

Assessment of evidence linked to Annex M of the Ofsted Inspection Handbook

Notes:

1. This is a working document for ongoing development.
2. It is an assessment of our position against the guidance given in Annex M of the Ofsted Inspection Handbook (this guidance is, in effect, a checklist of key issues that inspectors should examine – although it is not an exhaustive list of all sources of evidence that will inform the inspection judgements).
3. Heads of Service have been identified to be responsible for keeping the content under review, along with their Service Managers.
4. Areas for improvement identified from this document will inform our improvement planning (Moving to Outstanding).
5. CYPMT will receive quarterly updates of the document and will be responsible for overseeing its development.

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Replaces	V10 01/12/15

1. Key threshold / decision-making points **MG / MW / SMcL**

Inspectors should always report the key strengths and weaknesses in relation to the issues outlined in this column

- The extent to which key thresholds are consistently understood and applied. If thresholds are set too high or too low, what is the impact of this for children and their families?
- Whether the authority is making timely and correct decisions about when to remove a child from their family and about how to secure permanency for individual children.
- The effectiveness of family support and the understanding about what has changed at home for children who are returning to their families.

Our assessment (summary and detail)

Summary statement

Since our last inspection, there has been good progress in strengthening referral and assessment arrangements. The Early Help Strategy is in place, reflecting a firm commitment from the Council and partners to embed a strong and coherent early help approach. Whilst the impact of the strategy has yet to be fully evidenced, there are encouraging signs, such as an increase in the number of early help assessments (CAF) being completed, especially where these are being initiated and led by other agencies. Further work is needed on the quality of assessments and the effectiveness of plans and outcomes for those in receipt of early help.

The Continuum of Need is currently being revised as part of the development of the Multi Agency Children’s Hub (MACH) jointly with Hartlepool Borough Council, and there needs to be on-going monitoring of the understanding and consistency of application of thresholds across agencies when the MACH goes live in June 2016.

Detail

1. In response to recommendations from the 2013 inspection (of CP arrangements), robust action was taken to strengthen management oversight of referrals, improve timeliness of assessments, improve the quality of case recording, and develop our approach to early help. We commissioned a Critical Friend Review (Jan 2014) and a LGA Safeguarding Peer Diagnostic (March 2014) to test out our progress in response to Ofsted’s recommendations and our own subsequent evaluation of areas for development.
2. Evidence indicates we have a fundamentally safe system for managing referrals and assessments. The LGA SPD gave reassurance that decision making is sound. Case file audits show improving practice. External reviews and internal monitoring have not found evidence of unsafe case management.
3. There has been strong commitment corporately to fund structural changes to increase capacity within social care teams. Over the last two years, this has included: social work capacity in Assessment teams; changes within the First Contact team to strengthen professional oversight; development of the Family Support Team for children just below the social care threshold. The most recent restructuring (wef Sept 2015) has realigned responsibilities, and increased

1. Key threshold / decision-making points

MG / MW / SMcL

capacity at Service / Team Manager level to ensure a more rigorous focus on the quality of social work practice; as well as providing a more coherent alignment of Early Help services. The development of a Multi Agency Children's Hub approach with Hartlepool Council demonstrates our commitment to strengthening our first contact approach. Social worker caseloads are being maintained at manageable levels and there are no delays in allocation of cases.

