

Cornwall Special Educational Needs and / or Disabilities | Self Evaluation

January 2026

The Context – About Cornwall

Cornwall is a large rural county with a dispersed population and significant geographical variation in access to services, education and employment. Its unique geography, characterised by coastal settlements, rural isolation and a single border with Devon, creates specific challenges for inclusion, travel, sufficiency and workforce recruitment. These contextual pressures directly shape the needs of children and young people with SEND and influence both the opportunities available to families and the barriers they encounter.

Demand for SEND support continues to increase, with notable rises in neurodevelopmental needs, and social, emotional and mental health needs. Cornwall also has a higher-than-average proportion of children educated outside their local area, driven historically by gaps in sufficiency. Children living in rural and socioeconomically deprived communities face greater difficulty accessing timely assessment and local provision, contributing to increased travel times and pressure on families. Average proportion of children educated outside their local area, driven historically by gaps in sufficiency.

Elective home education among children with SEND has also risen, and patterns of need vary geographically, with areas such as Camborne, Pool and Redruth, Newquay, Penzance, Helston and Liskeard experiencing demand for specialist placements that outstrips local capacity. These trends underline the importance of early identification, inclusive practice and strengthening local provision.

Cornwall's overarching ambition, as outlined in its Cornwall Special Educational Needs and Disabilities Strategic plan [SEND strategic plan 2025-2028](#), is to create inclusive communities where children and young people with SEND are educated closer to home, receive timely support, and experience a strong sense of belonging in their local mainstream settings, this requires a shift to Ordinary Available provision (OAP). The Joint SEND Commissioning Strategy provides the commissioning approach to achieve the vision Cornwall has for its young people with special education needs and disabilities cornwall.gov.uk/media/wfdb1lcp/joint-send-commissioning-strategy_2025-30_web.pdf. The strategy sets out 5 key strategic priorities:

1. **Early identification and support**
Ensuring children and young people with SEND have their needs identified and met as early as possible through a strong, comprehensive early help offer ("right time").
2. **Sufficiency and quality of provision**
Commissioning enough accessible, high quality education, health and social care provision so that CYP receive the "right support, in the right setting, in the right location."
3. **Preparation for adulthood**
Raising aspirations and supporting young people with SEND to develop independence, choice, control, and resilience as they move toward adulthood.
4. **Inclusion and belonging**
Ensuring CYP with SEND are valued equally, feel included, experience high quality teaching, and learn alongside their peers.
5. **Effective joint commissioning**
Improving integrated responses across education, health and care so the system can better manage changes in demand and need in an effective, equitable and sustainable way.

Local Area Partnership

Cornwall's Local Area Partnership, comprising the Council, the Integrated Care Board (ICB), early years providers, education leaders, public health, the voluntary sector, employers, children and young people, and parent/carer representatives, works collectively to improve outcomes for children and young people with SEND.

The partnership operates with shared purpose and aligns its work to the SEND Strategic plan and Cornwall's shared ambition for Ordinary Available Provision. Key features include:

- A system-wide commitment to increasing diversity in mainstream schools and reducing segregation
- A shared shift toward inclusive design, adaptive teaching and strengthened universal provision
- A focus on early identification and timely intervention
- Strengthening of community-based support-
- Evidence based, data driven planning
- Collaborative approaches to improving communication and reducing fragmentation
- Commitment to developing and sustaining the SEND workforce

The SEND Centres of Excellence programme exemplifies this collaborative approach. Using a Theory of Change model, cross sector partners work together to define shared problem statements, identify effective practice elsewhere, adapt this learning for Cornwall, and make collective decisions on inclusive culture, system design and locality-based planning.

This approach supports increased local specialist and mainstreamplus provision, reduced travel times, and development of earlier pathways that minimise escalation to statutory plans or independent placements. Sector partners work together to define shared problem statements, identify effective practice elsewhere, adapt this learning for Cornwall, and make collective decisions on inclusive culture, system design and locality-based planning.

Partnership working is driving positive change, including:

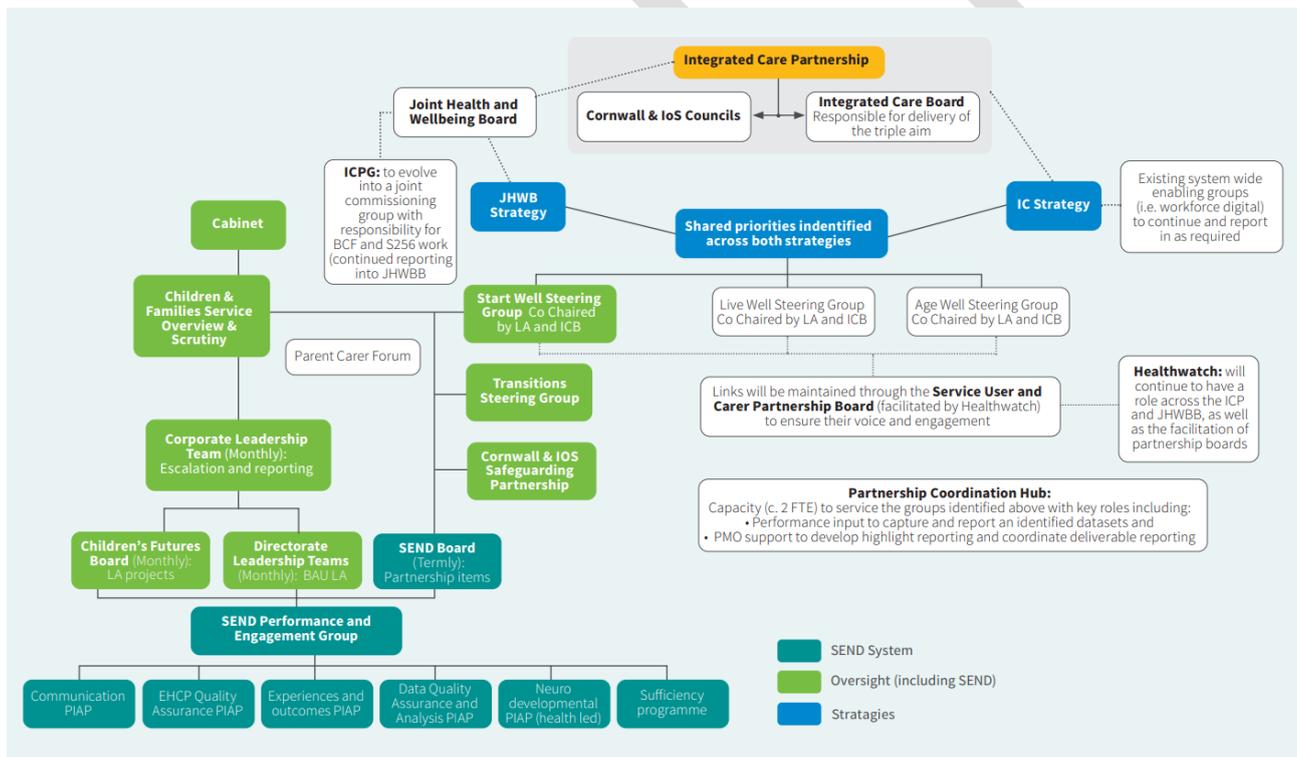
- More children and young people educated in their local mainstream school
- Reductions in the longest travel times
- Strengthened cross agency planning and joint ownership of sufficiency challenges
- Improved coproduction with children, young people and families

However, challenges remain, including, despite significant investment, delays in EHCP timeliness because of volume, long waits for Speech and Language Therapy and neurodevelopmental assessments, elevated exclusion rates, persistent absence among pupils with SEND, insufficient specialist provision, and financial pressures linked to growing DSG deficits. Cornwall's rurality and geographic isolation continue to present barriers to service delivery and workforce recruitment.

Improvement priorities include strengthening early identification and support, expanding place-based specialist and mainstream provision (including SEND Centres of Excellence), enhancing preparation for adulthood pathways, promoting inclusion and belonging, and aligning commissioning and budget arrangements. Progress will be measured through improved EHCP timeliness, reduced DSG deficit, increased proportion of children in mainstream schools and better sufficiency in key geographic areas (including SEND Centres of Excellence), enhancing preparation for adulthood pathways, promoting inclusion and belonging, and aligning commissioning and budget arrangements.

Governance and Quality Assurance

Cornwall's SEND system uses a multi-agency governance structure to ensure accountability, transparency, and continuous improvement across education, health, and social care. The **SEND Board**, led by senior leaders from Cornwall Council and the ICB, oversees strategy delivery, monitors performance, and addresses emerging issues. Board members represent key sectors including education, health, social care, parent/carer groups, and voluntary partners, supporting both upward and downward information flow. The **Start Well governance** keeps SEND central in children's services and community health, utilizing multi-agency panels, quality assurance, and real-time data dashboards for informed decision-making. External assurance from Ofsted/CQC inspections and peer reviews is used as an improvement tool. Quality assurance focuses on outcomes for children and joint evaluation identifies areas for redesign. Regular engagement with children, young people, and families ensures feedback informs ongoing improvement. Overall, the governance framework shows strong leadership, effective collaboration, and an increasing use of data, laying foundations for sustainable positive change despite continued variability in some areas.



Self-Evaluation Framework

The Self Evaluation Framework (SEF) gathers the Local Area Partnership's shared review of Cornwall's SEND system, highlighting both strengths and areas that need development. This collaborative evaluation is shaped by input from education, health, social care, early years providers, parent and carer representatives, as well as children and young people. The SEF utilises data from performance metrics, quality assurance activities, feedback from lived experiences, and insights from the SEND Strategy and Joint Strategic Needs Assessment (JSNA) cornwall.gov.uk/media/i01hzmkg/final-send_needs_assessment_2024_v10-1.pdf. Collectively, this information offers a transparent and evidence-based perspective on successful practices, areas needing improvement, and overall local progress.

