



# Joint area review

Devon children's services authority area

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**Better  
education  
and care**

## Review of services for children and young people

Adult Learning Inspectorate  
Audit Commission  
Commission for Social Care Inspection (CSCI)  
Healthcare Commission  
HM Crown Prosecution Service Inspectorate  
HM Inspectorate of Constabulary  
HM Inspectorate of Court Administration  
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## Introduction

1. This joint area review was conducted using the arrangements required under section 20 of the Children Act 2004. It was carried out by a multidisciplinary team of inspectors from the Office for Standards in Education (Ofsted), the Commission for Social Care Inspection (CSCI), the Healthcare Commission (CHAI), the Adult Learning Inspectorate (ALI) and the Audit Commission. The review was undertaken according to the requirements of the *Framework for the inspection of children's services*.
2. The review was linked to the contemporaneous corporate assessment of the local council by the Audit Commission and its findings are represented in the relevant part of the corporate assessment report.
3. This review describes the outcomes achieved by children and young people growing up in the Devon area and evaluates the way local services, taken together, contribute to their well-being. Joint area reviews focus on the extent to which children and young people are healthy, safe, enjoy and achieve, make a positive contribution and are well prepared to secure economic well-being.
4. The review evaluates the collective contribution made to each outcome for children and young people by relevant services in the area. It also judges the contributions made by the council's services overall and, specifically, its education and children's social care services. Particular attention is given to joint action by local services on behalf of those groups of children and young people who are vulnerable to poor outcomes. Two such groups are covered in detail: children and young people who are looked after by the council; and children and young people with learning difficulties and/or disabilities.
5. The review took place in two stages consisting in total of three weeks over a six-week period. The first stage reviewed all existing evidence including:
  - a self-assessment undertaken by local public service providers
  - a survey of children and young people
  - performance data
  - the findings of the contemporaneous inspection of the youth service
  - planning documents
  - information from the inspection of local settings, such as schools and day-care provision
  - evidence gathered during the earlier Youth Offending Team inspection
  - briefings from staff within inspectorates, commissions and other public bodies in contact with local providers.
6. The second stage included inspection fieldwork. This included studies of how far local services have improved outcomes for a small sample of children and young people, some of whom have the most complex needs, and a study

of provision in Bideford and the Wonford area of Exeter. It also included gathering evidence on seven key judgements, selected because of their critical importance to improving outcomes for children and young people in the local area. This included discussions with elected members of the local authority and their equivalents in other public agencies, officers from these agencies, service users and community representatives. A review of case files for children and young people receiving support from a number of local agencies was also included.

## Context

7. Devon is the largest local authority area in the south west of England. It has a population of 724,700 including 163,100 children and young people in the 0 to 19 age range. The overall population is rising, although the proportion under 20 is below the national average and predicted to decline by a further 2.5% over the next five years. The county is sparsely populated. The minority ethnic population (1.13%) constitutes a very small proportion of all residents but has doubled in the last decade. In recent years, there has been an increase in the number of Traveller families and people from Eastern European countries.

8. Outside the city of Exeter, the administrative centre of the county, there are some 28 market and coastal towns, dispersed villages and small hamlets scattered across a wide rural area. Devon is characterised by high employment: a significant component of the economy is tourism which generates over £2 billion per year. By contrast, Devon also has one of the lowest average household incomes of any shire county. There is a high proportion of low-paid and low-skilled work. Pockets of significant deprivation characterise the otherwise prosperous city of Exeter, a few market towns and some rural communities. An estimated 35,500 children live in households in receipt of welfare benefits and approximately 28,400 live in wards that are among the 25% most deprived in England. With limited job prospects and rising house prices, increasing numbers of young people leave the county to live and work elsewhere.

9. Services are provided by a network of partnerships and organisations which include the county council, eight district councils, six primary care trusts (PCTs), five provider healthcare trusts, the Devon and Cornwall police service and the Cornwall and Devon Connexions partnership. Additional support services are provided by a wide variety of independent and voluntary sector organisations.

10. Since May 2005, the county council has been led by the Liberal Democrats who took over from the previous all-party administration that had no overall political control. A pathfinder Children's Trust was formed in 2003 as part of a national pilot and, at the time of the review, its governance arrangements were being evaluated as part of the transition to permanent trust status. The director for children and young people's services took up post in April 2006 at the same

time that the education and children's social care services were merged to form a new directorate for children and young people's services. A Children and Young People's Plan has been agreed by key partners and sets out the ambitions and priorities for the development of services for children, young people and families.

11. Children's social care services are provided by the county council which has corporate parenting responsibility for some 585 looked after children: the time of the review, over 400 were in foster care placements. An estimated 700 looked after children are also resident in Devon in private and independent agency placements funded by other local authorities.

12. The council maintains 374 schools, including 318 primary schools and 37 secondary schools; there are two maintained nurseries, 10 special schools and seven pupil referral units (PRUs). Over 120 schools have less than 100 pupils on roll. At age 11, a number of children move to grammar and independent schools. There is a residential secure children's home in Exeter. The proportion of pupils with English as an additional language is well below the national average. The proportion of children with a statement of special educational need is above the national average for primary schools and below for secondary.

13. The Devon and Cornwall Learning and Skills Council (LSC) works with the council, further education (FE) colleges, training providers and schools to implement the 14–19 strategy. Post-16 education and training is provided by three FE colleges, one specialist agricultural college, 19 school-based sixth forms and a range of work-based training providers. There are also two independent specialist colleges. The council provides an adult and community learning service and a range of family learning programmes.

14. Primary care for children and young people is provided by six primary care trusts (PCT). The Royal Devon and Exeter National Health Service (NHS) Foundation Trust, Northern Devon Healthcare NHS Trust and South Devon Healthcare NHS Trust are the main providers of acute services for children. Children's mental health services are provided by Devon Partnership NHS Trust, Somerset Partnership NHS and Social Care Trust, South Devon Healthcare NHS Trust and Plymouth Hospitals NHS Trust. Child and Adolescent Mental Health Services (CAMHS) are increasingly delivered by Devon PCTs. West Country Ambulance Services NHS Trust serves the whole of Devon and several other areas. South West Peninsula Strategic Health Authority is responsible for all these trusts and several others. At the time of the review, a significant reconfiguration of services was underway to create one PCT for the whole county.

## Summary report

### Outcomes for children and young people

15. Outcomes for children and young people in Devon are adequate. In most respects, children are healthy although rates of improvement vary across the county. Children with learning difficulties and/or disabilities sometimes experience long delays accessing specialist services. While most children and young people appear to be safe, not all those at the greatest risk of neglect and abuse get the protection they need. Educational attainment of children and young people is generally in line with the national average at all key stages and in line with the average of children in similar authorities. Although improving, the attainment of looked after children is low and too many are absent from school. Most children and young people enjoy going to school and make at least satisfactory progress in relation to their prior attainment. Attendance is good. The vast majority of children and young people behave responsibly and many contribute to decision-making that helps shape local services. The number who become offenders for the first time is falling, although the rate of re-offending has risen. Young people are prepared adequately for working life. Success rates at the ages of 16 and 19 are in line with the national average; however a significant minority is in work without training and with few prospects for progression. Provision of affordable housing is inadequate in meeting the needs of all children and young people. Vulnerable groups, such as care leavers and young people with learning difficulties and/or disabilities, have particular difficulty finding a suitable place to live.

