line with local procedures, with timely information sharing and professional collaboration remaining central to the effective safeguarding of children and young people.

5.0 Qualitative Data

5.1 Qualitative Data - CASE STUDIES



Anxiety support provided by Urban Outreach

Andrew is 16 years old. He suffers from anxiety issues when he is in crowded places. Andrew struggles to go into school and into the canteen as he feels people are staring at him. Andrew struggles walking through crowded corridors and has panic attacks. Andrew received ten 1-1 support sessions at home. We worked on his anxiety issues by working on thought processes, grounding techniques and desensitisation. We also worked on goal setting, emotional regulation and I liaised with school to get him the support he needs. Andrew felt the breathing techniques really helped him when he was in a stressful situation. Goal setting gave him the confidence to push himself when he wanted to try something new, and when he achieved these goals, it gave him courage to set new goals. As a result, Andrew doesn't get panic attacks anymore and feels his anxiety is managed.

“Actually, being listened to.”
Feedback from Andrew

CHALLENGES:

- Andrew experienced severe anxiety in crowded places, including school corridors and the canteen, leading to panic attacks.
- He struggled with feelings of being watched or judged by others, which made attending school difficult.
- Navigating social and environmental triggers caused distress, limiting his independence and confidence.

OUTCOMES:

- Andrew learned and successfully used breathing and grounding techniques to manage anxiety in stressful situations.
- Goal setting and gradual exposure helped him build confidence and tackle previously avoided situations.
- He no longer experiences panic attacks and feels more in control of his anxiety, improving his school attendance and daily functioning.

M began accessing support in July 2025 through our listening service. M always engages well during each session and has made fantastic progress with the difficulties she displayed when support first began. M struggles began when she suffered trauma from bullying leading to extreme worries and anxieties, due to the bullies also living close by to the families home M had moved in to grandmas home and found it to difficult to visit the families home and certainly could not stay over night. This began to put a huge strain on the families relationship. M also found comfort in calming drops when her anxieties were at there worst. During sessions we began to discuss each worry and fear in depth. Each session we discuss strategies and techniques that would help M manage these feelings. Over time Ms confidence grew and most recently M has informed me that being able to talk about her feelings has helped her feel more stronger and less afraid - M also informed me that the past few weeks she has managed to do a few day visits and 2 over night stays at the family home, she no longer uses calming drops and just looks ahead now and not back. M has also began accessing our tavern youth drop in group and has made some new friends another achievement M did not think she could do. M also feels she would like to attend a school setting to socialise with other young people her age - something she has not done for over a year. support continues for M through our group session and listening service.

Healing Through Safety and Connection support provided by Fortalice



Zenobia (15) was referred due to increased anger outbursts towards her mum, emotional regulation difficulties, and rising self-harm behaviours. She lived with her mum and had been exposed to long-term domestic abuse from her father, impacting her emotional responses, parent-child relationship, and ability to express needs safely. Support focused on developing emotional regulation skills, identifying early signs of anger, reducing self-harm risk through safe coping strategies, and improving communication with her mum. Interventions included grounding techniques, alternatives to self-injury, a personalised crisis safety plan, and the introduction of a shared calming journal to support non-confrontational communication. Zenobia also identified trusted adults to seek support when overwhelmed. Zenobia engaged positively and showed courage in addressing her difficulties. Over time, she demonstrated improved emotional awareness, greater use of safe coping strategies, increased confidence in managing self-harm thoughts, and stronger communication skills. By the end of support, Zenobia showed increased resilience, improved family interactions, and a clearer understanding of how to keep herself safe and access support when needed.

Understanding and Managing Grief Through the Box Theory support provided by BLGC Counselling



The young person presented with a complex and distressing home situation, including the death of his mother, removal from his father's care, and subsequent placement with his grandparents, which contributed to significant feelings of grief, abandonment, and confusion. Support focused primarily on processing grief and exploring his understanding of loss, both in relation to his mother's death and reduced contact with his father. The Box Theory of grief was used as a therapeutic tool to help him understand how grief changes over time, building on the "Ball in a Box" concept to illustrate that while grief does not disappear, it can become more manageable as life grows around it through routines, relationships, and new experiences. Through this approach, the young person was able to identify where he felt he was within the grief process at different stages of his losses, supporting emotional insight, validation of his experiences, and increased resilience.