Organised around the themes of the SEND inspection framework, the SEF assesses how effective the local area partnership is at enhancing outcomes and experiences for children and young people with SEND. Its main goal is to establish whether local arrangements allow for timely and accurate identification and assessment of needs, if the right support is received promptly, if the voices of children and young people are genuinely considered, and if they are being effectively prepared for their next steps.

The partnership shows increasing maturity in using evidence to drive improvements. The JSNA has deepened understanding of community needs across services, supporting better alignment between strategic planning, commissioning decisions, and practical delivery. Leaders now have a clearer view of population trends, growing demand, inequalities, and emerging needs. This knowledge informs plans for early intervention investment, expansion of specialist provision, redesigning pathways, and workforce development.

Partnership efforts have already made a positive difference, with several changes benefiting children and families—such as stronger inclusion support in early years, reduced waiting times through new processes, enhanced multiagency collaboration, expanded neurodiversity support, and improved quality and consistency in EHCP procedures due to better quality assurance. Engagement with children, young people, and families has also grown, with better methods for collecting lived experience and integrating it into decision-making.

However, the SEF acknowledges that the speed and consistency of these improvements vary across the system. Ongoing challenges include EHCP timeliness, availability of specialist placements, long waits in key health pathways, and inconsistent experiences of inclusion in schools. Persistent absence and exclusions are still areas that require ongoing focus. The partnership recognises these challenges and has set clear priorities for improvement, supported by structures for shared oversight and accountability.

In summary, the SEF offers an honest, evidence-based assessment of current progress, system performance, and continuing challenges. It underlines the collective commitment to improving identification, assessment, provision, participation, and outcomes for children and young people with SEND throughout Cornwall.

The impact of the local area partnership's arrangements on the experiences and outcomes of children and young people with SEND.

Children and young people's needs are identified accurately and assessed in a timely and effective way

Focus

Our shared priority is ensuring that the needs of children and young people (CYP) with special educational needs and disabilities (SEND) are **accurately identified** and **assessed promptly**, so that support is not delayed and needs do not escalate. This requires clear assessment criteria, confident and skilled practitioners, timely referrals, and strong multi-agency working. Improving communication, accessibility of information, and early support pathways remains central to enabling families and professionals to navigate SEND processes effectively.

Impact

Early years multi-agency working remains a strength and continues to deliver positive family experience, timely identification and coordinated support into early years settings and **Education, Health and Care Plans (EHCPs)**.

Portage service provides early intervention for children aged 0-3, with referrals primarily coming from health professionals such as health visitors and pediatricians. The service uses developmental journals and video interactive guidance to support families, involving both parents and siblings, and ensures a multidisciplinary team is available to address a range of needs as they arise.

Early identification of need leads to a holistic approach to family support, often involving wider family members. It is used as the start of a supportive journey with the family, signposting them to other services and facilitating transition to education settings by contributing to the children's EHCP at the beginning of their journey.

The range and depth of universal and **targeted early help services** for children and families have progressed with more accessible ways of communicating for example the podcasts offering parenting information, hybrid, face to face and self-directed learning with a strong evidence base. This provides a robust platform upon which Early Support services can be built.

We were a national trailblazer for the development of Family Hubs, and we are exploring how to build on the strengths of our existing model and make it easier for all families to access preventative help in their communities.

We have the benefit of integrated children's community health (health visiting and school nursing) delivered directly by the Council which opens opportunities for innovation and integration, which enabled us to identify and respond to emerging needs more quickly and effectively.

There has been excellent progress on improving the experiences and outcomes of newborn babies and

infants through our [Start for Life](#) approach. Our [parenting offer](#) was already strong and has been improved further by extending the range of parenting programmes available and creating a unified specialist parenting team. We are exploring how we can work differently with schools, testing and developing a Team Around the School approach with several pilot schools, with a focus on parenting and utilising early intervention earlier.

The Sensory Support Service is notified by Audiology when newborn babies fail their Newborn Screening Test. An Advisory Teacher of the Deaf makes contact with the family within 48 hours of referral in line with national guidelines. This early intervention enables emotional support for the family following diagnosis and then support to be put into place for language and communication skills development. Support and training continue from Advisory Teachers and Highly Specialist SALTs to enable successful transition into Early Years settings and school.

There are also links with Ophthalmology so that when children are diagnosed with vision impairment, the Sensory Support Service is notified. Contact is then made with the family, and support is put in place which involves an Advisory Teacher of Vision Impairment and, where appropriate, habilitation specialists. This early intervention enables emotional support for the family as well as providing advice and guidance for visual/tactile development of the child. Training and support are provided for Early Years settings and following this transition into school.

Screening, Training, and Early Intervention in Schools: Speech and language screening tools and training have been introduced to schools and early years settings to identify and support children with communication needs. Most schools now offer some form of screenings on entry, and targeted interventions have shown positive results. The team continues to assist schools yet to implement these practices to improve early intervention.

Neurodevelopmental (ND), speech and language therapy (SALT), and CAMHS pathways have seen reductions in waiting times through improved list management, workforce expansion, parent/carer sessions, “Right to Choose” facilitation, and proactive “waiting well” strategy. A new approach to the neurodiversity pathway that supports children regardless of diagnosis, providing vital information and guidance for necessary adjustments.

Changes to the system needs-led neurodiversity pathway to enable support to children regardless of diagnosis, with significant information and advice to support adjustments. This includes bespoke consultation to review and consider individual need, context and appropriateness for diagnostic pathway.

The Neurodiversity Hub implementation has enabled greater access to parents, carers, individuals and professionals as a means of advice, support and strategies to empower greater self-help and reasonable adjustments. NHS health organisation webpages improved to accessibility standards for ease of usage.

Successful delivery of the **partnership inclusion for the neurodiversity project:** in 2024-25, where 30 primary schools participated, with plans to include another 38 schools in 2025-26. Workforce development and intervention feedback indicate useful adaptations for neurodiverse students.

Community assessment days for SALT and ND have enabled large numbers of families to receive consultations, signposting, and professional advice in a single event, supporting more accurate and timely identification. 150 families were recently invited to the community event. The event saw every family in attendance offered a consultation with a member of the SaLT Team. Feedback to the assessment days has been overwhelmingly positive.

CAMHS restructure of teams into 3 integrated care areas, aligning workforce and reducing waiting time inequalities in areas of greater deprivation, ensuring visibility of true waiting times.

MHST full coverage planning by 2029 to improve early help mental health offer to prevent demand for

specialist mental health services and reduced chronicity of need

Pilot disordered eating pathways have been developed in recognition of emerging need – these are co-delivered pathways across paediatrics, CAMHS and specialist eating disorders provisions.

Evidence

Progress of this work is demonstrated through both quantitative data and qualitative feedback:

September 2025, Cornwall's Portage Service was rated again by the National Portage Service, as a 5 Star Portage service. This service is important for early identification of need and recognised for the quality of its support. This includes the support Portage provides to completion of EHCPs and support for young children moving into settings.

'We've had the privilege of receiving Portage support for almost two years, and it has truly made a difference in our lives' – Parent

SaLT waiting times have improved, with a sustained reduction in children waiting over 52 weeks, supported by new recruitment and redesigned pathways.

Successful system delivery partnership in inclusion for neurodiversity project for 24-25 for 30 primary schools, and ongoing for 25-26 for an additional 38 primary schools – workforce development and intervention feedback suggests useful adaptations and changes in approaches for neurodiverse pupils, good engagement in community of practice events and PINS conference is demonstrating positive uptake and engagement.

Co-produced materials (e.g., communication plans, ND pathway leaflets, virtual tours of clinic spaces) show strong engagement with families and young people, improving accessibility and understanding.

Joint appointments between SALT, NDAT, and other specialist teams provide a more holistic assessment and reduce duplication. Parent/carer & practitioner feedback:

"I genuinely thought this was a fantastic thing to put on and information to share and collect and was extremely helpful and not just practically but also mentally too. Great people, delivering a great service. Very welcoming, kind and informative." (Parent)

"The face to face and personalisation to each child was great, the information and how it was delivered was really easy to follow and understand, the level of information of the support group and parents was great and a really fantastic service." (Parent)

"I was initially nervous about completing RFH screens f2f with parents and wondered whether seeing the parents/children would alter my clinical decision making. It didn't! I really valued less report writing time. I was able to screen more children because of this."(Practitioner)

"Having other professionals from other services gave the day a more holistic approach to supporting children and families."(Practitioner)

CAMHS wait times have reduced dramatically, with only 53 CYP waiting more than 28 days for an appointment compared to 600 previously. Cornwall and Isle of Scilly, identified as number 1 nationally for CAMHS access – impact of timelier access of assessment of need

Next steps

Team around School approach that can effectively support SEND. Consideration to be given to the development of Circles of Support with the development of Early Support. Supporting School readiness through Family Hubs and developing robust community of practice for Early Support that is inclusive of SEND.

