Area SEND inspection of Warwickshire Local Area Partnership

Inspection dates: 27 April 2026 to 1 May 2026

Dates of previous inspection: 12 to 16 July 2021

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

Warwickshire local area partnership consists of Warwickshire County Council and NHS Coventry and Warwickshire Integrated Care Board (ICB). They are jointly responsible for the planning and commissioning of education, social care and health provision for children and young people with SEND in Warwickshire. A new director of children's services was appointed by the local authority in March 2026.

NHS Coventry and Warwickshire ICB formally clustered with NHS Herefordshire and Worcestershire ICB in October 2025. The two ICBs remain as separate legal entities with their own statutory responsibilities but share some leadership positions, including the chair and chief executive.

The local partnership commissions a range of alternative provision (AP). AP provides education for children and young people who cannot attend school due to their social, emotional and mental health and medical needs. AP is also used for those who have been permanently excluded from school or are at risk of being excluded.

What is it like to be a child or young person with SEND in this area?

Children and young people with SEND experience inconsistent support in Warwickshire. They often wait too long for assessments and access to services, particularly in relation to attention deficit hyperactivity disorder (ADHD). This can lead to anxiety and frustration for children and young people and their families and means that some do not receive the support they need in a timely way. While there is more work to do, the partnership has

improved autism diagnostic services and waiting times, while also strengthening practitioners' understanding of autism across education, health and social care.

Children and young people with SEND can access effective early help services, including specialist support and integrated family centres offering coordinated, responsive help and support. As needs increase, experienced practitioners work closely with families to plan effective support and improve access to health and education. Children and young people with complex disabilities receive timely, multi-agency support with qualified practitioners, ensuring their needs are met effectively.

The quality of education, health and care (EHC) plans is variable. The voice of children and young people is well represented in EHC plans, but this is not true of all the professionals who support them. In addition, the timeliness of issuing and updating EHC plans is too slow, which means that they do not always accurately reflect children's and young people's needs. As a result, some children and young people do not get the support and guidance they need.

The voice of children and young people with SEND is increasingly being heard in Warwickshire. There is an ambition across services to listen to children and young people with SEND and their families. Many children, young people and their families typically now feel that they are routinely listened to. They have a say in the provision they receive and the wider design of services. An active children and young people with SEND forum is engaged in helping professionals understand their needs as well as providing a local advocacy for children and young people with SEND.

For most children and young people with SEND receiving support from services, skilled professionals provide the right help, often going above and beyond to provide this. Where they are known to several services, professionals endeavour to communicate with one another to share information that is useful to all. This sharing of information is currently inconsistent and relies too heavily on parents and young people themselves sharing information between services. This is leading to some children or young people with SEND not accessing the services that they need. However, in some areas, including in the early years, effective information-sharing is working well.

Leaders across the partnership recognise the importance of supporting children and young people with SEND at key transition points, including between education settings and into training or employment. However, this support is not yet consistently effective. Designated teams work closely with children and young people to provide advice and support in this regard. Most children and young people with complex health and education needs receive effective, timely support that enables them to transition well to their next stage in education or employment. However, for some, transitions are less smooth. For instance, the move from child to adult health and social care services is often difficult to navigate.

Children and young people with SEND benefit from the partnership's expanding work with employers and education providers. The number of supported internships available is increasing, meaning more children and young people with SEND gain access to

employment and opportunities that better match their needs and aspirations.

The partnership tracks and supports young people with SEND not in education, employment or training (NEET). Careers advisers provide guidance about next steps, which helps to minimise the number of young people with SEND who remain NEET long term. Improved understanding of school avoidance and stronger AP commissioning are delivering some success, but the partnership knows that increased AP capacity and variety is needed.

What is the area partnership doing that is effective?

- In recent months, there have been significant changes to the partnership's leadership and organisational structure. Despite this, the partnership maintains a shared ambition for children and young people with SEND to achieve well and be well prepared for their futures. Leaders have a clear understanding of the needs of children and young people with SEND across the local area, and improved collection and use of data are helping them to focus on the right priorities.
- Children and young people with SEND benefit from skilled and knowledgeable practitioners across education, health and social care, who know them well. For instance, the children with disabilities team provides thoughtful and well-informed support for children and young people with complex health and social care needs, while also recognising and responding to the needs of their brothers and sisters, where appropriate.
- Children and young people report that professionals have a genuine interest in their wishes, views and ambitions and that co-production is becoming routine and embedded. Children, young people and their families are partners in making decisions about their education, health and social care. Warwickshire Parent Carer Voice and a children's and young people's forum are routinely involved in strategic partnership work, such as the redesign of the EHC plan process.
- The role of Warwickshire Parent Carer Voice is positive and maturing. Purposeful collaboration across Education, Health and Social Care is helping to shape tangible improvement.
- The 0 to 19 health service is putting more emphasis on early identification, which is helping some families to get support sooner. A strengthened offer for those with autism, including in early years providers, gives families something practical to draw on while they wait for assessment, which many parents find reassuring.
- Practitioners across early years services work closely together so that children's needs are identified early and responded to. For example, they ensure that children with SEND can access speech and language therapy in good time. Additionally, clear processes for dysphagia and video fluoroscopy help to ensure that children and young people receive timely interventions.
- Leaders across the partnership know the importance of increasing the number of specialist and AP placements. They have been successful in opening specialist resource provisions, which are proving effective. Careful commissioning of AP, and a

more robust process of quality assurance, mean that children and young people in AP are benefiting from suitable and flexible provision.