### The impact of local services

#### Being healthy

16. **The work of all local services in securing the health of children and young people is adequate.** However, historical differences in provision across the county have not been tackled systematically to ensure equal access. Parents and carers are supported well in keeping their children healthy and services are generally effective in meeting the physical health needs of most children and young people. There is a strong ethos across a range of agencies to promote healthy lifestyles and schools are on course to meet the targets set as part of the National Healthy School Programme. Partners are working well together to provide sexual health services; however, young people in rural areas have much more limited access to the confidential support they need. There is an effective teenage pregnancy strategy supported by good multi-agency collaboration. A coordinated approach is paying dividends in improving the physical health of looked after children. Primary mental health workers provide effective early intervention and support. A comprehensive CAMHS strategy has been developed; however, the implementation of the strategy and the pace of change vary considerably across the county. Inconsistencies between service providers lead to unacceptable variation in how children and

young people access and receive CAMHS, with particular weaknesses in support for looked after children and those with learning difficulties and/or disabilities. Health services for children and young people with learning difficulties and/or disabilities have increased but do not yet meet the full range of identified need. There is a lack coherence across the county as a whole: some children receive a very good service, but many do not and this is a major weakness. There are significant delays in the provision of some specialist therapies and learning disability nursing services.

## Staying safe

**17. The work of all local services in keeping children and young people safe is inadequate. Those at the greatest risk of abuse and neglect do not always get the protection they need.** The Local Safeguarding Children Board (LSCB) is established and there is effective work with those cases that clearly meet child protection criteria. However, thresholds that govern access to social care services are set too high. Eligibility criteria are applied inconsistently across the area and the availability of support for families in need is variable. Performance management in social care services is inadequate and there is insufficient oversight by all relevant agencies of the decisions and actions arising from joint work with individual children. Quality assurance is inadequate and data are neither complete nor robust. Current procedures for recording contacts and referrals to the social care service are inadequate. Staff personnel files are poorly maintained, do not contain essential details, such as Criminal Records Bureau (CRB) checks, and new staff frequently take up post before the necessary checks are complete. This is unsafe practice.

18. Fostering and adoption services provide good support to parents and carers and stable placements for looked after children. However, approximately one in four looked after children is allocated to an unqualified social worker. There are no written procedures for ensuring that contracting officers are notified immediately when child protection concerns arise in agency placements of children looked after by other local authorities. Services for children with learning difficulties and/or disabilities are inconsistent. Insufficient respite care and delays in the provision of specialist services create significant additional stresses for these families. There are good safety standards in schools, early years and youth work settings. Across the county as a whole, children and young people generally feel safe.

## Enjoying and achieving

**19. The work of all local services in helping children and young people to enjoy their education and recreation and to achieve well is adequate.** The council provides good support for parents and carers. Support for early years and childcare has weaknesses but sensible plans are in place to make the improvements needed. The monitoring and intervention strategy, together with support provided for schools, is effective. It ensures that

educational attainment continues to improve in line with the improving national picture and fewer schools fall into a category of concern than do so nationally. However, insufficient attention is given to raising the attainment of more able pupils and targets set for improvement are not always precise. Early intervention projects have had a positive impact on the motivation and behaviour of some children, but the council has not always monitored the outcomes sufficiently to judge which to develop further. Support for the education of looked after children is unsatisfactory: although improving, attainment remains low and too many are absent from school. Provision in schools and PRUs is at least satisfactory and often good. The recent reorganisation of schools in Exeter has been achieved efficiently and new buildings have been constructed with minimal disruption. Attendance is in line with national levels and the number of permanent exclusions is falling. The council does not provide sufficient education to all primary-aged children who do not attend school. Many good recreation and leisure opportunities are provided although these are more scarce in rural areas and some market towns. Educational support for children and young people with learning difficulties and/or disabilities is adequate overall and good in special schools.

### **Making a positive contribution**

20. **The work of all local services in helping children and young people to contribute to society is good.** There is good support for children and young people to develop socially and emotionally. Action in schools to reduce bullying and combat racism is effective. Young carers who can access services are very well supported, although resources are limited and more need help than receive it. Voluntary sector partners and Connexions provide good support to disadvantaged families and vulnerable young people. There are many opportunities for children and young people to participate in decision-making and become involved constructively in their communities. The council demonstrates its strong commitment to the involvement of young people by encouraging participation in democratic processes and through the work of many of its services, particularly the youth service. The same principles are well established in the practice of many partner agencies. Partners are committed to ensuring that children and young people with learning difficulties and/or disabilities have their voice heard. However, with the exception of those leaving care, opportunities for looked after children are less evident. As the county was re-commissioning its advocacy services at the time of the inspection, there were limited services available.

21. Concerns about anti-social behaviour are being tackled by effective partnership approaches. The police contribute well to these arrangements and place a high priority on youth issues. Although there is much effective liaison between the different agencies and services at local level, there is some degree of uncertainty due to changing police strategies and practices. The youth offending service makes a good contribution to crime reduction and to early intervention programmes. The level of youth crime is low. The numbers of

young people becoming involved in the youth justice system have reduced, although the numbers who re-offend remain a concern.

## **Achieving economic well-being**

**22. The work of all local services in helping children and young people achieve economic well-being is adequate.** Targeted support for parents, welfare benefit campaigns and increasing childcare provision are improving the economic well-being of vulnerable families. Inspection reports show that most young people aged 16 to 19 receive education and training of an adequate standard. Success rates are in line with national averages. A high proportion of young people is in education, employment or training, although a significant minority is in work without training. The proportion achieving a level 2 qualification or equivalent is just above the national average. The county has an appropriate strategy for the development of 14–19 education and training. However, insufficient progress has been made in translating its high-level ambitions into action. A number of effective initiatives take place in local areas where schools and colleges work well together, but not all key partners are fully engaged and development is inconsistent. There is insufficient information sharing between education and training providers about the individual needs of young people. A good range of specialist youth advice and support services is available; however, partners recognise the need to ensure greater coherence in this provision. Care leavers are generally well supported but less than half has a formal pathway plan. Transition arrangements for young people with learning difficulties and/or disabilities at key stages of their education are satisfactory, but access to adult social care and appropriate health services is inadequate. Although increasing, provision of affordable housing is inadequate in meeting the needs of children and young people. Vulnerable groups, such as care leavers and those with learning difficulties and/or disabilities, have particular difficulty finding a suitable place to live.