- Strengthen collaboration across education, health, and care to accurately identify and address CYP's needs quickly and effectively. Create and expand a local task force to support schools and families, implementing the SEND Strategy, Best Start in Life, and NHS long term plan. Continue to strengthen identification and assessment so that children and young people receive the right support at the right time. Continued monitoring and review of investment impact into services and on waiting time trajectories (SaLT, ND, and ADHD treatment waits). Key improvements will include:
 - SaLT deliver **regular assessment days** across Integrated Care Areas, targeting 80 families per day, with continued joint consultation with NDs and involvement of wider support organisations.
 - Maintain commitments that **no CYP will wait more than 52 weeks for a first SaLT appointment by October 2026**, and none more than **18 weeks by October 2027**.
 - Launch and embed the **Healthier Together** digital platform for improved navigation and access to local health and care pathways.
 - Continue digital development of the neurodiversity profiling tool to generate meaningful data on usage and support prevention focused approaches. Focused approaches. Focused approaches. -focused approaches.
 - Children community nursing and SaLT- Embed **goal-based outcomes** and therapy outcome measures across community therapy pathways to strengthen impact measurement. **-based outcomes**
 - Full coverage of MHSTs to be delivered by 29/30 (steering group in place and co-production of full coverage commissioning plan)
 - Overcoming barriers to digitalising the neurodiversity profiling tool to allow for meaningful intelligence on usage, uptake, and prevention

Children, young people and their families participate in decision-making about their individual plans and support

Focus

Our focus is to ensure that children, young people, and their families are **active partners** in planning, reviewing, and shaping the support they receive. This includes ensuring CYP understand their plans, know their rights, and are offered meaningful, accessible opportunities to express their views. Impartial advice, early information, and multiagency coordination are central to enabling informed decision making and promoting confidence in the SEND system. Agency coordination is central to enabling informed decision-making and promoting confidence in the SEND system.

Impact

SEND System Navigators have streamlined communication and system navigation, with families feeling more informed and reassured. Escalations are reduced, and issues are resolved earlier. Families report positive experiences, clear information, empathic support, and personalised solutions that boost

confidence and outcomes. Navigators provide timely responses, explain processes clearly, and offer accessible advice, helping lower anxiety and complaints.

SENDIASS continues to provide trusted, unbiased guidance, helping families navigate processes and understand their rights, improving engagement with planning and review.

Joint work with clinical partners (Ophthalmology, Audiology, Habilitation¹ specialists) ensures decisions are informed by accurate assessments and shared professional understanding.

Student voice is embedded across services—for example through communication passports, EP reports incorporating CYP views, and young people shaping their EHCP reviews—resulting in clearer alignment between support offered and lived experience. The quality of EHCPs has improved in general, with a greater focus on aligning the aspirations of young people with the remainder of the document, and this supports better outcomes when seeking suitable education placements. At Post16 the Statutory SEN team is improving the process of directly involving young people in decisions where parental requests are received, to ensure that the requests are in line with the wishes of the young person.

Your Future Kernow also gather views at the point of transition into Post16 education, which helps to ensure young people are on the correct education pathway and supports their Preparing for Adulthood aspirations. Young individuals engaging with **Your Future Kernow** receive support through post-16 transition consultations, which include parents and carers. Independent careers advice and guidance are also provided to facilitate a successful transition.

The work of the SENDSS focusses on the needs of individuals with a range of SEND; their voice is a key element of the work carried out. The Communication Support Team and AAC Teams, for example, talk with the child at the beginning of every visit; this communication is in whatever form that the child or young person uses. The AAC Team has now developed a grid which can be used on I-Pads for capturing pupil voice for learners who communicate using powered voice-output devices. T

he Cognition and Learning Team have carried out a variety of activities to share information with various groups of learners (not just those with SEND). For example, 7 x brain building workshops at Key Stage 2, 39 x Assemblies on celebrating all brains learning differently at Key Stage 2, Brain Friendly revision assembly at Key Stage 4. The team also runs parent/carers cafes at various locations with a focus on various topics such as Working Memory.

Evidence

Strong evidence shows improved participation and engagement:

- **SEND System Navigator feedback** (84 responses):
 - 88% of cases contain evidence of improved collaboration and coordination.
 - 100% reported improved responsiveness, accessibility, and clearer information.
 - 87% reported feeling empowered with effective signposting.
 - 77% highlighted empathy and emotional support that reduced anxiety and prevented escalation.
- **SENDIASS feedback:**
 - 72% engagement rate (above KPI).
 - 93% said the service was fair, neutral and unbiased.

- 91% reported being “very satisfied”.
- 96% would recommend the service to others.

Feedback from the Cognition and Learning Team sessions are positive,

*“I learned more about how my child’s brain works in one parent cafe than I have in their whole primary school life” **Parent***

*“I had no idea that my child's working memory impacted them in so many ways. The morning routine is so much easier now we've implemented some of the strategies from the parent cafe.” **Parent***

Feedback from **Your Future Kernow** highlights the value of vocational profiling and person-centred guidance, with schools reporting clearer long-term planning and young people describing the process as enjoyable and empowering.

“Thank you so much for your help with getting my son the help and support he needs to complete his apprenticeship and go on to achieve his goals. We had so much to fight with in his life, especially with education. We very much appreciate your help.” – Parent

Next Steps

To further strengthen participation across all levels of planning:

- Expand continuous improvement via the **SEND System Navigator** survey and embed feedback loops to respond quickly to emerging themes.
- Expand post-16 **commissioning focus groups** to ensure young people shape the development of pathways and provision.
- Increase the use of **vocational profiling** as a tool for intentional, person-centred planning within EHCP reviews, supporting preparation for adulthood.
- Strengthen alignment between participation tools (e.g., communication passports, My Views templates) and multi-agency assessments to ensure CYP voice informs all decisions.
- Continue expanding opportunities for CYP and families to engage through community events, workshops, and feedback surveys to support continuous improvement.

Children and young people receive the right help at the right time

Focus

Our focus is to ensure that children and young people (CYP) receive the right support at the earliest opportunity, based on a strong, shared understanding of their needs. This includes developing plans and providing support in a timely way that meets CYP needs, ensuring CYP receive support based on identified needs even while awaiting

formal assessment, coordinating plans across education, health and care so support is joined up and consistent, and regularly reviewing and updating plans as needs and levels of independence change. It also means addressing the wider needs of families and removing barriers to learning and participation. This work responds directly to inspection findings, which highlighted the need for improved quality, timeliness and consistency of Education, Health and Care Plans (EHCPs), and for stronger oversight to ensure that practitioner contributions are accurately reflected and regularly reviewing and updating plans as needs and levels of independence change.

Impact

Various enhancements throughout the system have boosted timeliness, accuracy, and reliability of support. Recent reforms have resulted in noticeable advances in promptly and correctly identifying and assessing needs: **EHC timeliness now shows notable improvement.** From June to July 2025, Cornwall completed 105% more statutory assessments within the 20-week period, rising from 18 to 37 cases. In July, 41% of these assessments were finished within the target timeframe, thanks to improved procedures and strategic staff allocation.

Cornwall's remote location complicates the recruitment and retention of Educational Psychologists, aggravated by the national shortage in the profession. Efforts to enhance six-week timeliness have benefited from hiring locum Educational Psychologists (EP) and increasing hours for permanent EPs. As a result, more delayed EHC needs assessments now contain the necessary EP input for drafting and panel evaluation.

The main challenge persists within the Statutory SEN EHC Assessment Team; even after restructuring to boost staffing levels, clearing the backlog is still slow. Dedicated EHCP officers are focusing on cases that are over 20 weeks overdue and making steady progress, though it will take time before the added EP resources fully affect outcomes.

Recognising the pressure that is placed on school and young people when funding is delayed the **"waiting well"** offer enables schools to access support and resources while assessment processes are ongoing, reducing pressure on settings and helping meet needs earlier.

Quality Assurance process has been reviewed ensuring up to 25% of draft plans annually are quality assessed, improving oversight and identifying training needs, while standardised health templates and stronger clinical input have increased clarity and consistency. The impact of this work is that health advice is now more closely aligned with the SEND Code of Practice, resulting in more accurate and robust plans.

Quality assurance of EHCPs, through multi-agency involvement and internal mechanisms, demonstrates an improvement in the contributions of young people and their families within Section A of EHCPs. This is particularly true of newer EHCPs, when compared to baseline data from EHCPs produced in 2022/23. This is supported by the EHC Needs Assessment process, where Educational Psychologists adopt a consistent approach to capturing information in the earliest stages of assessment. The Statutory SEN team are reassured through this process that the views collected are authentic and are expressed in a way which suits the individual needs of the young person. This then supports the creation of meaningful, good-quality outcomes in Section E.

In addition, mandatory EHCP training for children's services staff has further supported quality as well as the introduction of the MS Power App for EHCP drafting has improved the consistency of Section B and reduced manual workload, allowing caseworkers more time to analyse reports and refine plans. This increased efficiency supports reduced backlogs and will support efforts to meet statutory timelines.

The **Phase Transfer Project** has transformed specialist placement decision-making. Multiagency panels now lead decisions, resulting in fairer, more transparent and consistent outcomes. More than 50 professionals participate

across education, health, social care and the local authority, improving shared understanding of specialist provision and strengthening partnership working.

Evidence

Evidence demonstrates clear improvements across the system:

Real-time Power BI dashboards provide monthly, quarterly and yearly metrics for EHCP quality across education, health and social care. Draft and final plans have been quality assured using the new scoring framework, enabling leaders to track strengths and areas for development.

The Phase Transfer Project has reviewed more than 180 cases across major decision-making events, with survey data showing very strong confidence in the process. -making events, with survey data showing very strong confidence in the process.

- In 2023, clarity of purpose was rated 4.52/5 and overall experience 4.55/5.
- In 2025, more than 90 attendees participated, with increased representation from mainstream schools. The event received a 4.7/5 rating overall, with 100% of attendees agreeing that CYP and family views were clearly included, and professional contributions rated highly in terms of value and impact (4.74/5).
- Participants reported improved understanding of placement evidence requirements, greater transparency in decision-making and strong collaboration across agencies. Making and strong collaboration across agencies. -making and strong collaboration across agencies.
- The approach has increased operational efficiency, releasing over 50 days of senior officer time, embedding early transport planning and reducing both risk and administrative burden.

Next Steps

Next steps include continuing to strengthen Educational Psychology (EP) Service quality assurance systems and ensure the quality assurance of psychological advice at Stage 2 panel reviews. Ongoing CPD for EPs will remain essential to maintain high quality input. Further improvements will be made to integrate health contributions into EHCPs more effectively, for example by monitoring the positive impact of the work of the Designated Clinical Officer (DCO) to improve specificity of health advice. While enhancements to the MS Power App will refine AI instructions, improve overall plan quality and expand use into further EHCP sections.