Strengthening Emotional Wellbeing and Family Harmony in Adolescence support provided by Fortalice Counselling



Josh (15) presented with generalised anxiety disorder (GAD), anger, low mood, and low self-esteem, largely stemming from adverse experiences with his father, who was physically, verbally, and emotionally abusive. He currently lives with his mother and younger brother, who has an Autism diagnosis, and manages ongoing health conditions requiring several upcoming surgeries. Therapy focused on addressing the impact of past domestic abuse on his mental health, improving self-worth, and strengthening his relationship with his mother. A person-centred approach was used alongside elements of cognitive-behavioural therapy (CBT), targeting self-image, dispelling irrational thoughts, and exploring the effects of unmet basic needs on his relationships. Through this work, Josh began to share his difficulties with his mother, gaining greater autonomy and fostering improved harmony at home, reducing previous anger outbursts and conflict. Over nine sessions, Josh demonstrated engagement and progress, developing coping strategies, insight into his emotions, and hope for ongoing improvements in family relationships. By the end of support, his GAD symptoms had reduced, he had an increased understanding of self-care, and he was aware that he could return to therapy in the future to set new goals.

"I can't believe how making a few small changes at home with my mum can have such a massive change on the whole house, things are much more peaceful now that I have some say on my day-to-day life, and me and my mum are so much happier."

Feedback from Young Person

5.2 Thrive Plus



Over the quarter, our four providers supported a total of 268 young people through Lottery Thrive Plus drop-ins, 1:1 support, and whole club approach. Provision included



structured wellbeing workshops, creative, and sensory activities, emotional health groups, and flexible 1-1 support, delivered in schools, community hubs, and youth-friendly spaces. Young people engaged in coping strategies, emotional regulation, confidence building, and social connection, often returning to sessions as needed. Case examples highlight tangible impact, including reduced anxiety, improved confidence, greater social engagement, and progression to counselling, volunteering, or school participation. Common themes across providers underline the value of safe, accessible environments, peer connection, holistic support involving parents/carers, and tailored approaches to individual needs.

Overall, the programmes offered both preventative and responsive support, helping young people manage challenges, build resilience, and improve overall wellbeing.

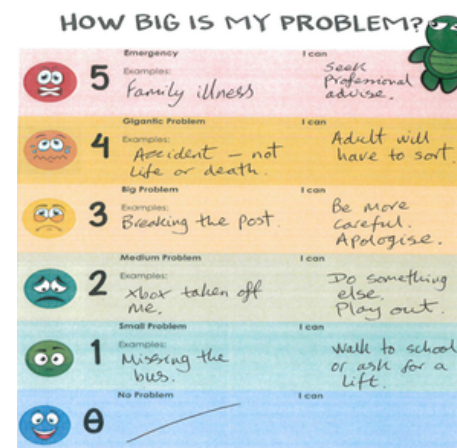
5.2.1 Case Studies

Parental separation support provided by Urban Outreach



Theos' parents had recently separated, which had left him feeling sad and angry. Theo hadn't come to terms with the new norm yet and was particularly missing time with his dad. His parents were still arguing a lot over money and Theo wasn't being protected from these conversations.

During our one-on-one sessions in school, we covered topics such as work on emotions (using the emotions wheel), anger management, scaling problems, anxiety triggers, resilience, coping tools and calming tools and work on self-esteem.



Theo feels a bit calmer and is in a better place than he was at the start of the sessions. Theo has gained confidence in wanting to speak to his parents about not feeling like 'piggy in the middle' in certain conversations and he has decided that he wants to speak to his dad about having some quality one on one time with him without his sister being around.

“They listened and helped focus on the things I needed.”

Feedback from Theo

17

From October to December 2025, Families Together and Breaking Barriers collectively supported 164 parents through a combination of group work, one-to-one sessions, peer support, and signposting/referrals. Their work focuses on:

- Strengthening parental confidence and emotional wellbeing
- Providing practical, personalised support in response to real-world challenges
- Addressing school-related issues, particularly around SEND, school anxiety, and transitions
- Creating safe spaces for shared experiences, leading to meaningful peer connections
- Collaborating with wider services, schools, and statutory partners to ensure joined-up, responsive support.

