# Area SEND inspection of Cornwall Local Area Partnership

Inspection dates: 23 March 2026 to 27 March 2026

Dates of previous inspection: 6 to 10 February 2023

## Inspection outcome

The local area partnership's arrangements lead to inconsistent experiences and outcomes for children and young people with special educational needs and/or disabilities (SEND). The local area partnership must work jointly to make improvements.

The next full area SEND inspection will be within approximately 3 years.

Ofsted and Care Quality Commission (CQC) ask that the local area partnership updates and publishes its strategic plan based on the recommendations set out in this report.

## Information about the local area partnership

The local area partnership is made up of Cornwall Council and NHS Cornwall and the Isles of Scilly Integrated Care Board (ICB). They are jointly responsible for the planning and commissioning of services for children and young people with SEND in Cornwall.

There have been significant changes to the senior leadership of Cornwall's SEND services since the previous inspection. These include the appointment of a new director of children's services and an interim chief executive officer of the ICB.

Cornwall Council commissions a range of alternative provision (AP). A significant number of these places are commissioned through a single multi-academy trust. AP provides education for children or young people, including for those who cannot attend school due to social, emotional and mental health and/or medical needs, or for those who are at risk of or who have been permanently excluded from school.

## What is it like to be a child or young person with special educational needs and/or disabilities (SEND) in this area?

Children and young people with SEND and their families experience variability in the support they receive across the local area. This results in inconsistent experiences and outcomes for children and young people with SEND. While there are areas of effective practice, these are not experienced consistently well. Outcomes for children and young people with SEND remain too dependent on the service they access or the point at which their needs are identified.

Early identification of children and young people's needs is increasingly effective for younger children, particularly those with complex learning and/or health needs. In these cases, professionals across education, health and social care work collaboratively and act promptly to ensure families are supported at an early stage. Where this happens, families describe timely access to appropriate services and well-coordinated support that helps prevent children and young people's needs from escalating.

Children, young people and their families who receive support frequently describe practitioners as compassionate, knowledgeable and responsive. Health, education and social care staff frequently build strong relationships with children, young people and families, providing continuity and adapting their practice to meet individual needs. For example, community paediatricians take appropriate action to help ensure that children at increased clinical risk are monitored closely and receive follow-up appointments. Disabled children and young people receiving social care support often benefit from effective multi-agency planning, including family-based short breaks when appropriate, which enhance their day-to-day experiences. The partnership has helped to enable strong multi-agency collaboration and well-embedded SEND practice across many education settings. This helps children and young people with SEND to make meaningful progress.

Despite these strengths, many older children and young people and those with less complex health and/or learning needs, or those with emerging needs, are not consistently identified early and accurately enough by education, health or social care practitioners. This leads to delays in understanding how best to support these children and young people. Too many children and young people experience long delays in accessing health assessments, therapies and specialist pathways. For example, the experience of children and young people within the neurodevelopmental pathway is particularly challenging. While some benefit from appropriate early profiling tools and accessible information, many wait years for support or diagnosis. Families often report confusion about what support is available during waiting periods and describe receiving mixed or unclear messages from services. This limits some children and young people's ability to participate fully in education, family life and their communities.

The quality of education, health and care (EHC) plans is not consistently effective. When EHC plans are outdated, they do not reflect children and young people's current needs. This means that these children and young people do not receive well-coordinated, appropriately tailored support. Some children and young people with SEND experience

unnecessary escalation into AP, including following exclusion, because their needs are not identified and addressed early enough in some education settings. This is particularly the case in mainstream schools. Children receiving SEN support often experience gaps in provision, which contribute to reduced confidence, increased absence and disengagement from learning. They are over-represented in the local youth justice system, highlighting that some do not get the right support, at the right time.

When support is timely, well-coordinated and responsive, young people with SEND feel included in decision-making. They successfully participate in community activities, specialist college provision and supported internships. However, too many experience delays, which limit their independence and engagement. While some young people are well prepared for adulthood, a few have mixed experiences. Some report limited access to equipment, missed opportunities to secure specialist education placements or learning that supports the development of the skills they need to meet their aspirations.

## What is the area partnership doing that is effective?

- The partnership demonstrates a clear commitment to the early identification of young children's SEND. This begins as soon as they are born. Early years teams, including health visitors and specialist teachers, are knowledgeable and responsive. They work collaboratively with parents and carers to support early identification, followed swiftly by appropriate support. Partnership leaders have clear oversight of the impact of this work.

- Many education settings access high-quality support from SEND services for staff and parents, for example from specialist teachers in the cognition and learning team and professionals from the virtual school. This work often leads to improved identification and meeting of children and young people's needs. This, in turn, leads to increased engagement and attendance among primary school-aged children with SEND. As a result, the attainment of children with SEND continues to improve year-on-year at the end of Reception Year.

- Leaders' oversight of the SEND system is typically effective. For example, regular checks and clear expectations produce high-quality EHC plans. Leaders monitor the provision that children and young people with EHC plans receive. As a result, many children and young people with EHC plans have their needs met effectively.