For phase transfers, the process will be expanded to include full multidisciplinary involvement, ensuring all specialist settings present their core offer and that parental preference and transport considerations are clearly represented. Lessons learned will inform improvements to SharePoint access, data tracking and event organisation to strengthen future delivery.

Using the **EHC Timeliness Predictive Tool** to determine required capacity, address backlogs, and drive improvements in monthly and cumulative 20week performance. This intelligence must then lead to drawing of additional capacity to draft EHC plans, inform KPIs, including completion dates etc.

Children and young people are well prepared for their next steps, and achieve strong outcomes

Focus

The Local Area Partnership is committed to aligning the priorities and aspirations of children and young people (CYP) and their families with the support delivered from early years through to adulthood. This approach underscores the importance of fostering independence at an early stage, implementing coordinated multi-agency planning, and ensuring seamless transitions into education, employment, and community life.

Our objective is to ensure children's and families' needs to inform the support provided, with planning focused on aspirations and long-term outcomes that extend beyond statutory obligations. Children are encouraged to develop independence from an early age, equipping them for education, employment, health, relationships, and active participation in society. Comprehensive assessments and coordinated multi-agency collaboration facilitate successful transitions into adulthood, although enhancing consistency for ages 5–16 remains a priority for continued improvement.

Impact

Early years outcomes remain strong, with 70% achieving a Good Level of Development, above national, and most children with SEND achieving above average outcomes except in social emotional development. Interventions such as Early Talk Boost demonstrate measurable progress, with over half of children improving by at least one tracker banding and one third reaching age expected levels.

Academic results for pupils with SEN support and those with an EHCP at Key Stage 2 have improved year-on-year in combining reading, writing, and math. At Key Stage 4, SEN Support outcomes have risen, and the gap with national figures is closing, but EHCP outcomes have declined and need attention.

Overall attendance for primary and secondary pupils with SEND has improved year-on-year at both SEN Support and EHCP levels (except secondary EHCP). Practice changes include trauma-informed, neurodiversity-aware approaches, enhanced parent engagement, and targeted outreach in schools with high social, emotional and mental health (SEMH) needs. Attendance of children with SEND remains below target; leaders are addressing this by strengthening resource base provisions and mainstream inclusion.

Young people benefit from appropriate support as they prepare for adulthood, with practitioners demonstrating strong understanding of their needs and aspirations. Most young adults experience successful transitions to adult health and social care, supported by timely assessments and person-centred planning.

Participation in the **DfE Supported Internship Program** has expanded opportunities, including Project Search sites with the NHS and Cornwall Council, with plans for further growth in hospitality. Collaboration with employers and the Careers Hub provides SEND students with crucial employer experiences through initiatives like supported work experience. The Youth Engagement Project (YEP) regularly surpasses targets by helping 16–24-year-olds, particularly those with SEND/SEMH needs, access education, employment, or training.

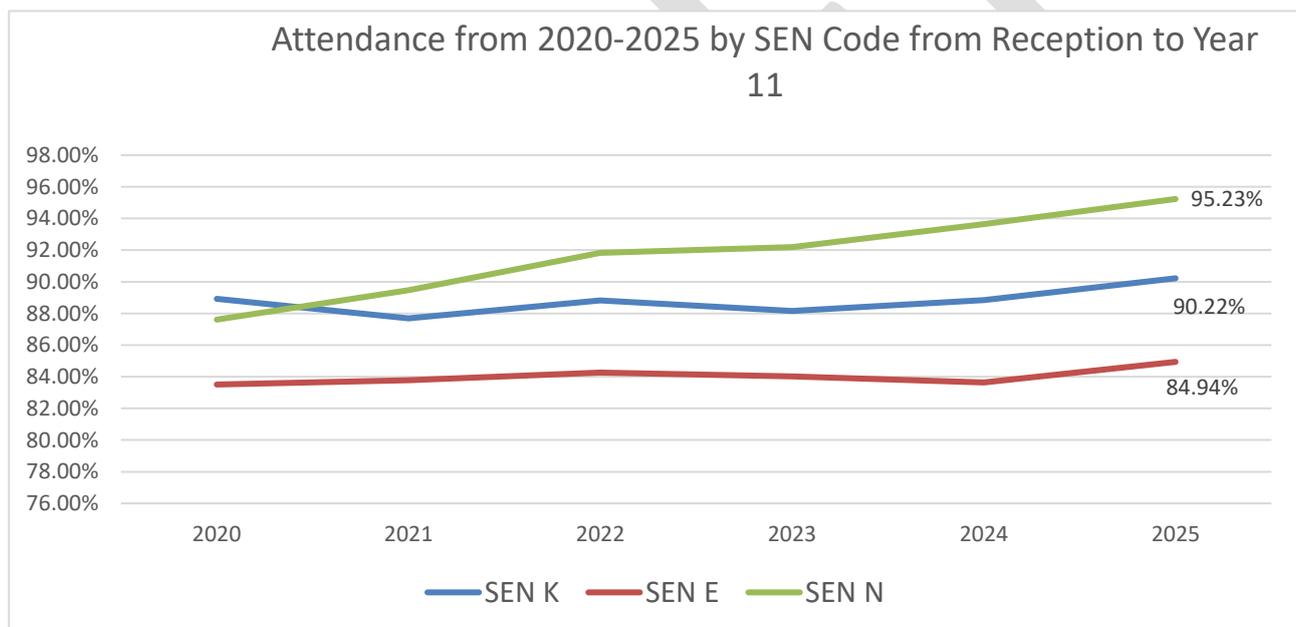
A **multiagency transitions panel** reviews cases jointly across children's and adults' services, reinforcing the need for timely referrals and decisions, and supporting smoother progression into adulthood. Skills for independent living are also developed through work in schools, colleges and short break residential settings.

Evidence

Early years data shows improvements for children with SEND across most developmental areas. Over 900 children have been tracked through Early Talk Boost, with strong evidence of progress.

Across early years, 680 children received support in 2024/25, including enhanced transitions for 342 children at Tier 5, leading to smoother starts and fewer requests for additional support. Parent and setting feedback are consistently positive. Work to strengthen inclusion in reception classes has also resulted in quicker settling and reduced additional needs requests.

Year-on-year improvements in overall attendance and at least a 3% fall in persistent absence across SEND cohorts; practice examples include Video Interaction Guidance (VIG) to capture the CYP perspective, and targeted SEMH outreach.



Teams identify and prioritise children and young people with SEND, offering tailored support and challenging schools to improve outcomes. In 2024/25, there were over 500 referrals, direct assistance was given to 130 schools across 17 MATs, and outreach reached 225 CYP. Parents benefit from faster access to support, avoiding repeated information sharing. The average service response time is 24 hours. Over the academic year, more than 1,100 enquiries were received—81% from parents—with over 90% receiving direct guidance.

The percentage of **young people aged 16 and 17 engaging in education, employment and training is increasing in Cornwall**. This is **positive**. Projects such as YEP² build on **partnerships** across multiple organisations including public and voluntary sector including community interest companies and employers to diversify the post 16 offer.

Employers have been key to this growth and have shown a commitment through their work on the **Diversity to Thrive Group** and by hosting **Supported Internships** to those young people who need extra help to enter the labour force.

Next Steps

Sustaining learning from the neurodiversity inclusion project will ensure best practice continues to spread across settings. Further early years priorities include recruiting to Video Interaction Guidance (VIG) roles and piloting group for 2–4-year-olds. Raising Good Level of Development outcomes to 78% through the Best Start in Life action plan.

Improving early identification through Section 23 processes and 12-week action plans; strengthening early years team support through mentoring and coaching; and enhancing speech, language and communication outcomes through expanded interventions and partnership pathways.

Work with primary and secondary schools, education officers, parents and carers will focus on improving experiences and outcomes following strong early years foundations.

Next step to continue to develop attendance include improving the way impact is measured by strengthening collaboration with communication and data leads and continuing to improve attendance for pupils with SEND so that outcomes align with or exceed national figures. Targets include raising attendance for pupils with EHCPs and SEN Support to match national benchmarks and aspirational levels. Engagement with students, parents and schools will be increased through a strengthened parental engagement framework.

The vocational profile pilot across five mainstream and special school settings will continue, with training for professionals and careers teams to further strengthen preparation for adulthood. Implement the "at-risk of NEET indicator tool" across all schools to enable proactive support from Year 9.

Use findings from the YEP project evaluation and HDRC research project (which employs peer researchers with NEET experience) to evaluate and improve support for transitions into education or employment.

Children and young people are valued, visible and included in their communities

Area of Focus

The Local Area Partnership aims to ensure that children and young people (CYP) with special educational needs and/or disabilities (SEND) are visible, included, and able to participate meaningfully in their communities. CYP and their families need clear information on available opportunities and accessible pathways to participate. The area recognises that rising elective home education (EHE), increasing complexity of need and inconsistent experiences of inclusion can reduce CYP's sense of belonging. Strengthening community participation, improving early support and ensuring inclusive pathways remain priorities.

Impact

The **Family Information Service (FIS)** has been rated one of the best in the Country and provides access to the Local The range and depth of universal and targeted early help services for children and families have progressed with more accessible ways of communicating for example the podcasts offering parenting

information, hybrid, face to face and self-directed learning with a strong evidence base. This provides a robust platform upon which Early Support services can be built.