## **Service management**

**23. The management of services for children and young people is adequate.** Good progress has been made in agreeing a CYPP, in forming a new directorate for children and young people's services and in establishing a Children's Trust. However, significant weaknesses remain in the management and delivery of children's social care services. The self-assessment submitted for the review was inclusive of partners, but lacked rigour. The inspection team's findings are not as positive as the majority of judgements made by the council and its partners.

**24.** The ambitions for children and young people are good and clearly linked through the strategic framework for the area and in partners' individual service plans. Prioritisation is adequate and the overarching priorities for improving outcomes for children and young people are agreed. However there has been insufficient attention to looked after and vulnerable children and to improving educational outcomes for the more able.

25. Overall the council's capacity to deliver current services for children and young people is adequate. Leadership is strong and improving, but the structure of the new directorate is not fully embedded. Management capacity in education is good. The council's financial capacity to deliver effective and efficient services is adequate. However, services for looked after children, children with learning difficulties and/or disabilities and those in need are overstretched and this is affecting the range and quality of provision. There is poor awareness of thresholds and eligibility criteria which govern access to social care services across the county.

26. Partnership work is well established and effective in many areas. However, the resources and responsibilities required for the delivery of the CYPP and for securing further improvement are not yet fully agreed. Performance management is inadequate overall and inconsistent across the range of partners. Target setting is generally weak. Some significant gaps remain in ensuring that reliable and robust data inform performance monitoring, quality assurance and management decision-making. The history of improving outcomes is mixed. There are some good examples of performance being managed well, for example in the youth service, the youth offending service and in aspects of education services. However, the lessons learned from pilot projects, local initiatives and improvement programmes have not always been shared widely to inform the development of good practice across the county. The capacity for further improvement of the council and partners together is adequate.

## Grades

Grades awarded:

4: excellent/outstanding; 3: good; 2: adequate; 1: inadequate

	Local services overall	Council services	Health services
Being healthy	2		
Staying safe	1		
Enjoying and achieving	2		
Making a positive contribution	3		
Achieving economic well-being	2		
Service management	2		
Capacity to improve	2	2	
Children's services		2	
The education service		2	
The social care services for children		1	
The health service for children			2

## Recommendations

### For immediate action

- The council and its partners should respond to the most urgent safeguarding concerns identified in this report by:
  - establishing appropriate and agreed thresholds for access to child protection and family support services

- ensuring that criteria are clearly understood and applied consistently in practice by all staff
  - establishing clear written procedures to notify contracting officers immediately when child protection concerns arise in agency placements of children looked after by other local authorities
  - ensuring comprehensive management oversight of the decisions and actions arising from multi-agency work with individual children.
- In particular, the council should:
- ensure that a written record is kept of all referrals to the social care service to monitor the range and nature of all contacts
  - improve the organisation and management oversight of all social care personnel files by ensuring that:
    - all files show clearly the progress of CRB, health and identity checks
    - clear written procedures inform decision-making for those applicants whose checks reveal offences
    - social care staff only take up post after all checks are completed satisfactorily and a formal written contract has been issued
  - take action to increase financial and professional capacity in the social care service for looked after children, those in need of protection and children with learning difficulties and/or disabilities
  - put in place robust quality assurance arrangements to monitor the frequency, nature and quality of social work visits to looked after children and those on the child protection register.
- The council and its partners should take action to improve multi-agency provision of services for children with learning difficulties and/or disabilities, to tackle the delays and deficiencies identified in this report and to strengthen transition arrangements from child to adult social care and health services.

### For action over the next six months

- Health partners should ensure that historical differences in provision across the county are tackled systematically to improve equality of access to health services for all children, young people and families.
- The Children's Trust should ensure that all vulnerable children and young people who need it have access to an independent advocacy and children's rights service.
- The council and its partners should accelerate the rate of progress towards a fully integrated CAMHS and improve, as a matter of priority, access to services for looked after children and those with learning difficulties and/or disabilities.
- The council and the LSC should accelerate the rate of progress in the implementation of the 14–19 strategy and ensure that all key partners are fully engaged.
- The council and its partners should improve the management of children and young people's services by:
  - developing a shared approach to performance management to raise awareness and achievement of joint priorities and outcomes
  - agreeing challenging, measurable and explicit performance targets that better match the ambitions of the area, particularly in relation to the educational achievement of children and young people
  - ensuring that performance monitoring, the collection and use of data and quality assurance procedures are robust
  - agreeing the resources and responsibilities required for delivery of the CYPP to assure accountability for improving services.

### For action in the long term

- The council, schools and colleges should agree and implement an action plan to improve the attainment and attendance of looked after children and young people.
- The council, the district councils and partners should improve access to an adequate range of semi-independent and affordable housing with a priority on vulnerable young people.

- The Children's Trust should ensure that all lessons learned from pilot projects, local initiatives and improvement programmes are shared widely and inform the development of good practice across the county.

## Main report

### Outcomes for children and young people

**27. Children and young people are generally healthy. Patterns of improvement are, however, inconsistent.** Perinatal and infant mortality rates are the same as the national average in most parts of the county. The proportion of expectant mothers who smoke during pregnancy is low overall, although it increased in half the PCT areas in 2004/05. The numbers of mothers initiating breastfeeding are higher than average in most areas, although rates declined overall last year. Immunisation rates at age five are generally higher than the national average. Rates of teenage pregnancy are generally low and falling. Teenage mothers receive good support. The proportion of looked after children receiving regular health checks has improved and is now good. Almost all children and young people referred to non-specialist CAMHS were seen within 24 weeks; however, less than the national average were seen within four weeks. Children and young people with urgent mental health needs are seen within 24 hours in four of the six PCTs. Looked after children and those with learning difficulties and/or disabilities have insufficient access to specialist CAHMS. There is good community-based care for young people with substance misuse problems. Children with learning difficulties and/or disabilities sometimes experience long delays in accessing specialist therapy and nursing services. In line with the national picture, the vast majority of children and young people responding to a recent survey described themselves as quite or very healthy.

**28. Most children and young people appear to be safe. However, not all those at the greatest risk of abuse and neglect get the help they need.** Children and young people generally feel safe in their local area and within their schools. They receive good information and advice about road safety and other dangers. Serious road accidents involving children and young people have halved in recent years. The numbers of children on the child protection register have reduced, and re-registration levels are low. However, threshold criteria, which govern access to services, are too high and are applied inconsistently. There are insufficient family support and other preventive services for all families who might need them. These factors mean that a significant minority of children who do not meet the thresholds, but nevertheless have high levels of need, do not receive an adequate service. A high proportion of looked after children is in foster care and placements are stable. Children with learning difficulties and/or disabilities have insufficient access to respite care and other family support and this creates additional stresses for these children and their families.