4. The Continuum of Need has been subject to close scrutiny through SLSCB, and was revised during 2014 to provide greater clarity regarding thresholds. However, evidence from analysis of referral and CiN rates and the recent Tees Early Help Peer Review indicates that thresholds are not as well embedded across partner agencies as we would like. The Continuum of Need is currently being reviewed as part of the Multi Agency Children's Hub (MACH) project with the aim of adopting consistent thresholds across the four Tees LSCB areas and having a shared Continuum of Need across Hartlepool and Stockton-on-Tees.
5. There has been significant development of our Early Help arrangements. The Council now has put in place its Early Help Service to give leadership to partners about the importance of early help services. This has generated a commitment from partners to recognise and support the opportunities that early help and family support services can achieve. This has brought about the establishment and working of the Early Help Partnership, Early Help Panels and an increase in the use of early help assessments (CAFs). We are also demonstrating the need to invest in particular services, for example Family Support, CAMHS and Parenting and resources have been made available to support these particular service developments. We have participated in the LGA peer review of early help across Tees. We are remodelling our approach to troubled families to embed the principles of effective practice across our early help services. An out of hours service for people seeking advice re early help has been introduced (from beginning of December).
6. We have undertaken considerable analysis to help inform our understanding of the rate of referrals, NFAs, section 47 enquiries, CIN and CP plans in our area. This work, which has been subject to scrutiny and challenge via SLSCB, alongside findings from QA activity and case file audits, has informed our strengthened focus on early help arrangements and on further revision of the continuum of need.
7. Whilst the conversion rate of s47s to ICPCs and to CP plans is not out of line with benchmark averages, we are aware of the need to make further improvements in the quality of challenge and risk assessment at some Conferences (Initials and Reviews) to ensure decision making is appropriate and is informed by the appropriate range of multi-agency advice. SLSCB has recently commissioned a number of pieces of work to evaluate these issues in more detail, based on key Thematic Improvement Areas of: Conference Decision Making; Professional Challenge; Quality of CP Plans.
8. Placement decisions are scrutinised and challenged at a Scrutiny Panel, and all children requiring external residential placements are referred to the Children's Multi Agency Placements (CMAP) panel chaired by the Corporate Director.
9. All casework decisions recommending progression to the Public Law Outline (PLO) have to be approved by the PLO Panel. Our internal performance monitoring and outcomes indicate that decision making about permanence is appropriate. In addition, we are working to ensure that the IRO team are able

1. Key threshold / decision-making points

MG / MW / SMcL

to provide strong independent scrutiny and challenge of permanence plans; this is an area of focus for auditing within the IRO service.

10. Whilst our LAC rate has been stable for some time now, analysis of benchmarked LAC and Ceasing Care data has illustrated our relatively high 'turnover' of LAC, the large majority of whom are in care for less than a year, and a substantial proportion for less than 3 months. We have a relatively high proportion of children who are accommodated under section 20. This pattern of activity appears to be consistent with the legal framework / PLO emphasis on 'no order' and speedy resolution to permanence, although we are undertaking some further analysis to ensure we have a full understanding of this profile of 'high turnover' and of the quality of the decision making. We are also introducing into our monthly performance reporting an item on children re-entering care.
11. A report analysing the s20 cases has been reviewed at the CYP Social Care Performance Clinic.
12. The focus given to Private Fostering in the amendment of the school admission information, working with the lead GP for Children and pastoral leads in school has given an enhanced opportunity to raise the profile of private fostering with partners who are in a prominent position to aid identification of this group of children and young people. This work has been reported to and supported by SLSCB.

Supporting documents

1. CP Inspection 2013 Action Plan
2. Critical Friend Review report
3. LGA SPD report
4. Safeguarding Improvement Plan – update report, analysis and evaluation - to CMT December 2014
5. Early Help Strategy
6. Continuum of Need
7. Cabinet Report on Children's Services Review 2015
8. Analysis of Referrals – part of 2014-15 Performance Update to SLSCB
9. CMT Report – Evaluation of LAC Activity & Performance
10. Private Fostering Report to SLSCB

Performance / activity data

1. See data presented and analysed in documents 4, 8 and 9 above.
2. Benchmarking to be updated (Nov / Dec) when 2014-15 national benchmarking data available.

2. Young people who are homeless and aged 16/17

SMcL

Inspectors should always report the key strengths and weaknesses in relation to the issues outlined in this column

- The quality of assessment of homeless young people’s needs and the effectiveness of the support provided, including whether it is provided under the most appropriate legislation
- The extent to which care leavers are prepared for independence and living in accommodation that is suitable for their needs (with specific reference to bed and breakfast accommodation and houses of multiple occupation – HMOs)
- How effectively the local authority and partners prioritise the current and future accommodation needs of children looked after and care leavers.

Our assessment (summary and detail)

Summary statement

Young people who are homeless are offered an assessment of need and the opportunity to become looked after by the local authority. Young people who decline this are not marginalised and will be offered suitable accommodation and services. Performance in relation to the proportion of young people placed in suitable accommodation has been sustained at a high level for some years. There has been a proactive response corporately to recent pressures identified, particularly for supported living arrangements, with proposals being developed to improve access to such accommodation as part of a wider review of supported living provision across life stages. A recent Housing Options Diagnostic Peer Review identified the response to homeless 16 and 17 year olds as model of good practice nationally.