Cornwall's SEND Local Offer provides families and professionals with clear, accessible information across education, health, social care and preparation for adulthood. Improvements have strengthened transparency and co-production through:

- Co-design with parents, carers and stakeholders
- Enhanced navigation and regular updates informed by user feedback
- Integrated initiatives such as Parent Champion programmes and SEND Access4All Discount Cards

Short breaks have expanded significantly, with increased family-based short break carers (37 children currently supported) and the number of carers more than doubling over two years. This enhances choice, matching, and inclusivity. Joint commissioning of the Independent Visitor Service across both local authority and health funded children's homes strengthens quality, safeguards CYP experience and ensures compliance with statutory requirements.

Reduction in Children Missing Education, the number of children missing education (CME), particularly those with a record of need but without EHCPs, has significantly decreased from over 200 to 11, attributing this improvement to the effectiveness of their triage process. The triage process helps to assess proposed education, home environment, safeguarding risk, social care involvement, and school efforts to support the child. For children with EHCPs, we partner with the Statutory SEN Extra Care team to conduct interim EHCP reviews. Families are directed to SEND Navigators if EHE is unsuitable and a school return is needed.

The team is increasing the visibility of children and families by sharing information, advice, and resources with community groups. Efforts are underway to encourage EHE families to use family hubs for greater comfort and support, but measurable outcomes are not yet available as these initiatives are still in early phases. Working closely with Family Hub Coordinators, who oversee these efforts with an emphasis on collaboration to prevent duplication and enhance value.

Community events—such as the Eden Project multi-agency gathering and local events like the Bude Community Event—connect families with SEND services, post-16 providers, employment pathways, transport and wider support.

Cornwall has **broadened employment focused opportunities** for young people with SEND. Supported internships, including those hosted by Cornwall Council, provide real workplace exposure and skill development. Supported Work Experience (WEX). The **Diversity to Thrive** network—bringing together employers and education providers—promotes inclusive employment practice. Its youth led *Open Door Magazine* gives employers insight into reducing barriers and provides meaningful work experience to participants.

Evidence:

Local Offer platform consistently rated as comprehensive and user-friendly-friendly. Family Information Service (FIS) awarded **NAFIS Best Directory (2024)** and **Families First Quality Award**

There are a wider range of Family Based Short Break Carers across the county which means a more inclusive service, better matching with children. Direct Payments support 379 CYP (2024/25), with strong qualitative evidence of life-changing impact for families, enabling resilience, stability, and reduced risk of family breakdown.

"We would struggle massively without the funding. It's a total gamechanger. PA is a godsend and she's one of my best friends. The kids know her and trust her. If it hadn't been for the support from PA, my husband and I were seriously thinking about putting YP into full-time foster care because as a family, we couldn't cope with the way she was affecting everyone in the house so badly. PA has basically saved us". **Parent in our direct payment annual report**

More details and comments are in the direct payments annual report:

<https://www.cornwall.gov.uk/media/Ovldmu24/direct-payments-annual-report-2024-2025.pdf>

Supported internships, supported work experience and travel training offer CYP meaningful preparation for adulthood, building independence, resilience and confidence. Employers report improvements in problem-solving and workplace readiness.

Authentic voice of young people and professional regards supported employment initiatives show the impact of this work:

"I feel more independent and confident. New tasks don't overwhelm me, and I've built good connections." , "I enjoy working with the team and know I'm improving, though I'm aiming to get faster.", "I've received positive feedback and like my role. I'm focusing on speaking up more and have already made progress." – **Intern**

"Students learned to read timetables, plan trips, and buy affordable tickets for both outbound and return journeys. This demonstrates the value of teaching life skills alongside academics to build confidence and character. This program has increased resilience, independence, aspirations, and motivation for future success." – **Teacher**

Next steps

Refresh and update Local Offer promotional materials to align with the revised Inclusion & SEND Cornwall Council website and animations

Deliver SEND marketplace events and SEND café sessions to help families understand the full range of support available

Support young people through the EHE **Shaping Futures** pilot to access careers guidance, employer engagement and opportunities that aim to reduce the risk of becoming NEET

Grow Family Based Short Breaks by increasing capacity from 25 to 50 carers, improving matching and widening geographic reach. Strengthen support for carers through co-produced support groups offering coaching, mentoring and shared learning.

The SEND Employment Forum is a proactive consortium of principal stakeholders dedicated to advancing employment opportunities for young people with SEND. The group collaborates with prominent employers to develop inclusive pathways for employment and work experience.

How the local area partners work together to plan, evaluate and develop the SEND system.

Leaders are ambitious for children and young people with SEND

Focus

Leaders in Cornwall have set a clear and ambitious strategic direction for improving outcomes for children and young people with SEND articulated in the SEND strategy. They promote high expectations across services and ensure that responsibilities are understood and delegated in line with statutory duties. Decision-making structures are designed to enable swift action where improvement is required. While strategic intent is strong, leaders recognise the need to strengthen practitioner understanding of accountability and to broaden the information they use when evaluating effectiveness.

- A shared ambition for high-quality support and improved outcomes for all CYP with SEND. Quality support and improved outcomes for all CYP with SEND.
- Clear understanding of statutory responsibilities and individual accountability within the area strategy.
- Delegated responsibilities with appropriate oversight to ensure delivery.
- Decision-making processes that enable rapid agreement on necessary service improvements. Making processes that enable rapid agreement on necessary service improvements.
- A culture of continuous challenge and improvement among leaders.

Impact

Leadership arrangements have strengthened oversight, governance and escalation processes, enabling issues to be identified earlier and acted upon more consistently. However, leaders acknowledge that clearer communication of roles, responsibilities and expectations is still needed across education, health and social care.

The SEND Board is jointly chaired by senior leaders in the Council and the ICB, bringing together leaders across education, health and social care to provide shared oversight and coordinated decision-making.

SEND Clinical Reference Group has been established. The chair rotates between the ICB and CFT, bringing together all clinical leads and managers across community services. This structure supports effective SEND improvement planning, inspection preparation, and addresses challenges in delivering the SEND agenda. There is strong participation from all services and partners, which has greatly increased provider involvement in the SEND agenda.

A new **Section 19 policy** has been developed to provide a structured approach for children out of school due to exclusion or other reasons. The Vulnerable Children's Panel, with multi-agency representation, reviews cases to determine appropriate interim and long-term provision, including online and face-to-face options.

Partnership Meetings and Reintegration: Area Inclusion Partnership meetings have been reinstated to facilitate collaboration between schools and alternative providers, focusing on supporting pupils at risk of exclusion and planning reintegration into mainstream settings.

The creation of the Cornwall Association of Chief Executives (CACE) SEND MAT Leads Group has significantly improved operational communication, shared problem-solving and understanding of roles, responsibilities and available support. This directly addresses deficits highlighted in the 2023 Area SEND Inspection. The group provides a safe space for operational trouble shooting and sharing good practice.

Leaders have strengthened the use of data and intelligence to understand patterns of need across Cornwall. Enhanced reporting, improved data flows, and multiagency dashboards mean that issues (e.g., waiting times, pathway variation, quality concerns) can now be identified earlier and escalated appropriately.

Evidence

Leaders demonstrate the ability to respond proactively to emerging risks. For example, improved data quality on Speech and Language Therapy (SaLT) and attention deficit hyperactivity disorder (ADHD) waiting times prompted escalation to the SEND Board and subsequent investment.

Similarly, identification of knowledge gaps relating to Adverse Childhood Experiences (ACEs) and access issues for the ND waiting list led to cross agency changes in data sharing arrangements. Agency changes in data sharing arrangements.

Use of the neurodevelopmental profiling tool prompted pathway changes when data showed increased demand on schools, leading to improved signposting and clearer guidance on tool use.

Digital implementation of the Dynamic Support Register, escalated to the SEND Board with action taken to secure social care and education representation.

Analysis of CACE SEND meetings shows significant improvements in communication and partnership working across education, health and care. Survey results (30 September 2025):

- **100%** agreed the meetings improved understanding of SEND system activity and priorities (score: **4.8/5**).
- **100%** agreed their knowledge of challenges, priorities and opportunities had increased locally (**4.8/5**) and nationally (**4.6/5**).
- **90%** agreed the meetings helped align strategic priorities and reduce duplication (**4.2/5**).

Authentic leader feedback highlights improved ability to support SENDCos and clearer understanding of system roles.

Next Steps

Leaders have set and implemented clear priorities to strengthen leadership presence, evaluation and

operational consistency across the SEND system.

Expand CACE membership to include maintained school leaders (January 2026). Embed annual CACE SEND surveys to monitor system collaboration and track improvements.

The SEND Board is strengthening its governance by seeking an independent scrutineer through the LGA to enhance transparency and external challenges. Referral routes are clear, with the SEND Board able to escalate issues to the Start Well Board and ICB governance structures for system-level action.

The SEND governance structure is strengthened by the Committee in Common, the formal joint decision-making forum between the Local Authority and the Integrated Care Board. Operating alongside the SEND Board's oversight and escalation routes, the Committee in Common ensures that education and health priorities are aligned, shared risks are addressed collectively, and partnership decisions are taken with joint accountability. Its role is to provide a single place where both organisations can agree system-wide actions—particularly on sufficiency, commissioning, and improvement priorities—so that governance is coherent and consistent across the whole SEND system.

Leaders actively engage and work with children, young people and families

Focus

Leaders prioritise meaningful engagement with children and young people (CYP) and their families to ensure their needs, experiences and aspirations directly inform service design, decision-making and improvement activity. The Local Area Partnership seeks to embed consistent and genuine coproduction across all levels of the system so that CYP and parents/carers act as equal partners in shaping priorities, understanding why change occurs, and influencing solutions. Leaders also recognise the need to broaden participation, strengthen feedback loops, and ensure that underrepresented groups are fully included.

Impact

Children and Young people have increasingly visible roles in shaping professional understanding and decision-making. Children and Young people contributed to the **development of the Inclusion Charter**, working alongside parents/carers (National Network of Parent Carer Forum), Children/Young People (SEND Children and Young People Self-Advocacy Group), professionals and partner agencies across the Southwest. Their lived experience insights, including through surveys such as Right On and SENDit Forward, directly inform strategic priorities.