**29. The achievement of children and young people is adequate.**

Children and young people aged 5 to 16 years attain in line with national averages at all key stages and in line with the average of children in similar authorities. Attainment has mirrored the improving national trend, with minor fluctuations, since 1999. Improvements have been achieved as a result of effective intervention work, however attainment in areas of disadvantage, such as in some Exeter wards, is still not good enough. Most children enjoy going to school and make at least satisfactory progress in relation to their prior attainment. The proportion of gifted and talented children achieving A and A\* grades is average compared with those nationally. The attainment of looked after children has improved but remains low and too many are absent from school. Children with learning difficulties and/or disabilities achieve well in special schools and at least satisfactorily in mainstream provision. Attendance is in line with national averages and similar authorities. In primary schools, unauthorised absence is well below the national figure. Attendance in secondary schools has improved overall and unauthorised absences are in line with the national average. The number of permanent exclusions is average in secondary schools and slightly above in primary, but reducing overall.

**30. Children and young people have a good range of opportunities to make decisions and take personal responsibility and many make a good contribution to their communities.**

Young people benefit from a good range of provision which supports their social and emotional development and large numbers of young people are engaged in voluntary work. There was widespread interest in the last elections for the UK Youth Parliament with over 30 candidates and 23,700 votes cast. Representative bodies for young people are influencing council policies and actions. At local level, there are many examples of children and young people contributing to project and service developments. Many of these are initiated by the youth service whose activities benefit around 17% of the 13–19 population. The number of young people involved for the first time in youth justice systems is being reduced, although the proportion that re-offends remains a concern. Preventive and early intervention projects are helping to tackle anti-social behaviour. Care leavers have good opportunities to influence service development, although there is no overview or strategy to ensure that those still in care have the same. The proportion of looked after children taking part in their statutory reviews is increasing but remains below the national average. Children and young people with learning difficulties and/or disabilities have good opportunities to make their views known. At present, advocacy services are very limited in scope.

**31. Children and young people are able to achieve economic well-being and are prepared adequately for working life.**

Most young people aged 16 to 19 have access to education and training of a standard which is at least adequate. Success rates for the majority in schools and colleges are at, or close to, national averages and the standards achieved in similar areas. Average point scores at A and AS level are also broadly satisfactory. The proportion of young people achieving a level 2 qualification or equivalent is just above the national average. However, some groups of young people fare less well; for

example, success rates in work-based learning for young women and young people with learning difficulties and/or disabilities are well below the national average. Most young people have access to useful information, advice and guidance. A high proportion of young people is in education, employment or training, including a significant number of young mothers, care leavers and young offenders. However, the proportion in employment without training is relatively high, with a significant minority in low-paid, low-skilled work with limited prospects for progression. In most schools, young people have opportunities to develop employment-related skills. Although increasing, the provision of affordable housing is inadequate in meeting the needs of children and young people. Vulnerable groups, such as care leavers and young people with learning difficulties and/or disabilities, have particular difficulty finding a suitable place to live. An increasing number of young people with disabilities has a greater say in their care through the direct payment scheme. However, access to adult social care and appropriate health services is inadequate.

## The impact of local services

### Being healthy

32. **The work of all local services in securing the health of children and young people is adequate.** However, historical differences between areas and providers have not yet been tackled systematically to ensure equitable access to health services across the county. Parents are supported well in keeping their children healthy. Staff from different agencies work effectively with parents in Sure Start and children's centres. The development of 'play parties' has been successful in tackling the isolation felt by those in disadvantaged communities and more remote areas. Evaluation of the work of Home Start volunteers, for example in Bideford, shows a marked reduction in parental stress and improved outcomes for children. Health visitors work effectively in a wide range of community settings and have high rates of contact with children under five. The proportion of mothers initiating breastfeeding is higher than average across five of the six PCT areas, although rates declined overall in 2004/05. Fewer mothers than average smoke during pregnancy, although the rate has increased in three of the six PCTs.

33. Access to primary healthcare for traditionally hard-to-reach groups is facilitated well, for example by the provision of a GP practice in Exeter which specialises in support for the asylum-seeker population and those in temporary housing. Good partnership work supports the Traveller community and a 'language line' is available for telephone interpreting and translation across the county.

34. Partners have a strong ethos to promote healthy lifestyles. Healthy eating is encouraged by the Fresh Start food specification for schools promoting the use of local produce. Healthy snacks are provided in an increasing number of early years and youth work settings. An innovative 'Take Ten' exercise pack for primary schools supports the provision of two hours of exercise per week.

Schools are on course to meet the local targets set as part of the National Healthy School Programme. The range of work to promote awareness of substance misuse is variable. Schemes delivered by the youth service are well received by young people. Programmes such as the Risky Behaviours project provide individualised support to young people in helping them make positive and informed choices. The Drug Action Team is developing good links with schools to underpin health promotion and drug and alcohol awareness programmes.

35. There is an effective teenage pregnancy strategy, supported by good multi-agency collaboration. Teenage pregnancy rates for under-16s are low overall and falling in most parts of the county. Teenage parents receive good support. Sexual health services are delivered well in a range of youth clubs, community centres and schools by community nurses, GPs and trained youth workers. Young people in rural communities have more limited access to the confidential support they need.

36. Services are achieving good outcomes in the physical health of most children and young people. Immunisation rates for children under five are higher than the national rate. Hospital services are delivered effectively by four acute provider trusts and in minor injuries units located in community hospitals. The Royal Devon and Exeter Foundation NHS Trust provides good inpatient and outpatient paediatric services and A&E facilities appropriate to children's needs: there is separate adolescent inpatient provision and services are staffed by paediatric nurses.

37. A comprehensive CAMHS strategy has been developed based on an extensive analysis of need and a detailed audit of provision. Services are being integrated within joint agency teams (JATs), supported by dedicated locality managers. However, implementation of the strategy and the pace of change are inconsistent across the county. A CAMHS transition plan is now in place to support the change programme. Progress is being made in moving specialist (tier 3) services from mental health providers to the single PCT. Interim provision of acute inpatient (tier 4) services, pending the proposed building of a new unit in 2007, remain piecemeal and, in the main, located out of the county. Long waiting lists are reducing in most areas and the increased investment in primary mental health workers has led to good improvement in the mental health and well-being of children and young people. An agreed protocol for those who self-harm ensures automatic admission to an acute paediatric hospital bed pending psychiatric assessment. Those with eating disorders are managed jointly by hospital paediatric services and CAMHS. A counselling and psychotherapy service provides good support for young people, but its effectiveness is hampered by not being widely available in all of the six areas. Young people involved with the youth offending service receive timely support from community psychiatric nurses and ready access to CAMHS.

38. There are significant weaknesses in CAMHS for looked after children and those with learning difficulties and/or disabilities. Progress is slow in implementing a strategy to develop specialist services designed to support looked after children with mental health difficulties. Provision for children with learning difficulties and/or disabilities varies considerably with little or no service in some areas: four of the six PCT areas do not have a full range of CAMHS commissioned explicitly for this group.