Detail

1. A multi-agency housing and accommodation panel is in place to ensure that care leavers and homeless young people access the right support and accommodation. We have been above the national average for four years in relation to the proportion of 19-21 year old care leavers placed in suitable accommodation. A small cohort of young people in custody has impacted on our aim to achieve a 100% performance.
2. The National Practitioner Support Service has identified ‘Good Practice’ that they would like to share with all of the Local Authorities in the country in respect of the work of Children’s Services and their engagement and standard of work with 16 & 17 year olds. This standard of work has been highlighted as one of the best in the country - it is described as a well-established approach and senior management commitment is evident as well as from front-line officers – a very good and clear Joint Protocol in place and one point of access into the services for young people.
3. As young people approach adulthood, priority is given to ensuring they leave care at a time that reflects their individual needs, emotional maturity and coping skills. To this end, the Council has a number of Staying Put arrangements to enable young people looked after to remain with their foster carers beyond their 18th birthday. We have entered into clear contractual arrangements with Independent Fostering Agencies to ensure that there is a fair and consistent access to staying put provision. During the 2013 -14 period, 7 young people stayed put in their foster placement.

2. Young people who are homeless and aged 16/17

SMcL

4. More recently we have developed a semi independent living space within two of our children's homes to allow young people to continue to live in residential care and we aim to roll out this approach at other children's homes. We have rented a property near one of our children's home for use by young people as a trainer/taster independent living period or as transitional accommodation for care leavers or homeless 16/17 year olds.
5. A comprehensive analysis of accommodation needs for care leavers has been undertaken to inform the strategy for developing appropriate provision over the next three years in line with changing need. This has included a review of our use of supported accommodation providers in light of increased demand and changing need, and moving away from inappropriate non-commissioned accommodation. We have introduced a programme of monitoring visits for accommodation providers to review how the provision is delivering and supporting positive outcomes for young people. In addition to this the Young Inspectors' role has been extended to include supported accommodation providers. There has been a specific recruitment campaign aimed at supported lodging providers.
6. To support our work in this area, we are aware of the need to review the quality of our Pathway Planning arrangements to ensure these are providing an effective means of responding to care leavers' needs.

Supporting documents

1. Housing Peer Review Report
2. Joint Protocol, Social Care & Housing, for responding to needs of homeless young people.
3. CMT Report with Analysis of Care Leaver Accommodation Needs.

Performance / activity data

1. The proportion of care leavers in suitable accommodation, across each of the 16 to 21 yr old age groups, is monitored via the monthly performance reporting and reviewed at Performance Clinic. During 2014-15, performance was 80% for 16 yr old care leavers (4 of 5) and 92% for 17 yr olds (12 of 13).
2. Percentage of former relevant young people aged 19-21 who were in suitable accommodation – 96% for the 3 yr average to March 2014 – better than England and Stat Nbr averages.
3. Increased the number of young people staying put with their carers beyond their 18th birthday.

3. Missing from home or care **SMcL**

Inspectors should always report the key strengths and weaknesses in relation to the issues outlined in this column

- Whether the local authority and partners, including the police, take urgent, persistent and effective action when children are known to be missing. Specific reference should be made to the response to children missing from care.
- The impact and effectiveness of the strategic analysis of missing episodes
- Whether the local authority follows statutory guidance¹. For example:
 - whether safe and well checks and effective independent return interviews are held consistently when children are found and inform plans to keep children safe
 - how well professionals involved with the care of a child identify and respond to patterns of missing episodes

Our assessment (summary and detail)

Summary statement

Data is shared daily by the Police with Social Care to inform appropriate plans and action, and to support the wider sharing of information across agencies, through the VEMT group, to identify children who are at high risk any may be at risk of sexual exploitation. However, more work is needed to ensure we have a full picture in relation to the take-up and outcomes of return interviews. We need to embed practice to ensure we comply with the regional information sharing protocol for those children living outside of the borough.

Detail

1. Stockton-on-Tees LSCB has a local Running or Missing from Home or Care (RMHC) procedure in place which was last updated in February 2014, and underpins the regional RMHC protocol. This procedure is in the process of being updated to reflect changes in the regional protocol and to incorporate new reporting mechanisms on the RAISE system.
2. Data is provided by the police on a daily basis to Children’s Social Care, identifying all those children reported missing. The children’s details are entered onto the Children’s Social Care RAISE system regardless of whether they are open to services or not. Any who have statutory involvement are followed up by their allocated worker. The data is received from the central Police Unit in Middlesbrough and in the main this is received in a timely way which allows for professionals to undertake a return interview and missing assessment where required within the 72 hour time frame.
3. Any child reported missing who is not receiving a service from Children’s Social Care or the Family Support Team is responded to by a CAF Support Officer to ensure that they are offered a return interview and subsequently receive the appropriate follow up where necessary. We are currently reviewing the system

¹ Statutory guidance on children who run away or go missing from home or care, Department for Education, 2014 www.gov.uk/government/publications/children-who-run-away-or-go-missing-from-home-or-care

3. Missing from home or care

SMcL

for performance reporting across Tees to ensure this accurately and consistently reflects practice.