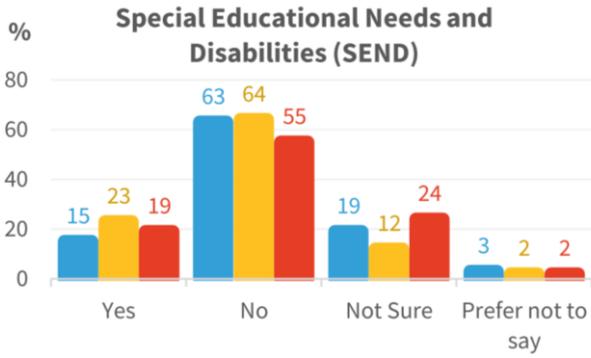
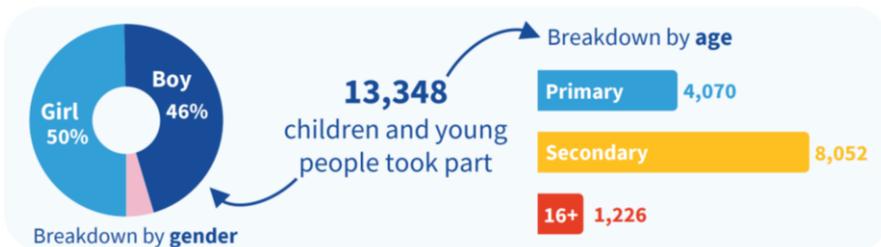
Cornwall has a strong youth Leadership and democratic participation, with a strong representation for young people with SEND. The Cornwall Youth Council, comprising elected members, Members of Youth Parliament, associate members, peer mentors and a communications team, ensures CYP's views are heard by and influence decisionmakers. They produced [Cornwall Youth Council Manifesto 2024 - 2026](#),

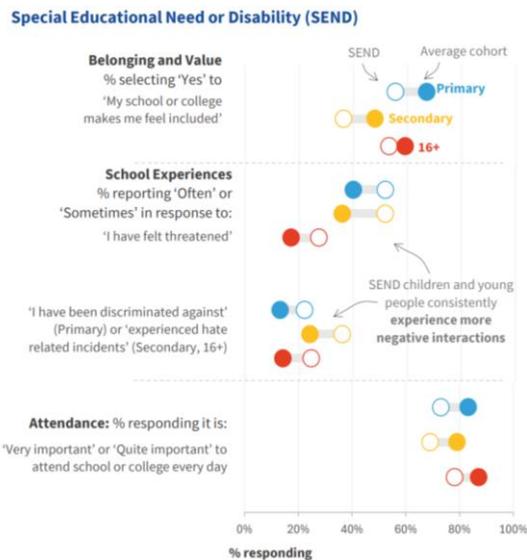
collaborated on the Director of Public Health report and supported engagement activities across Cornwall and the Isles of Scilly.

Several members of Cornwall Youth Council have worked with teams and organisations across Cornwall to embed their voices, values and opinions. These have been welcomed, fostered and encouraged by multiple areas. Children and young people from the Youth Council helped coordinate the involvement of children and young people in communities from across Cornwall and the Isles of Scilly in the [Director of Public Health report](#) in summer 2025. For further information about how Cornwall Youth Council supports children and young people to be valued, visible and included in their communities, please visit [Cornwall Youth Council | Let's Talk Cornwall](#).

Children and Young people's insights are systematically gathered through the **Right On Survey, a largescale biennial consultation** shaped in partnership with CYP and multiple local authority teams. Survey data shows that CYP who identify as having SEND report lower levels of belonging in school compared to peers, providing leaders with essential intelligence to address inclusion. This survey forms part of wider engagement and participation work to ensure we relate to the children and young people of Cornwall. Below are extracts from the 2025 Right On Survey School Life report.

Overview





A peer research project has been launched in collaboration with HDRC, Plymouth University, and several councils—including Plymouth, Medway, and Lambeth. The aim of this is to understand what works for young people to gain employment. Peer researchers with lived NEET experience, recruited through our Youth Engagement NEET program, receive training to collect data. Additionally, we've partnered with the Institute for the Future of Work (IFOW), again utilizing peer researchers, to identify the types of career support young people require. Both initiatives feature participants from diverse backgrounds, including individuals with SEND.

Leaders actively incorporate CYP and family voice into strategic oversight through regular updates to the SEND Board and through the Young Person and Family Engagement and Participation Network, which connects professionals across Cornwall to strengthen practice, share learning and improve engagement.

Evidence

Youth engagement is strong. *Send IT Forward*, a youth voice platform, enables young people with SEND to share their experiences and influence decision-making. Through webinars, ambassador activity and creative projects—including the film **"My Best Day in Education"**—young people contribute directly to shaping understanding, priorities and service improvement.

Engagement with children, young people and families has strengthened significantly, with **coproduction becoming a visible and growing part of service development.** CYP now play an active role in shaping discussions, influencing decisions and sharing lived experience at strategic boards.

For example, young person with lived experience codesigned and delivered training on barriers to attendance at two Mult Academy Trusts and to the Cornwall Association of Chief Executive SEND MAT leads. Their contribution has influenced local practice and is being prepared for escalation to the Department of Education.

Children and Young people's involvement in Phase Transfer events from 2023–2025, including direct articulation of aspirations and contributions to assessment profiles.

Youth voice embedded in post-16 evaluation through the Youth Engagement Project (YEP) ensures CYP shape improvements to transition pathways.

Next Steps

Leaders will continue strengthening co-production and CYP participation, ensuring that feedback is consistently used to shape decisions and is visible in all services. They will embed CYP voice more systematically across reporting and widen opportunities for parents and carers to help shape service improvement.

Enhance the Parent Carer Forum's capacity to lead and co-produce by connecting them with wider South West PCF expertise and development opportunities, supporting their central role in shaping services, priorities and decision-making

Invest in training, infrastructure and governance so the PCF can act as an equal partner with a consistent seat at strategic boards.

Expanding Parent/Carer Cafés (CST) and increasing opportunities for parents to contribute.

Deepen reach into underrepresented communities, particularly those with low social mobility: Improve engagement with families from rural, disadvantaged and minoritised communities so their experiences inform commissioning and practice.

Close the feedback loop: Systematically show families and schools how their feedback has changed practice, and publish "you said, we did" outcomes at local and area level.

Leaders have an accurate, shared understanding of the needs of children and young people in their local area

Focus

Leaders are committed to developing and maintaining a robust, shared understanding of the needs, experiences and outcomes of children and young people (CYP) with special educational needs and/or disabilities (SEND) across Cornwall and the Isles of Scilly. This includes gathering high-quality information across education, health and social care; monitoring population trends; recognising inequalities; and ensuring that intelligence is shared consistently to inform joint working, commissioning and strategic decision-making. While progress has been made, leaders recognise that evaluation is not yet consistent across all services and that information sharing needs further strengthening to ensure full partnership oversight.

The **SEND Joint Strategic Needs Assessment (2024)** provides a robust and comprehensive evidence base demonstrating that leaders across Cornwall and the Isles of Scilly share an accurate and well aligned understanding of the needs of children and young people with SEND. Coproduced across education, health, social care and strategic partners, the JSNA confirms that leaders recognise both current and future pressures,

including. The recommendations from the report have led to developments and improvements across the system. [Cornwall and Isles of Scilly Special Educational Needs and Disabilities Needs Assessment](#)

Leaders commission services and provision to meet the needs and aspirations of children and young people, including commissioning arrangements for children and young people in alternative provision

Focus

Leaders are committed to shaping services throughout Cornwall to meet the needs and aspirations of children and young people (CYP) with special educational needs and/or disabilities (SEND). The [Cornwall Joint SEND Commissioning Strategy 2025-30](#) outlines local priorities and details how collaboration will achieve Cornwall's vision for its young people with special educational needs and disabilities.

Commissioning decisions should be based on evidence, fairness, efficiency, and statutory obligations. This includes ensuring prompt identification of needs, providing full-time suitable education for CYP who require alternative provision, and tackling sufficiency challenges across specialist, targeted, and universal services. Leaders understand that CYP with SEND may face greater risks of harm, so this must be carefully addressed in service design and evaluation. There is also recognition of continuing issues such as sufficiency, waiting times, and differences in the experiences of CYP—particularly within alternative provision and education outside school (EOTAS).

Impact

Commissioning activity has strengthened significantly, particularly in response to system pressures and rising demand. Leaders have redesigned several therapy pathways, invested in new provisions across Cornwall and expanded specialist capacity to meet need more effectively. Joint commissioning activity has supported reductions in waiting times for key services including CAMHS, early mental health support and occupational therapy. Specialist expertise has been strengthened across SEMH, sensory integration and inclusion, improving the quality of advice and support available to schools.

Data-Driven Gap Analysis: Annual analysis of SEN data at postcode level identifies where children with EHC plans live and what their needs are, enabling the council to map gaps in provision and prioritise areas for new specialist placements.

Geomapping and profiling children and young people with SEND, alongside mapping education provision, is an initial step in developing an Education Sufficiency Strategy and Market Position Statement.