This quarter has highlighted how effective, personalised parent support can lead to meaningful changes in family wellbeing. Key learning includes:

- Listening without judgment builds trust and helps parents feel heard and supported
- Emotional wellbeing support for parents is essential in improving outcomes for the whole family
- Peer support reduces isolation and helps parents feel less alone in their challenges
- One-to-one guidance is vital for navigating complex systems like SEND, education, and domestic challenges
- Flexible, accessible support options, including home visits, Family Hub sessions, and workshops, increase engagement and reduce barriers
- Practical advice, referrals, and targeted workshops—such as SEND coffee mornings and emotional containment sessions—lead to real-life improvements in parenting confidence and family routines

The programme maintained strong partnerships with statutory services, Family Hubs, and local schools, facilitating early intervention and targeted support for complex needs. Parents benefited from co-delivered workshops and one-to-one support tailored to their circumstances. Notably, some parents who initially attended group sessions went on to receive intensive 1:1 support, resulting in tangible positive outcomes, such as improved parent–child relationships and successful reintegration of children into the family home. from local services.

Demographic data shows that parents aged 25–39 were most engaged (58%), with a majority identifying as White (80%) and female (95%). One-to-one support was the most frequently accessed (86% of parents), followed by signposting/referrals (76%), group work (34%), and peer support (13%). Across 13 peer support groups and multiple workshops, parents shared experiences, learned practical strategies, and strengthened networks, demonstrating the importance of early, relationship-based peer support.

Through consistent, non-judgemental engagement, the programme continues to foster parental confidence, emotional regulation, and positive family outcomes. Parents reported feeling supported, better able to manage challenging behaviours, and more confident in seeking help

***“I feel supported and know I can contact Sam for support in the future if I need to offload in a safe space.”
(Parent at Families Together)***





“The drop in sessions are very helpful when i am having a bad day/week . having someone who will just listen and not judge makes a big difference to my day/week when i need some advice it always good advice . I am so grateful.”
(Breaking Barriers)

“I felt that my problems were helped by being listened to - I enjoyed learning the tools to help calm me down when I am stressed or upset, I feel a lot better now.”
(Fortalice)

“I could talk through things i worry about and learnt how to let things go.”
(The Flowhesion Foundation)

8.0 Key Progress and Next Steps

Over the period from October to December 2025, the Bolton Together iThrive 11–19 (25 SEND) programme continued to deliver responsive, trauma-informed, and youth-centred support amid sustained high demand and increasing complexity. Services remained effective during a traditionally challenging quarter, supporting children, young people, and families experiencing anxiety, emotional dysregulation, trauma, neurodevelopmental needs, and pressures linked to school, relationships, and family circumstances.

During this quarter, 119 children and young people accessed support through the iThrive 11–19 (25 SEND) programme, alongside 268 young people supported through the National Lottery iThrive Plus offer and 164 parents engaged through the Parent Peer Support Network. Feedback from children, young people, and parents has remained consistently positive, with high levels of satisfaction and strong evidence of impact. Outcome data shows the majority of young people made progress in emotional wellbeing, confidence, coping skills, and relationships, particularly where support was tailored around personalised goals.

The quarter also highlighted the strength of safeguarding practice across the partnership. While a small number of cases presented with high-risk and complex needs, providers maintained robust safeguarding arrangements, effective multi-agency working, and a clear focus on keeping young people safe while ensuring their voices remained central.

Key highlights include:

- 119 children and young people supported through iThrive 11–19 (25 SEND), with additional reach through iThrive Plus and Parent Peer Support.
- Strong outcomes across emotional wellbeing, confidence, coping skills, and family relationships
- High satisfaction, with 84% rating services as excellent and 100% reporting they felt listened to and would recommend the service.
- Timely and flexible early intervention delivered across schools, community settings, and homes
- Inclusive and specialist provision, including LGBTQ+ support, trauma-informed counselling, and creative approaches.
- Robust safeguarding and effective multi-agency collaboration in complex cases.
- Significant parent engagement, reducing isolation and strengthening family confidence.

Next Quarter:

- Supporting Bolton Together members to submit Expressions of Interest for new neurodiversity funding.
- Preparing for the implementation of neurodiversity-focused provision from April 2026.
- Maintaining a strong focus on early intervention and timely allocation amid continued high demand.
- Strengthening engagement with under-represented communities to improve equitable access
- Sustaining high-quality safeguarding practice while monitoring capacity pressures.



We extend our thanks to our providers, commissioners and partners for their support and collaboration in working towards our shared goal to provide better experiences for families in Bolton.

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