4. There are very few children who go missing from foster care and a small cohort from residential care that can account for a high proportion of missing episodes. Those who go missing from home are followed up by the police who undertake a safe and well check
5. All missing children are monitored monthly via the VEMT Practitioners Group (VPG) and are tracked to ensure that there has been appropriate follow up. The VPG is well attended by professionals from all agencies, providing an effective forum for sharing intelligence and information between agencies.
6. Briefing and training sessions have been held to raise awareness of procedures; there needs to be a continued focus in this work to ensure that roles and responsibilities are clear.
7. Each of the children's homes have a nominated Police officer to support them with regard to managing missing episodes.
8. It is planned to undertake a joint audit with the Police with regard to children missing from children's homes in the borough.

Supporting documents

1. SLSCB Assurance Report on Children Missing or Running Away from Home
2. SLSCB Assurance Report on Looked after Children Placed out of Area 2014 / 2015

Performance / activity data

1. Data included in above documents.
2. Annex A list of missing children.
3. VEMT list (most recent update) from VPG.
4. VEMT case file audit findings (last set of 8 cases: 4 were Good / 4 R I)

4. Missing from education

DMcC

Inspectors should always report the key strengths and weaknesses in relation to the issues outlined in this column

- whether the local authority know how many children are missing from education locally, including those who are looked after.
- whether the local authority is following statutory guidance.² For example:
 - does the local authority hold clear and up-to-date records of the numbers of children receiving alternative education and for those missing from education?
 - do children and young people who do not attend school have access to good quality registered alternative provision?
 - is urgent and effective action taken to protect children where they are missing from school or their attendance noticeably reduces?
 - how effectively do all those involved in the care of children work together to help them return to or remain in suitable education?
- whether children in alternative provision receive at least 25 hours per week.

Our assessment (summary and detail)

Summary statement

There are good arrangements in place for identifying children missing from education, and for monitoring those electively home educated, with clear and updated policies, monthly monitoring of activity as part of the service’s Case Solution Planning meetings, and annual reports to SLSCB and CYPMT. There is an improving position with regard to information about children placed in alternative provision, following revised arrangements agreed recently for schools to share information about alternative provision they have commissioned.

Detail

1. Policies and Procedures relating to CME and EHE have been revised and updated in 2015, mainly to reflect revised responsibilities arising from the restructuring within Children’s Services. Reports providing analysis of activity have been discussed at SLSCB.
2. Data regarding children placed in alternative provision has been an area for development. Data for those placed in LA maintained provision has always been readily available; there are challenges associated with ensuring we have a full picture of alternative provision commissioned directly by schools. Revised arrangements have been put in place, and incorporated within the updated policy document. Regular meetings will take place to ensure that the information provided by schools is accurate, that the provision put in place is appropriate and that reviews of provision are timely ensuring that children do not remain on reduced or alternative timetables longer than is necessary to support the child. An important part of the scrutiny around this will be examining the reasons given by schools for putting in place alternative and/or reduced timetables as this may indicate a support need for the school or

² Children missing education: statutory guidance for local authorities, Department for Education, 2013; www.gov.uk/government/publications/children-missing-education

4. Missing from education

DMcC

pupil.

3. We have given priority to addressing issues regarding the quality of some aspects of the provision in our PRU. The last inspection of the PRU resulted in a judgement of Requires Improvement and the recommendations from the inspection have provided a robust basis for our improvement plan.

Supporting documents

1. CME Policy and Procedures
2. CME 2014-15 Annual Report to SLSCB
3. EHE Policy and Procedures
4. EHE 2014-15 Annual Report to SLSCB
5. PRU Improvement Plan?

Performance / activity data

1. Data in lists provided for Annex A item 2.06 and 2.07
2. Annex A case list no. 8

5. Children and young people who have been or who are neglected or physically, sexually or emotionally abused

SMcL

Inspectors should always report the key strengths and weaknesses in relation to the issues outlined in this column

- Analysis of the prevalence of children on child protection plans in each category and recent trends. What does this tell us about social work practice in relation to each category of abuse and neglect?
- Analysis of reasons when there has been a significant change in numbers of children subject to child protection plans.
- Evaluation of strengths and weaknesses in social work practice in relation to specific categories of abuse and neglect.