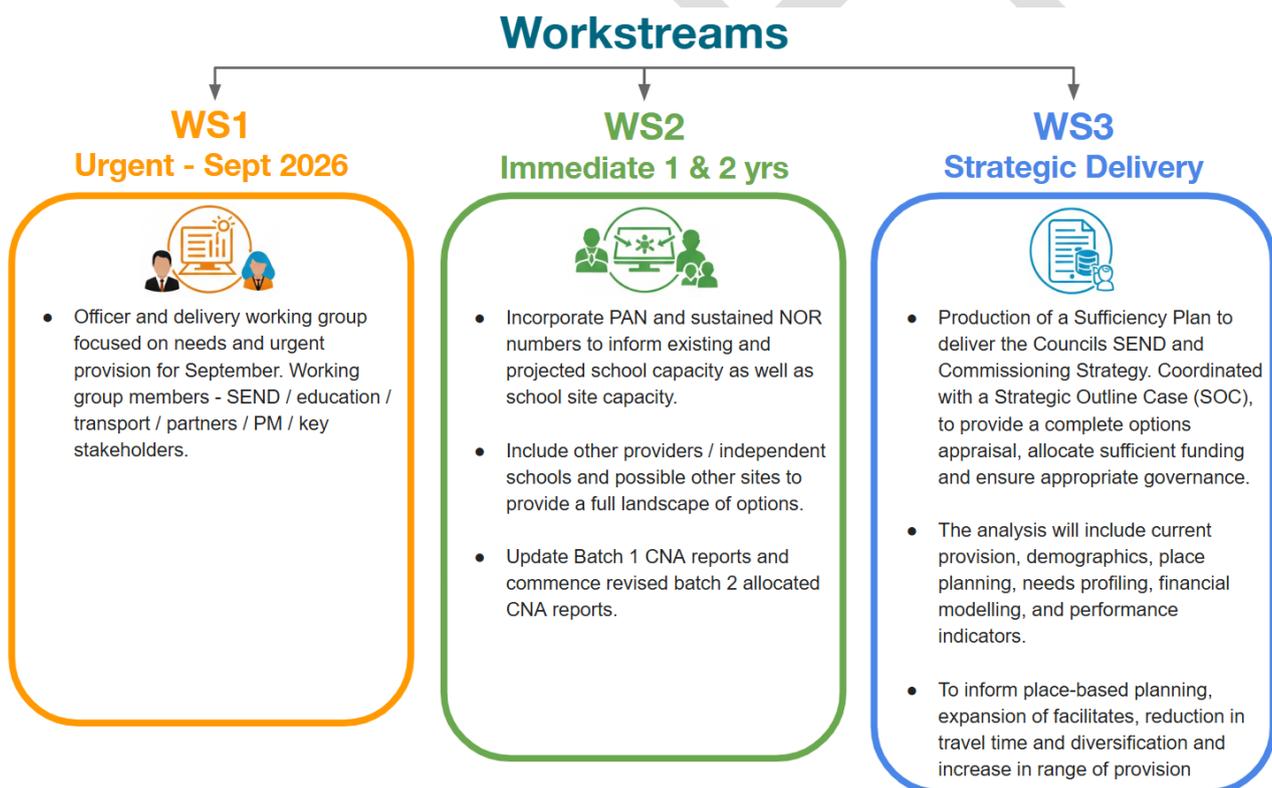
Reliance on Independent Specialist Provision: Due to insufficient local specialist places, around 600 children are educated in independent specialist settings, often at significant cost and sometimes far from home. Efforts are ongoing to reduce this reliance by expanding local provision.

Commissioning have supported developing sufficiency strategies. Notably new ARBs and special school developments have increased capacity in areas of greatest need, and improvements in short breaks and residential provision have enhanced support for children with the most complex needs.

Commissioning of new specialist provisions including:

- ARB at **Redruth School**
- ARB at **Pensans Primary**
- Three satellite special schools in Penzance (Roscadgill), Cury (SEMH) Primary and St Columb (Karder).
- Expansion of Pencalenick and Double trees Special Schools.

SEND Provision Sufficiency Planning - Next Steps



EOTAS provision and Quality Assurance of Providers: A list of over 100 approved alternative provision providers is maintained, with quality standards and monitoring officers ensuring safe and effective provision for children placed outside mainstream schools.

- Delivery of a commercially tendered SIAG service providing inclusion focused support and guidance. Delivered by Schools Partnership Trust focused support and guidance.
- Increased access to mobility and independent living skills training for CYP with visual impairment.

- High-quality short break services commissioned via the voluntary sector. Quality short break services commissioned via the voluntary sector.-quality short break services commissioned via the voluntary sector.
- Significant strengthening of in-house residential capacity, including crisis, recovery and outreach provision at Cardinham Barns.
- Development of a post 16 inclusive pathway, provider, young people stakeholder sessions held.

Evidence

A range of evidence demonstrates improved commissioning decisions, increased sufficiency and stronger multi-agency planning:

- Quarterly contract reviews showing CYP voice, delivery volumes and impact measures.
- Contract monitoring of commissioned services such as GOT Group, Aspires, SPACE play scheme and Youth Groups for SEND.
- Evidence of improved pathway redesign based on “what works in SEND,” including SIAG and sensory integration offers.

Next Steps

Leaders will continue to strengthen the commissioning of services to ensure sufficiency, quality and sustainability, particularly given pressures on specialist places and growing demand. The next phase of work focuses on expanding capacity, delivering safe and well-structured clinical support, and ensuring that provision is located where it is needed most.

- Developing sufficient education provision across Cornwall, with a particular focus on Mainstream+, ARBs and Special Schools.
- Broaden joint commissioning beyond statutory services: Extend joint commissioning to early help, community and voluntary sector offers that prevent escalation and reduce reliance on high-cost placements.
- Meeting clinical needs in special schools through an agreed joint delivery model for complex health and clinical support.
- Continuing the Guide Dogs contract with enhanced funding to improve mobility and life skills access for CYP with VI. Skills access for CYP with VI.-skills access for CYP with VI.
- Ensuring future commissioning responds to sufficiency gaps identified through geo-mapping and strategic needs analysis.
- Strengthening the EOTAS provider framework and further developing the attendance app to improve monitoring and support.
- Enhance joint commissioning reach into early help, voluntary sector offers and complex clinical support in special schools

Leaders evaluate services and make improvements

Focus

Leaders are committed to ensuring that services for children and young people with SEND are not only delivered but are genuinely improving outcomes. They aim to evaluate services jointly, ensure sufficiency across all types of provision, and use comprehensive information—data, feedback and lived experience—to inform continuous improvement. Leaders have established processes for providers to review and improve their offer, and maintain oversight of alternative provision to ensure safety, suitability and impact. However, they recognise evaluation is not yet robust or consistent in all areas, particularly where there are rising exclusions, variable alternative provision experiences, or challenges with data integration such as the Dynamic Support Register.

- Evaluating whether services improve outcomes, not just whether services are delivered.
- Monitoring sufficiency of provision to meet CYP aspirations and needs.
- Using data, feedback and lived experience to inform service development.
- Ensuring providers routinely evaluate their offer and use findings to improve.
- Maintaining strong oversight of alternative provision, including unregistered providers.
- Strengthening the range and quality of intelligence that informs decision-making.

Impact

Leaders have significantly improved their ability to understand and evaluate service performance through enhanced reporting systems, new data tools and stronger governance. Near real-time dashboards allow earlier identification of risks in EHCP timeliness, exclusions, attendance and data quality. Cross service datasets enable more effective multiagency work, helping leaders scrutinise key issues such as exclusions and attendance. Time dashboards allow earlier identification of risks in EHCP timeliness, exclusions, attendance and data quality.

Information governance improvements have made data sharing safer and more reliable, and major systems migration—such as to the new Synergy case management system—has strengthened the consistency and transparency of reporting. Health partners have improved their data quality, demand and capacity reporting, enabling greater transparency and driving investment into pathways such as neurodevelopmental and SaLT.

- Extensive reporting across the full SEND process, with the ability to isolate and analyse data quality issues early.
- Clear visibility of EHCP timeliness through granular, near real-time measures.
- Reduced fragmentation of data through synchronised multi-agency dashboards for attendance, exclusions and CYP records.
- New information governance systems enabling secure sharing of SEND data with health providers and external partners.
- Successful migration to Synergy case management with new reporting developed within four weeks.
- Improved health data quality—including demand, capacity, flow and waiting time metrics—enabling targeted investment and stabilisation of waiting lists.
- Improved use of health “friends and family” data to understand child/family experience.

Sufficiency mapping System data showing increased demand patterns for SEND placements and EHE and rising spend on specialist provision. Geo-mapping and profiling of CYP with SEND (Projecting to 2028/29), used to inform the Education Sufficiency Strategy and Market Position Statement.

Data-Driven Gap Analysis: Annual analysis of SEN data at postcode level identifies where children with EHC plans live and what their needs are, enabling the council to map gaps in provision and prioritise areas for new specialist placements.

Early support- youth transformation changes, working with partners to implement these reforms at pace to establish a Family Help system in Cornwall, and to strengthen our Early Support offer. We are confident that these changes will improve children and families' experiences and outcomes. The changes include:

From January 2026, we have brought together all practitioners and managers previously working in our early help locality teams, and our teams working with Children in Need, into 12 new multidisciplinary Family Help Teams across Cornwall. These include strengthened management arrangements, and bring together Social Workers, Family Workers, Youth Workers, Functional Family Therapist, and Clinical Psychologists to assess children's needs, deliver relevant evidence-based interventions, and co-ordinate multidisciplinary plans supporting families to make positive changes.

All practitioners in the Family Help teams now act as lead practitioners for individual children, enabling us to match each child and family's needs to the lead practitioner whose expertise, experience, and direct work skills are the best fit for the child. This empowers and recognises the significant expertise and contribution of our amazing staff from different professional disciplines.

We have refreshed and further improved our Family Help Learning Offer providing access to a rich range of training in direct work skills and evidence-based interventions, to increase the confidence and capabilities of practitioners to deliver Family Help to the high standards we expect.

Early Support includes community youth provision. Following our successful bid to become a national pilot area for the National Youth Transformation Pilot programme, and confirmation of funding from the Department of Culture Media and Sport in September 2025, we are working with the voluntary and community sector to improve community youth provision across Cornwall; further strengthen workforce development for Youth Workers; and developing a Digital Youth Work offer.