39. The DAT engages a higher number of young people in treatment than the regional average and most receive appropriate specialist treatment. Services are commissioned effectively across Devon using pooled budgets.

40. The percentage of looked after children receiving regular health checks has improved and is now good. All PCTs have designated and/or named doctors and nurses and the adoption of common strategies and practice has had a positive impact. Initiatives include a contract with local dentists and the development of a screening tool for substance misuse. There are no formal arrangements in place to meet the health needs of privately fostered children and young people and those placed in Devon by other local authorities.

41. Services for children and young people with learning difficulties and/or disabilities have increased but do not yet meet the full range of identified need. Services lack coherence across the county as a whole. JATs in four of the six PCTs provide a single point of access to services and effective multi-agency approaches have been developed. However, families sometimes wait a long time to be allocated a key worker. There are unacceptable delays of up to a year for some specialist therapies and learning disability nursing services. While some children receive a very good service, many do not and this is a significant weakness. There are effective care pathways for children with attention deficit and hyperactivity disorders and for those with autistic spectrum disorders. There is insufficient specialist dental care for children with learning difficulties and/or disabilities.

### **Staying safe**

42. **The work of all local services in keeping children and young people safe is inadequate. Children and young people generally feel safe in the local area and in schools. However, not all those at the greatest risk of abuse and neglect get the protection they need.** Thresholds for access to social care services are set too high and eligibility criteria are applied inconsistently across the area. Availability of family support services is variable and support for children who do not meet the high thresholds, but nevertheless have significant needs, is very limited. Transfers of cases from intake teams are delayed when there is a lack of capacity in longer-term teams and this creates additional pressure at the point of referral. Few initial and core assessments are completed within timescales, leading to unacceptable delays in the provision of services.

43. Clear child protection processes and procedures are in place and there is a good working relationship between social care services and the police. All PCTs perform well against national performance measures. A comprehensive child protection training programme for education staff is underway. The number of children placed on the child protection register has reduced steadily, and re-registrations of children are low. Council data show that the timeliness of child protection reviews has improved significantly. Children who are subject to clear child protection referrals receive a service which meets their needs.

44. Current procedures for recording contacts with and referrals to the social care service are inadequate. Initial referrals are categorised as either 'contacts' (requiring no further service and not written down) or 'referrals'. As a result, social work teams are unable to identify those children who are subject to repeated contacts with the service and may have more significant underlying need. This situation is due to be rectified with the full implementation of the CareFirst computerised recording system.

45. Performance management in social care services is inadequate. Data quality assurance systems focus on a narrow range of national performance indicators and do not reliably inform the day-to-day management of the service. Data are insufficiently robust. No management information is collected to show that children on the child protection register and looked after children are visited regularly by social workers, and to show whether such children are seen alone. There are few audits of case files and insufficient oversight by all relevant agencies of the decisions and actions arising from joint work with individual children. There is no systematic monitoring of the quality of files: chronologies and records of significant events in a child's life are variable in quality.

46. Personnel files in children's social care services are poorly maintained. They do not provide proper evidence of CRB, medical and identity checks. No data are available centrally to ascertain the numbers of social workers who have been cleared. New staff are frequently started in post before employment contracts are issued and checks completed. There is no clear, written procedure for management decision-making when CRB checks reveal previous offences. This is unsafe practice.

47. The LSCB has been established and there is confidence among partner agencies in its leadership and potential for future planning. Pooled budgets have been identified, but monies are not fully in place. Police and social care services have established tracking processes to identify missing children. Education services have begun work to identify the whereabouts of children who do not attend school full-time. The council commissions effective early intervention work from a range of voluntary agencies, such as NCH family group conferencing and the Against Domestic Violence and Abuse Partnership, which identifies need and the support required by vulnerable families. The council has been awarded Beacon Status for road safety and a comprehensive travel plan is in place. A successful junior life skills campaign, delivered by

police, health, fire services and Sure Start promotes personal safety and protection from dangers in the environment. There are good safety standards in early years, youth work settings and schools. Most schools are satisfied with the health and safety guidance they receive.

48. Foster carers receive good support from the fostering service. The council has recently received a positive inspection report on its fostering and adoption service. Stability of placements and permanency planning for looked after children continue to be good. However, at the time of the review, some 64 children were placed outside the approval range of carers, which is a concern as it indicates limited placement choice. Support from the child's own social worker is inconsistent: more reviews are undertaken within required timescales but the completion rate for personal education plans and pathway plans remains low. Only 73% of looked after children are allocated to qualified social workers, meaning a high number is supported by unqualified staff. Opportunities for these staff to gain professional qualifications are limited.

49. An estimated 700 children are placed in Devon by other authorities using independent fostering agency and private residential placements. This creates additional pressure on the county's services and schools. There are no written procedures for ensuring that contracting officers are notified immediately when child protection concerns arise in agency placements of children looked after by other local authorities. A comprehensive contracting process provides good quality assurance for Devon's own looked after children in such settings.

50. Services to children with learning difficulties and/or disabilities are marked by inconsistencies. An innovative key worker system has been developed in the JATs. Parents and carers can undertake this role, although training to enable them to do so is still at an early stage of development. While some families are provided with appropriate support, there is insufficient respite care for all those with the greatest need. Delays in occupational therapy assessments and the provision of specialist equipment and adaptations all add to the considerable stresses on families. There is insufficient use of carers' assessments and too little attention to the needs of carers and other children in the family.

## Enjoying and achieving

51. **The work of all local services in helping children and young people to enjoy their education and recreation and to achieve well is adequate.** The support given to parents and carers to enable children to enjoy school and achieve well is good. Family learning provision is good compared with national inspection findings and there are effective programmes in children's centres to involve parents in their children's learning. Foster carers are very positive about the level of support and guidance they receive.

52. Inspections of early years provision show it to be at least satisfactory and often good. The number of places available overall is increasing and plans for creating more children's centres are progressing well. An internal review of early years has identified a number of weaknesses in, for example quality

assurance arrangements and the organisation of support services. The council has appointed a new head of early years and agreed a sensible action plan to secure further improvement, but this has yet to be fully embedded.

53. The council's work to ensure good educational provision for 5–16 year olds is effective. Devon schools provide at least satisfactory and often good education and fewer schools fall into categories of concern than do so nationally. This is largely due to the improvements to the structure and impact of Devon's monitoring and intervention strategy. Key to the strategy is the work of the intervention management group, which meets monthly and uses information and data, including feedback from other agencies, to ensure prompt and appropriate responses. The council commissions Devon Curriculum Services very effectively to provide school improvement and support. The development of learning communities, based on the catchment areas of secondary schools, is improving provision in a few areas. However, the authority does not yet have a sufficient overview of their achievements to ensure that the county's vision and ambition for these partnerships are met.