Our assessment (summary and detail)

Summary statement

Whilst our case file audits indicate that, in the large majority of cases, effective action is taken to protect children identified as being at risk of significant harm, underlying issues of chronic neglect, substance misuse and domestic abuse are challenges to the timely management and resolution of casework. These issues are picked up with providers and reviewed through commissioning arrangements. Analysis of data, and evidence from audits and practice observations, suggest that some aspects of multi-agency practice are risk averse, understanding of thresholds is not consistent and there could be greater challenge in some cases. Improvements in practice have been initiated, for example development of the Graded Care Profile, introduction of the Signs of Safety model, and development of a Neglect Strategy which will be underpinned by our strengthened Early Help arrangements.

Detail

1. Analysis of cp plan categories and trends indicate that Neglect and Emotional Abuse have become more prominent issues in recent years. We have looked at the duration of both CP and CIN plans, matched to categories of abuse and factors identified in assessment of CIN. This work indicates that Neglect cases tend to be open relatively longer and suggests that domestic abuse and substance misuse are significant factors underlying the rate of cp plans.
2. This analysis is supported by evidence from e.g audits, practice observations and feedback from practitioners which suggest that there can be delays in accessing appropriate services – this feeds into commissioning arrangements; for example, Operational managers and Commissioners meet with Harbour (our commissioned Domestic Abuse service) on a bi- monthly basis to review service performance and consider ways to improve service delivery. We are also involved in discussions with the other Tees Local Authorities to consider the scope for more effective utilisation of some commissioned services.
3. Where appropriate, delays in progressing CIN / CP plans because of unavailability of some of these services is avoided by commissioning independent specialists to complete specific pieces of work.
4. The detailed analysis of patterns of activity in relation to referrals / s47s / ICPCs (see section 1 of this Annex M document) comments on the relatively high rates of referrals to social care, and s47 enquiries. For example, our overall NFA rate is on the relatively high side, and our rate of Referrals converting to CIN is relatively low – these suggest some continuing lack of understanding of thresholds and some elements of risk averse practice, whilst also highlighting the

5. Children and young people who have been or who are neglected or physically, sexually or emotionally abused

SMcL

need for more effective engagement of services in the early help offer. We are confident this will be improved as we progress our work in embedding the Early Help Strategy and build on the engagement with our partners.

5. Multi agency training is in place to improve shared understanding of service roles and responsibilities. To ensure decision making is appropriate and is informed by the appropriate range of multi-agency advice, SLSCB has recently commissioned a number of pieces of work to evaluate these issues in more detail, based on key Thematic Improvement Areas of: Conference Decision Making; Professional Challenge; Quality of CP Plans. The Graded Care Profile tool is being implemented which will focus practitioners and parents in identifying the needs of the child and changes needed in their parenting practice. This will result in clearer and swifter planning and decision making.
6. There has been a specific focus on the number of child protection plans through case file audits and robust challenge of decision making which we believe is having a positive impact as seen in gradual reduction in the numbers of children subject to child protection plans, during the first half of the 2015-16 reporting period.

Supporting documents

1. Analysis of Referrals / S47s / ICPCs / CP Plans / Categories of abuse / Risk Factors – included in Performance Update reports to SLSCB for Q4 / Year End 2014-15 and Q1 2015-16.
2. Safeguarding Improvement Plan – update report, analysis and evaluation - to CMT December 2014
3. Neglect Strategy

Performance / activity data

1. Monthly monitoring data in QEC.
2. Data presented in reports identified above.

Discussion with SLSCB needed also.

6. Those at risk of sexual exploitation or who are known to be being exploited

SMcL

Inspectors should always report the key strengths and weaknesses in relation to the issues outlined in this column

- the quality and impact of referral, assessment and planning.
- the effectiveness of direct work with children and families and of services to support children.
- the level of awareness among professional staff, including their willingness and effectiveness to listen and receive feedback from children and young people.
- the arrangements to protect care leavers who are at risk of or who have been sexually exploited.
- what is known about the authority culture in terms of:
 - listening to children, hearing what they say and acting appropriately
 - hearing from staff at the frontline and engaging with what they say
 - elected member engagement with the local community
 - the quality of work with partners to disrupt offenders or preventative work
 - children and families’ views on the service they have received.

Our assessment (summary and detail)

Summary statement

The Tees Vulnerable, Exploited, Missing and Trafficked (VEMT) arrangements provide a robust mechanism for overseeing the multi-agency response to children at risk of child sexual exploitation (CSE) in Stockton-on-Tees.