Evidence

A broad evidence base demonstrates the increasing sophistication and effectiveness of leaders' evaluation systems:

- Multiple Power BI dashboards providing near real-time access to SEND workflow, case management and service performance. Time access to SEND workflow, case management and service performance.-time access to SEND workflow, case management and service performance.
- Training for all SEND staff in using Power BI, improving consistency and data literacy.
- Reduction in data quality issues across agencies as shown through QA activity.
- More effective reporting to the SEND Board, including trend analysis and service specific deep dives. Specific deep dives.-specific deep dives.
- Updated privacy notices demonstrating strengthened governance for data sharing.
- Health providers using enhanced Power BI dashboards and experience-based data to guide service improvement. Based data to guide service improvement.-based data to guide service improvement.

Next Steps

Leaders recognise that evaluation must continue to strengthen, with sustained focus on analysing impact, integrating datasets and refining governance arrangements. Future work will enhance analytical capability, reduce duplication and ensure that services are continuously refined based on clear evidence.

- Strengthening evaluation and analysis processes across the partnership to ensure leaders have a comprehensive view of service impact.
- Developing clearer, systemwide information sharing agreements to reduce duplicated activity and improve support coordination
- Improving health system functionality to track statutory SEND data, including EHCNA compliance.
- Embedding consistent evaluation of alternative provision impact, including outcomes for CYP with escalating needs or at risk of hospital admission.
- Integrating the Dynamic Support Register fully into governance and accountability structures.

Leaders create an environment in which effective practice and multi-agency working can flourish

Focus

Leaders are committed to creating the conditions in which practitioners across education, health and social care can work together effectively, share information promptly and focus on improving outcomes for children and young people with SEND. They aim to ensure that practitioners have the skills, knowledge and confidence needed to understand CYP's aspirations and needs, reduce risk of harm, and promote inclusive practice. Leaders also work to ensure that systems are in place to support joint problem-solving, identify risks quickly, and encourage creative solutions when existing approaches are not sufficient. Significant progress has been made, and leaders recognise that staff need to be consistently clear about their accountabilities and understanding of local priorities and available support.

Improve consistency of inclusive practice across all schools: Drive implementation of the Inclusion Charter and neighborhood peers workstream so inclusive culture, pedagogy, behaviour and curriculum are consistently strong in every school and linked to school improvement.

Develop a shared understanding of Ordinarily Available Provision (OAP): Through the OAP workstream, define and embed a clear, Duchy wide expectation of what all schools should provide without additional funding.

- Ensuring practitioners understand their roles and responsibilities clearly.
- Strengthening multiagency information sharing systems to support coordinated action.-agency information-sharing systems to support coordinated action.
- Equipping practitioners with the skills to understand CYP's needs and deliver inclusive practice.
- Enabling joint working so teams can identify and respond to risks effectively.
- Reducing harm by ensuring staff understand the vulnerabilities of CYP with SEND.
- Addressing workforce knowledge gaps and communication challenges across the system.

Impact

Leaders have invested significantly in workforce development, multi-agency training, and structural improvements that support better collaboration and stronger system practice.

SENDSS, workforce development and specialist practice

- SENDSS has expanded training courses for teachers, SENCOs and early career staff, embedding consistent expectations for support for children and young people with SEND across the system.
- Close working relationships with ophthalmology, audiology and Guide Dogs teams have strengthened accurate provision planning and improved mobility/independent living outcomes for CYP with vision impairment and those with hearing loss.
- New SEMH training programmes, sensory processing audits and training are strengthening practitioner skills, resilience and wellbeing.
- Increased SENDSS capacity through new specialist advisors/professionals (SEMH, Cognition & Learning, OT, AAC, CST), enabling improved triage and rapid response.
- EPS workforce initiatives, including grow-our-own pathways and Visibility of VIG, have strengthened recruitment and raised Cornwall's national profile. Our own pathways and Visibility of VIG, have strengthened recruitment and raised Cornwall's national profile.
- VIG, have strengthened recruitment and raised Cornwall's national profile.-our-own pathways and Visibility of VIG, have strengthened recruitment and raised Cornwall's national profile.

Multi-agency collaboration

- CACE SEND meetings established in 2023 have created a consistent space for LA SEND, MAT SEND and Health & Social Care leaders to share key information and collaborate.
- **Multiagency training, including Joint training for education & social care colleagues** Co-delivered sessions facilitated by SENDSS and Social Care. and multiagency training for EHNA, Graduated response and Annual reviews

System strengthening

- Parent/carer cafés and creative system support approaches emerging from increased workforce capacity. Support approaches emerging from increased workforce capacity.-support approaches emerging from increased workforce capacity.
- Inclusion & SEND Webinar for all SEND and inclusion staff, strong attendance and aims to share update across the system and broaden the systems understand of what teams within the service deliver.
- Strengthened system understanding of the Graduated Response through revised web content, animations and new training modules.
- SEND employment forum (multi-agency) progressing priorities around inclusion and preparation for adulthood.
- Strengthened workforce training through SENDSS (ECT training, SENCO induction, SCITT involvement).
- Improved clinical information sharing with ophthalmology, audiology and habilitation teams.

Evidence

A wide range of evidence demonstrates the strengthening of multiagency practice, workforce development and collaborative problem-solving. Agency practice, workforce development and collaborative problem-solving-agency practice, workforce development and collaborative problem-solving

Joint training for education & social care colleague's feedback:

- Relevance: 9.6/10
- Practice impact: 9.5/10
- Knowledge increased from 5.7 to 8.8
- Skills increased from 5.7 to 8.5
- Confidence increased from 5.3 to 8.5

Multi-disciplinary practitioner training feedback:

- 98% would recommend the training.
- Impact scores:
 - Practice impact: 9.4/10
 - Relevance: 9.6/10
 - Knowledge increased from 6 to 8.8
 - Skills increased from 5.8 to 8.4
 - Confidence increased from 5.4 to 8.6

CACE SEND MAT Leads meetings

- September 2025 - survey shared with CACE SEND MAT leads attendees: via. Email, shared at meeting on 30th September 2025.
- The meetings provide me with information which helps me understand the roles and responsibilities of my own role and that of others across the service - average score of 4.6.
- Since the introduction of CACE SEND meetings, I have observed improvements in the experiences of children and young people with SEND - average score of 3.8

Inclusion & SEND Webinar

- The webinars provide me with information which helps me understand the roles and responsibilities of my own role and that of others across the service – average score 4.63
- The information and resources shared has enabled improvements in the support and provision and the outcomes and experiences of children and young people with SEND – average score 3.98

Fortnightly SENCO Newsletter

- There has been a dramatic increase in sign up as a SENCO and headteacher on the Schools Platform. In January 2024, 377 recipients received the fortnightly communication. By April 2024, 706 recipients received the communication. The open rate is approximately 50% with a click rate of over 10%.
- As of 15/10/2025 over 806 recipients receive the fortnightly newsletter., there have been 35 issues to date, with an overall average of 45% open rate and a click rate of 9%.
- Survey for SENCO's going out this term & includes questions about the newsletter.

Next Steps

Leaders will continue strengthening the multiagency environment by expanding professional development, embedding consistent systems and scaling up approaches that support inclusive practice and staff wellbeing. A priority will be consolidating neuro-affirming practice, improving the quality of EHCPs, building succession pathways and widening practitioner access to specialist training and support.

- Continuing AIST leadership of ND Profiling Tool rollout, rewriting content and developing additional training materials.

- Developing a neuro-affirming social curriculum for schools/settings, including a planned 2026 conference. Affirming social curriculum for schools/settings, including a planned 2026 conference.-affirming social curriculum for schools/settings, including a planned 2026 conference.
- EPS to collate and publish impact from MeLSA, ELSA, Relational Policy pilots, DT Supervision, BCI responses and wellbeing supervision, expanding into secondary phases.
- Reviewing and updating the Early Years Graduated Response in autumn 2025.
- Continuing EPS workforce development initiatives, including grow-our-own pathways and succession planning our own pathways and succession planning.-our-own pathways and succession planning.
- Embedding VIG into EP practice allocations to support high-quality casework and recruitment. Quality casework and recruitment.-quality casework and recruitment.
- Increasing SENDSS capacity through new SEMH and OT advisory roles, with pilot projects evaluating impact in autumn term 2025.
- Continuing to develop staff wellbeing support and training to retain the workforce and strengthen resilience.

DRAFT

Acronym Glossary

AAC — Augmentative and Alternative Communication
ACE — Adverse Childhood Experience
ADHD — Attention Deficit Hyperactivity Disorder
ARBs — Additional Resource Bases
CAMHS — Child and Adolescent Mental Health Services
CACE — Cornwall Association of Chief Executives
CFT — Cornwall Foundation Trust
CPD — Continuing Professional Development
CYP — Children and Young People
EET — Education, Employment and Training
EHCP — Education, Health and Care Plan
EHNA — Education, Health and Needs Assessment
EHE — Elective Home Education
EOTAS — Education Otherwise Than at School
EPS — Educational Psychology Service
FIS — Family Information Service
GLD — Good Level of Development
HDRC — Health Determinants Research Collaboration
ICB — Integrated Care Board
JSNA — Joint Strategic Needs Assessment
KS2 / KS4 — Key Stage 2 / Key Stage 4
ND — Neurodevelopmental
NEET — Not in Education, Employment or Training
OT — Occupational Therapy / Occupational Therapist
QA — Quality Assurance
SaLT — Speech and Language Therapy
SEMH — Social, Emotional and Mental Health
SEND — Special Educational Needs and/or Disabilities
SENDSS — SEND Support Services
SEN — Special Educational Needs
SENCO — Special Educational Needs Coordinator
TAS — Team Around the School
VIG — Video Interaction Guidance
YEP — Youth Engagement Project