54. The council has a good record of improving standards of attainment in line with national averages. It works successfully with schools whose outcomes are weak. Early intervention projects in areas of disadvantage have had a positive impact on behaviour and motivation of some children. However, the council has not always monitored the outcomes sufficiently to judge which to develop further. As part of a county-wide behaviour support network, the council has recently established ten resource bases in primary schools which provide specialist support and facilitate partnership work between schools and primary mental health workers. An increasingly comprehensive and flexible pupil-level profile system is used constructively with schools to track achievement and to challenge schools about the targets they set. Local data show that most children make at least satisfactory progress, however attainment overall has not moved significantly above the national average for the last seven years. Schools have not met their challenging targets, except in English at Key Stage 2. Insufficient emphasis has been given to raising the attainment of more able children and young people and the education development plan does not include specific targets for improving attainment at higher levels in Key Stages 1 to 3, or A and A\* grades at GCSE. Although often discussed, targets for improving the attainment of particular groups, for example gifted and talented children and looked after children are not always clearly specified in the action plans following the annual visits to schools.

55. Devon has successfully raised attendance levels in both primary and secondary schools. Good systems, such as the Fast Track to Attendance scheme, and a rigorous approach to the prosecution of parents are reaping rewards. Good progress has been made in reducing the number of permanent exclusions overall. Children and young people are actively encouraged to play a part in their own development. In one instance observed by inspectors, children provided valuable peer mentoring and helped to reduce the effects of bullying.

56. Good work is being done to improve the performance of those with English as an additional language and of Traveller children. These specialist services provide good-quality materials, for example the *Teaching about Islam* brochure, and are working successfully to build capacity in mainstream schools to cater for the specific needs of minority groups.

57. Education for the majority of those who do not attend school is adequate. Most young people who are permanently excluded receive full-time education but a small number of primary-aged children do not. Provision in most PRUs is good but current demand exceeds their capacity. The work of the complementary education service, Link Education, provides good support through its study centres and has been successful in reintegrating 80 children and young people into school in 2005/06.

58. There is useful attainment data at individual pupil level, but this is not yet used sufficiently to drive improvement and to raise the achievement of looked after children. The CYPP has increased the profile of the council's corporate parenting role. Nevertheless, there remains a mismatch between the laudable pledge made for the education of looked after children and what actually happens in practice. The percentage missing from school for more than 25 days per year is increasing; too many personal education plans are out of date or not completed, and schools report a very mixed picture when it comes to the information they receive from other agencies. Although a few feel they are well informed, some schools report that they only know about looked after children by chance or when they start school. The council has taken positive steps to improve the notification arrangements for its own looked after children but difficulties remain with those from outside the county. With the exception of Exeter, where there is excellent communication and cooperation between the different agencies, designated teachers in some other areas have concerns about the lack of communication with and between social workers.

59. Many good opportunities, provided by the youth service, the voluntary sector and JATs, enable children and young people to participate in recreational activities. In Wonford, a very successful club for young people with disabilities enables them to socialise and increase their confidence and self-esteem. It also helps other young people understand the challenges their disabled peers face. Young people state frequently that more should be provided for older teenagers. The extent of, and access to, recreational and leisure activities in rural areas and some market towns are limited.

60. Support for children with disabilities is mixed but adequate overall. Inspections of special schools show that provision is almost always good. A pilot in one school has developed an innovative model of outreach work in mainstream schools and colleges. A service level agreement is taking this good practice forward as a key part of the council's improvement strategy. Effective support is provided for children with sensory impairments. Young people from special schools have regular contact with their peers in the mainstream. The in-school support from the education psychology service and other specialist

services are praised by schools. Despite the significant improvement in the completion rates for statements of special educational need, some schools still have concerns about delays in assessment that affect children with behaviour difficulties.

### **Making a positive contribution**

**61. The work of all local services in helping children and young people to contribute to society is good.** There is good support for children and young people to develop socially and emotionally. A number of projects, many funded through the Children's Fund, have supported disadvantaged children and young people well. For example, Home School Liaison Officers at Bideford College work closely with a range of professionals to provide welfare support to all age groups who may be experiencing difficulties. Action taken by schools to reduce bullying and racism is effective and there are widespread and well-established mentoring schemes.

62. Most children and young people are supported effectively in times of change and challenge. There is good, accessible information for parents with regard to schooling. Many young carers are supported extremely well by various agencies under area-based contract arrangements with the council. However, resources are limited: respite opportunities provided are over-reliant on volunteers and more young carers need help than currently receive it. Support for young carers in schools is mixed: some schools are very sensitive to their needs, while others remain unsympathetic, for example when they fall behind with their homework. There is a wide variety of good specialist work: this includes school transition projects, teenage pregnancy projects, support groups for young parents, and mental health workers, for example in Exeter, working with families in difficulty. There is, however, a lack of coordination and coherence to these various efforts.

63. The opportunities for children and young people to participate in decision-making are good. The recent adoption by the council of Article 12 of the United Nations Charter which is concerned with young people's rights, and the agreement to work towards the 'Hear by Right' standards for youth participation by 2008, indicate the council's own commitment to the involvement of young people. There is effective support for elections to the UK Youth Parliament and to bodies such as the shadow executive which represent the views of young people to the council itself. Good efforts are made to ensure these processes are as inclusive as possible for young people from vulnerable groups. The council has nominated young people's 'champions' to listen and respond to young people's concerns. The commitment across the council is demonstrated in the work of a number of services, for example Zero14plus and the educational psychology service. The principles of involving children and young people are increasingly embedded in schools and in the work of many partners, such as the health services, Connexions and the voluntary sector. Connexions has effective advisory groups of young people to influence its development and Devon Youth Association runs a Participation in Action programme to empower

disadvantaged groups, such as that for young mothers to review county sexual health advisory services.

64. Many opportunities exist for children and young people to contribute to the life of schools or the community through volunteering activities. There are well-established Duke of Edinburgh and Millennium Volunteers schemes. Organisations such as the young carers groups, YSmart (a drug and alcohol support service) and the Ivy Project also provide opportunities and support for volunteering. The youth service enables many young people to play an active part in their community and to contribute to the direction and shape of activities.

65. Children and young people with learning difficulties and/or disabilities are well supported in making a positive contribution. Special schools, in particular, are very effective at ensuring children and young people with complex needs have their voice heard. They are supported in this by trained workers from Connexions and the educational psychology service. The provision by the youth service for young people with learning difficulties and/or disabilities has improved and a number of tailored projects are now in place. The availability of suitable community-based premises is a limiting factor in catering for the needs of this group. There are no advocacy services except in a small number of very specific circumstances.

66. There are good arrangements to reduce anti-social behaviour through district-based community safety partnerships and, in some areas, early intervention programmes aimed at young people at risk of becoming involved in crime and anti-social behaviour. These local partnerships have been well supported by the police service. Multi-agency protocols have been put in place with regard to the referral processes for young people and a range of deterrent orders are used effectively. The Devon and Cornwall police service has a good strategy in place, focusing on neighbourhood policing and prioritising youth issues. At operational level there has been much closer liaison with schools and the community. However, the high turnover of officers in particular posts and changing national police priorities are leading to concerns and misunderstandings at local level. The overarching Safer Devon Partnership is a good strategic development, but one which has yet to win support from all partners and to have a full impact.