- Community nursing teams and the 0–19 service contribute to assessments and work alongside families to provide emotional wellbeing support. When practitioners respond to families' feedback by adapting processes and communication. This leads to improved experiences for children and young people. The introduction of community appointment days ensures parents and carers can seek advice and help directly from speech and language therapists. Occupational therapists and physiotherapists work effectively with wheelchair and equipment providers to ensure children and young people receive equipment that supports their mobility, safety and independence when they need it. Some multi-agency work demonstrates secure oversight and effective early intervention. For

example, careful checks on the children and young people with autism and/or a learning disability on the dynamic support register help to prevent unnecessary hospital admissions or crisis escalation.

- The co-location of the early help hub within the multi-agency referral unit strengthens partnership working and enables more timely responses for families of disabled children. Early help practitioners work directly with children and their parents to identify and target what matters most to them. Children and young people receiving social care support from the disabled children and therapy service benefit from well-coordinated multi-agency planning led by skilled social workers. Robust commissioning and oversight of specialist children's homes and residential special school placements ensures that their needs are carefully considered in partnership with education and health services. This enables children and young people with the most complex health and/or learning needs to make progress from their starting points academically, personally and socially.

- Most young people supported by children's social care are referred to the transition team in a timely way. Practitioners from the transition team work effectively to prepare young people with SEND for adulthood. Transitions workers carry out assessments to ensure young people receive the right support at the right time

## What does the area partnership need to do better?

- Waiting times, particularly for children and young people's neurodevelopmental assessment and access to support services, are too long. Despite leaders' efforts to improve children and young people's access to health assessments, the introduction of a neurodevelopmental profiling tool has not had the intended impact. Most profiling is completed by education staff rather than by shared work across the partnership. Some schools now have waiting lists to complete this work. This creates an additional wait for an initial autism or attention deficit hyperactivity disorder assessment. Some families resort to electively home educating their child until appropriate support is secured. These delays prevent children and young people with SEND from accessing appropriate support and contribute to escalating needs and poorer outcomes.

- Communication with families about waiting times, decision-making, and available interim support is unclear or inconsistent. Many staff across the partnership lack up-to-date knowledge of the help and support available to families, as they typically do not share information or resources well. For example, across the locality partnerships, family hubs and integrated neighbourhood teams that operate in the local area. Consequently, families too often report feeling insufficiently informed about how and where to access additional support for their child.

- Leaders have established plans to mitigate the impact of a shortfall in specialist education provision. This includes the creation of suitable AP and resource bases

in mainstream schools. Nevertheless, some children and young people continue to face delays in accessing appropriate placements. This leads to inconsistent educational experiences and outcomes which heightens children and their families' anxiety about the suitability of future placements.

- Information-sharing between education, health and social care is variable. This limits effective joint planning and timely responses. For example, although most children and young people's EHC plans contain accurate information, important health and social care advice is not always fully reflected or kept up to date. Delays in sharing final or draft EHC plans mean that professionals cannot always contribute effectively to the delivery of agreed outcomes for children and young people.

- Too many children and young people receiving SEN support have low rates of attendance in school or are suspended or excluded from some secondary schools. Inconsistent early identification and support for these children and young people, gaps in provision and unsuitable placements contribute to poor educational, social and emotional outcomes at the end of Year 11. This results in too many young people with SEND not being in education, employment or training. A small number become known to the youth justice service.

- As young people prepare for adulthood, some miss opportunities to build skills for work, life skills, confidence and resilience soon enough. For example, inclusive community experiences or delays in identifying suitable provision result in inconsistent opportunities and outcomes for children and young people with SEND in Cornwall.

## Areas for improvement

| **Areas for improvement** |
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| Local area partnership leaders should improve the accessibility of commissioned services across the county. They should also improve their parents', carers' and professionals' knowledge about the availability of services to meet children's and young people's education, health and care needs throughout their lives. |
| Leaders should work together to improve and strengthen communication across Cornwall, between themselves, children and young people with SEND and their families. This includes information about support services, ongoing wait times and where they can access support while waiting. |
| Partnership leaders should improve the quality and consistency of EHC plans. This should include ensuring that professional contributions, from education, health and social care are accurately recorded and updated at key transition points so that EHC plans reflect children and young people's changing needs accurately. |
| Leaders across the partnership should work at pace to ensure robust plans are implemented effectively to secure improvements in the waiting times for children and young people awaiting diagnosis of their neurodevelopmental need. |

## Local area partnership details

| Local authority | Integrated care board |
|---|---|
| Cornwall Council | NHS Cornwall and Isles of Scilly ICB |
| Kate Evan-Hughes, Strategic Director for Together for Families | Susan Bracefield, Interim Chief Executive Officer |
| www.cornwall.gov.uk | www.cios.icb.nhs.uk |
| New County Hall (Lys Kernow)<br>Treyew Road<br>Truro<br>Cornwall<br>TR1 3AY | Part 2S<br>Chy Trevail<br>Beacon Technology Park<br>Dunmere Road<br>Bodmin<br>PL31 2FR |

## Information about this inspection

This inspection was carried out at the request of the Secretary of State for Education under section 20(1)(a) of the Children Act 2004.

The inspection was led by one of His Majesty's Inspectors (HMI) from Ofsted, with a team of inspectors including: 2 HMI/Ofsted Inspectors from education and social care; a lead Children's Services Inspector from the CQC; and another Children's Services Inspector from the CQC.

### Inspection team

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