- The processes around supporting children and young people for whom school placements have broken down or are inappropriate are working effectively for most. Packages for those educated otherwise than at school are tailored to individual needs and reviewed regularly. The high needs panel for children and young people who need a specialist placement operates as a collaborative process between local schools and the local authority. Contributions from services including health and social care ensure that decision-makers have a clear and well-informed understanding of each child's and young person's needs.
- There are effective oversight and monitoring of the care and support given to children and young people placed in residential placements outside of the Warwickshire area and for those in residential special schools. This helps to ensure that they receive appropriate support and achieve positive outcomes.

What does the area partnership need to do better?

- Leaders across health, education and social care recognise that partnership working is developing, but that it is not sufficiently strategic in terms of commissioning. This creates a risk of gaps in provision for children and young people with SEND. While individual services have a clear understanding of their own performance, there is not a consistently shared view of how effectively services work together and integrate support. For example, the offer of speech and language therapy for 11- to 16-year-olds lacks clarity, and children and young people with autism or ADHD do not consistently receive timely and appropriate support from child and adolescent mental health services (CAMHS) when required.
- Some parents and practitioners describe a system that feels fragmented, with information-sharing between professionals and services being inconsistent. Some parents and carers describe systems as difficult to navigate, reporting that they have to 'fight' for the services their child needs.
- Too many children and young people needing mental health support in Warwickshire hit a point of crisis before receiving the help they need. This results in too many hospital admissions. The dynamic support register is not effective in reducing the risk of avoidable hospital admissions.
- Waiting times across some health services are too long. This includes delays in accessing community paediatricians, speech and language therapy, as well as autism and specialist CAMHS pathways. For those waiting excessive periods for help, there is increased risk of family, education or social care placement breakdown, deterioration in mental health, and reduced school attendance due to emotionally based school avoidance.
- Waiting times for ADHD assessments are particularly poor, with some children and young people waiting far too long. This delay has a significant impact on their wellbeing. While some professionals offer support during this period, there is not yet a coordinated, cross-service approach in place to ensure consistent support.

- Leaders presented inspectors with a short-term strategic plan to address important areas of concern, particularly around ADHD waiting times, support and the high number of children who are hitting crisis points. The overall approach to the way that the partnership manages existing risk formally needs to improve, particularly while there are long-term transformation plans being undertaken.
- Many children and young people wait too long for an initial EHC needs assessment, with some parents reporting that they feel they must self-refer to trigger the process. Children and young people are also waiting beyond statutory timescales for EHC plans to be issued and for plans to be amended following annual reviews. These delays impact negatively on how well children and young people's needs are met.
- The partnership has worked to redesign the process and format of EHC plans, with a positive emphasis on capturing the voice of children and young people. However, there are still some inconsistencies in how well EHC plans reflect input from health and social care professionals. This means that EHC plans do not always reflect the needs of some children and young people with SEND accurately enough and so they do not receive the precise support that they need.
- The partnership acknowledges that school absence, suspension and exclusions are too high for children and young people with SEND. Although there is some improvement, the partnership has not fully understood the underlying causes or how services should develop to address them.
- Children and young people with SEND and their families sometimes experience difficulties during transition into adult services. They find it challenging to navigate access to some therapies, specialist equipment in special schools and services for those with complex health needs, including in adult social care.
- In social care, most children and young people with SEND who require statutory intervention are supported by mainstream teams. Children and young people with SEND who receive a stand-alone social care support package can experience breaks in continuity as they must re-enter through the universal front door if their needs change. This results in delays and frustration.

Areas for improvement

Areas for improvement
The local area partnership should strengthen its strategic governance and commissioning arrangements by improving structures and processes. The partnership should also improve how well services work together and identify any gaps in provision for children and young people with SEND.
Partnership leaders should take action to address the high number of children and young people with mental health needs who reach crisis, including in-patient hospital admissions, before receiving the right support.

The local partnership should take action to reduce the time that children and young people with SEND wait for assessment and diagnosis for ADHD, as well as strengthening the offer of support while waiting.
The partnership should work to reduce the waiting times in some health services, including for autism, speech and language therapy, community paediatrics, as well as some CAMHS pathways and access to learning disability annual health checks.
The local area partnership should work to improve the quality of new EHC plans so that they accurately reflect a child's or young person's education, health and social care needs. The partnership should also ensure that EHC plans are issued and reviewed within statutory time frames.
The partnership should work with education providers to understand and address the high rates of suspension, exclusion and absence for children and young people with SEND.

Local area partnership details

Local authority	Integrated care board
Warwickshire County Council	NHS Coventry and Warwickshire Integrated Care Board
John Coleman, Executive Director for Children and Young People	Simon Trickett, Chief Executive Officer
www.warwickshire.gov.uk	www.happyhealthylives.uk/integrated-care-board/
Shire Hall, Warwick CV34 4RL	Shire Hall, Warwick CV34 4RL

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: two HMI/Ofsted Inspectors from education and social care; a lead Children's Services Inspector from the Care Quality Commission (CQC); and another Children's Services Inspector from the CQC.

Inspection team

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