67. The youth offending service makes a good contribution to crime reduction and anti-social behaviour strategies. Overall, the level of youth crime is low compared to the national picture. There is an increasing emphasis on preventive work and a strong commitment to working in partnership. The service is successfully reducing the number of first-time entrants to the youth justice system. The quality of restorative justice measures is good and the numbers of young people who have offended who are engaged in education, employment or training are high. However, the rates of re-offending continue to be a cause for concern.

68. There is good provision for care leavers to make a positive contribution. They have opportunities to influence the services they receive, as well as other types of activity. However, for most young people who are still in care, similar opportunities appear very limited. The proportion involved in contributing to their reviews has increased but remains below the national average. The council is demonstrating some commitment to and concern for these children, for example, in its plans to establish mentor schemes involving council employees. However, there is no oversight or plan to ensure that all looked after children have a full range of opportunities to make a positive contribution.

### **Achieving economic well-being**

69. **The work of all local services in helping children and young people achieve economic well-being is adequate.** Support for families is good. A wide range of publicity material and useful websites inform parents and carers about childcare provision. The availability of childcare is increasing. The need for a further increase in affordable, high-quality childcare is rightly identified as a key priority in the Early Years and Childcare Development Plan. There has been appropriate consultation with parents and carers in the development of new provision, for example in Totnes. A county-wide welfare benefits task group has been successful in targeting disadvantaged areas and ensuring more families receive benefits to which they are entitled. Programmes, such as Sure Start, provide good support and advice to parents who wish to improve their skills and return to education, training or employment.

70. Schools and employers work well together to improve children's and young people's awareness of the world of work. Almost all secondary schools have some involvement with the Education Business Partnership, with around 300 teachers taking part in associated professional development each year. A quality standard concerned with work-related and enterprise learning has been developed and many schools have achieved it. Employers have worked closely with schools to develop a popular personal effectiveness programme consisting of five employment-related themes.

71. Most young people have good access to information and advice services to help them understand their choices and options at key points of transition. The combined efforts of Connexions and other youth support agencies provide a good and responsive range of advice, guidance and counselling, particularly for vulnerable groups who experience significant personal difficulties, such as poor health or family breakdown. Key partners are working together to introduce common standards to ensure greater coherence across the range of services. With its detailed data and tracking systems, Connexions can oversee the whereabouts and destinations of young people in Devon effectively.

72. The 14–19 strategy provides an appropriate framework for development. Insufficient progress has, however, been made in translating its high-level ambitions into action. The quality of 14–19 education and training is generally satisfactory compared with national inspection findings. There are good

examples of local collaboration between schools and colleges and, in some cases, work-based training providers. Among these are Get On! Wonford (a pre-entry to employment programme for disaffected young people), links with primary schools and vocational courses in holiday periods. The Devon Training Providers' Network has worked well with Aimhigher to raise aspirations and inform young people about the opportunities in higher education. However, not all key partners, such as FE colleges and schools with sixth forms, are fully involved in the development of 14–19 provision and this has resulted in inconsistent progress at local level. The council and the LSC have jointly funded and recently appointed a new senior manager to provide the focus, leadership and drive required to take the strategy forward.

73. Local planning and implementation groups in Exeter and other areas are improving collaboration. There are good examples of joint timetabling and increased flexibility in the 14–19 curriculum. However, important information about the individual needs of young people is not always shared between schools and FE institutions and this is a significant weakness. Lack of affordable transport is a barrier for young people who do not live within easy reach of education and training providers.

74. Regeneration initiatives, such as the Valley Regeneration Scheme in Wonford, have been targeted successfully at the most needy neighbourhoods. Projects such as traffic calming, environmental improvements and play schemes have been developed in consultation with local residents. In Tavistock, discussions with a local youth forum enabled young people to influence improvement plans for their area. However, lessons learned from these initiatives are not always evaluated and shared widely.

75. There is insufficient affordable housing to meet the needs of all children and young people. The average length of stay in bed-and-breakfast accommodation is similar to the national picture. Although provision is increasing, young people with complex needs and challenging behaviour still face significant difficulties finding a decent place to live. Care leavers, in particular, have insufficient access to an adequate range of semi-independent and permanent accommodation. A comprehensive youth homelessness strategy has been agreed by the Children's Trust. The council has been proactive in working with the district councils and a strategic housing officer has been appointed to work across the area. The council has made a clear commitment to allocate monies raised from taxes on second homes to improve access to affordable housing.

76. There is adequate support and financial assistance for care leavers, although less than half has a formal pathway plan. Despite this, a high proportion is in employment, education or training. There is good support from leaving care teams, but the lack of formal plans means that workers do not always have a comprehensive overview of young people's needs. The council has made it easier for young people with learning difficulties and/or disabilities to receive direct payments. This work, led by Devon Youth Association, has

enabled young people to have a greater say in planning and managing their care. A similar scheme is to be extended to the under-16 age group. Provision for 16 to 19 year olds in special schools is generally good and helps develop independent living skills. Transition protocols and procedures are in place and take appropriate account of the key stages in education. However, access to adult social care and appropriate health services is inadequate and these transition arrangements are weak.

## Service management

**77. The management of services for children and young people is adequate overall.** Good progress has been made in agreeing a CYPP, in forming a directorate for children and young people's services and in establishing a Children's Trust. The ambition of the council and its partners for children and young people in the area is good. Ambitions are clear and linked through the strategic framework for the county and in partners' individual service plans. A comprehensive analysis of need and effective involvement and consultation with children and young people, parents and carers has helped to identify some gaps in provision and to set a series of ambitious challenges to deliver improved outcomes.

78. Prioritisation is adequate. Overarching priorities are clear and agreed. There are coherent links across agreed plans to improve access to services, choice and participation, to tackle inequalities and to strengthen preventive services. The reorganisation of schools in Exeter, supported by a Private Finance Initiative capital project was ambitious, clearly prioritised and has resulted in improved facilities. The council is now undertaking an appraisal of the future role of its smaller rural schools. There has been insufficient attention to looked after children and vulnerable children and to improving educational outcomes for more able pupils. The council sets and monitors targets for headline performance in educational attainment.

79. Overall there is adequate capacity to deliver the current services for children and young people. Leadership is strong and improving. Although there has been some progress in merging a number of key services, the shape of the council's new directorate is not yet clear nor fully embedded at the middle management tier and at the level of service delivery. A major council-wide job evaluation is not yet completed. Capacity in education is good. Human resources policies are appropriate, although procedures are not applied consistently, for example in social care services, where contract arrangements and the monitoring of CRB checks are not robust. Workforce planning in the council is strong: a children and young people's workforce plan addresses future workforce requirements and staff training and development are effective. Retention and recruitment are successful and relatively stable.

80. Capacity is inadequate in children's social care services. Services for looked after children, children with learning difficulties and/or disabilities and those in need are overstretched and this is affecting the range and quality of

delivery. Managers have not addressed the workloads of staff to ensure sufficient capacity. The council tries to assure value for money through its resource allocation panels, but these have become seen by staff as barriers to improving services and the responsiveness of provision. There is poor awareness of the thresholds for access to social care services among staff, managers and services users. Eligibility criteria are applied inconsistently in different parts of the county and children with significant levels of need do not always get the support they require.

81. Financial capacity to deliver effective and efficient services for children and young people is adequate. The council's overall financial capacity is sound and it has built significant reserves over recent years to help deliver its priorities. The council has a good track record in the use of resources, in financial management and value for money. The council manages its educational spending well. Overall spending is above average when compared with similar councils, mainly due to the cost of school transport to meet rural needs. A medium-term financial plan for children and young people's services has recently been agreed, but funding to address gaps in service provision was not prioritised in the past and has not yet been agreed for the future.

82. Partnership capacity is good. Relationships and joint working are well established in many areas, for example in criminal justice, Connexions, youth and health services and the voluntary sector. The youth offending service continues to perform well and is improving key outcomes. Partners have established a children's fund and successfully managed the transition to the Children's Trust. There are some positive examples of joint commissioning of services, pooled funding and shared posts. Partners recognise this is an area for further development. Good collaboration is developing across local learning communities and through an effective schools' forum. Services are generally provided in venues that are accessible within the constraints of a large, sparsely populated rural area. Many communities have a long history of self-help and participation, for example providing youth clubs and activities for their young people. Partners have adopted and are progressing well within the race equality scheme. A good awareness of equality and diversity informs service development. Provision for those with special educational needs is adequate.

83. There is clear and improving accountability and decision-making to support service delivery. The Children's Trust is well established and making a positive impact. This includes a new information-sharing protocol and the recent successful roll-out of an integrated children's management information system to improve the recording, coordination and tracking of individual cases.

84. Performance management is inadequate overall. The management of performance is inconsistent across partners and the range of services. Partners do not have a joint multi-agency approach and there is inconsistent awareness of performance against planned and shared outcomes. Some significant gaps remain in assuring confidence in performance data. A number of plans designed to bring about rapid improvement in underperforming areas, for instance the

employment of care leavers, have been successful. Performance data for looked after children, children in need and those on the child protection register are not rigorous, consistent, comprehensive or adequately checked. The youth service, fostering and adoption service, the youth offending service and many aspects of education are managed well and secure improvement. Lessons learned from pilot projects, local initiatives and improvement programmes have not always been shared widely to inform the development of good practice across the county. Work is underway to develop a comprehensive performance management framework which will be overseen by the Children's Trust.

85. Target setting is generally weak and targets are not always explicit or challenging. Some key targets, for example in educational achievement, aim for little more than the national average. Other important areas do not yet have targets above that of 'improving'. The council's Strategic Plan and the Children and Young People's Plan set clear aspirations to improve, but do not always state by how much. The latter does not yet identify the resources required for delivery. A Continuity and Integration Board is now in place to identify how the plan will be resourced with the new PCT. Resource commitments from other partners are not all in place and this will be key to assuring accountability for improving services.

86. The self-assessment submitted for the joint area review identified key strengths and achievements. It was inclusive of partners, but was not well structured nor supported by robust evidence of impact. It did not identify significant safeguarding weaknesses or all the areas for development. It was therefore overly optimistic and insufficiently critical in its conclusions. In most respects, inspection judgements are not as positive as those made by the council and its partners.

87. **The capacity for further improvement is adequate overall.** There is strong commitment and a genuine willingness to work in partnership to improve outcomes for local children and young people. However, the history of improving outcomes is mixed. Poor awareness of gaps in provision, inconsistent performance management and the lack of past focus on improving the capacity of services for children in need of protection and children looked after remain a key concern. Progress and the transition towards the new Children's Trust arrangements are positive. The PCTs are reorganising to become a single trust and there is growing confidence that this will bring improved focus and momentum. The council and its partners have a good understanding of the challenges and opportunities which lie ahead, particularly in those areas where resources are stretched.

## **Annex: the children and young people's section of the corporate assessment report**

1. Outcomes for children and young people are adequate. The council is performing adequately in the provision of services for children and young people and its capacity to improve is also adequate. Good progress had been made in agreeing a CYPP, in creating a directorate for children and young people's services and in establishing a Children's Trust. However, there are significant weaknesses in social care services for children.
2. The council's challenging ambitions for children and young people have been agreed with key partners and are set out clearly in its strategic plans. However, insufficient priority has been given to looked after and vulnerable children and to improving education outcomes for more able pupils. Performance management is inadequate and target setting is generally weak. There is a lack of robust data to inform management decision-making in some key service areas. There are positive examples of good and improving performance, for example in the youth service, in fostering and adoption and in parts of education. Work is underway to develop a comprehensive performance management framework which will be overseen by the Children's Trust.
3. The council works well with partners in promoting children's and young people's health. However, patterns of improvement and access to services vary across the county. The proportion of looked after children receiving regular health checks has improved and is now good. There is a strong focus on developing healthy lifestyles, for example in schools and youth work settings.
4. The work of the children's social care service is inadequate. Where there is a clear case of abuse and neglect, adequate provision is made. However, the high thresholds which govern access to services, together with the inconsistent application of eligibility criteria, mean that not all children at the greatest risk of abuse and neglect get the protection they need. There are also insufficient preventive family support services. Children and young people generally feel safe in the community and in school. Most looked after children are in stable foster care placements, but a low proportion is allocated to a qualified social worker.
5. Educational attainment is generally in line with the national average at all key stages and in line with the average of children in similar authorities. It has mirrored the improving national trend since 1999, however attainment in disadvantaged areas is still not good enough. The attainment of looked after children is improving but remains low and too many are absent from school. Most children enjoy their education and make at least satisfactory progress in relation to their prior attainment. Children with learning difficulties and/or disabilities achieve well in special schools and at least satisfactorily in mainstream provision. Attendance is generally in line with the national picture

and the number of permanent exclusions is reducing. The council provides good support to schools.

6. There are good opportunities for children and young people to make a positive contribution and to participate in decision-making. Good efforts are made to ensure vulnerable groups are included. Care leavers influence the services they receive, but opportunities for children still in care are more limited. Effective partnership work is tackling anti-social behaviour and reducing the number of first-time offenders.

7. The council's work in helping children and young people achieve economic well-being is adequate. Post-16 success rates are in line with the national average. A high proportion of young people is in education, training or employment, although a significant minority is in work without training. There is insufficient affordable housing to meet the needs of young people. Those with complex needs face particular difficulty finding a suitable place to live.