Detail

1. The Tees VEMT Strategic Group, which is a sub group of the four LSCBs, is responsible for developing and overseeing the CSE strategy and action plan.
2. The Stockton-on-Tees LSCB VEMT Sub Group is responsible for monitoring operational arrangements in the borough and the VEMT Practitioners’ Group (VPG) is the forum established to enable regular and timely sharing of information in relation to individual children and young people considered to be at risk.
3. A revised referral pathway and risk assessment tool have been developed in order to provide a consistent response to children at risk of CSE across Tees.
4. Regular audits are undertaken to monitor the standard and consistency of practice and identify any areas for improvement. This is reported to SLSCB. To date the audits have shown some variability in practice, although this is improving (the last set of audits showed over 60% were Good).
5. A high level update is reported into Cabinet on a quarterly basis in order to ensure senior officers and elected members are appropriately informed about

6. Those at risk of sexual exploitation or who are known to be being exploited

SMcL

CSE activity within the borough.

6. The VEMT arrangements have been extended to include care leavers in order to take account of their increased vulnerability.
7. A specialist CSE service is commissioned through Barnardo's Against Child Exploitation (ACE) project in order to provide a service to children most at risk and victims of CSE.
8. Multi agency training on CSE is provided to all LSCB member agencies and all Council staff undertake a safeguarding induction which includes CSE.
9. Training has been provided to education settings via the Safeguarding Forum and regular briefings are included in bulletins, including advice on practical resources.
10. The CYP Select Committee undertook a task and finish review of CSE involving all LSCB agencies which has resulted in an action plan which is currently being implemented.
11. SLSCB has identified the voice of the child as a particular theme for further development in order to continue to promote a culture of listening to children and young people.

Supporting documents

1. VEMT terms of reference.
2. Tees CSE strategy and action plan.
3. Scrutiny Review of CSE report and implementation plan.
4. Case file audit reports to SLSCB.
5. Children's social care activity and performance reports to Cabinet.

Performance / activity data

1. Tees Strategic VEMT Group performance and activity data.
2. Local performance and activity data.

7. Girls at risk of or who are known to have suffered female genital mutilation	SMcL
<p>Inspectors should always report the key strengths and weaknesses in relation to the issues outlined in this column</p>	
<ul style="list-style-type: none"> ■ how effectively the local authority, with other agencies, identifies girls (including unborn girls) at risk of or who have suffered FGM and how effectively the girls are protected ■ how effectively the Local Safeguarding Children Board (LSCB) monitors the effectiveness of practice in this area and where appropriate holds other agencies to account. 	
<p>Our assessment (summary and detail)</p>	
<p>Summary statement Children’s Social Care have not received any referrals expressing concerns in relation to FGM in the last two years. There is no local intelligence to indicate that this is happening locally at this time. Procedures are in place and multi-agency training is provided to ensure that staff are able to recognise and respond appropriately should such concerns arise.</p>	
<p>Detail</p> <ol style="list-style-type: none"> 1. New Tees Procedures in place. 2. Multi agency training provided. 	
<p>Supporting documents</p>	
<p>Performance / activity data</p>	

8. Children who are looked after and are living outside of the local authority area

SMcL

Inspectors should always report the key strengths and weaknesses in relation to the issues outlined in this column

- the experiences and progress of children looked after who live out of area, including choice of placement, support from social workers, access to timely support and services, and the effectiveness and impact of the IRO service.
- whether children living out of the area have the same opportunities as all other children looked after (for example, involvement with children in care panel, access to leisure activities and attendance at celebration events).

Our assessment (summary and detail)

Summary statement

Arrangements for maintaining contact with and supporting children placed out of area are good, and the quality of provision is monitored robustly. There is a contract framework in place with Independent Fostering Agencies in the region which supports the council in being able to offer placement choice . Access to some health services has not always been timely and further work is needed in conjunction with partners to improve service pathways.

Detail

1. There are robust monitoring and scrutiny processes in place for residential placements. Since October 2014 there has been a designated worker within Resource Team to coordinate and monitor external residential placements. The worker has relevant experience of managing a residential home and has enabled the monitoring of placements to be more in depth, regular and consistent in their methodology.
2. All external placements, including the residential element of specialist residential schools, respite placements, and the joint venture partnership with Spark of Genius are subject to twice yearly monitoring visits.
3. The Resource Team also supports children’s social workers in collating and monitoring the following:
 - Location Risk assessments
 - Ofsted inspections, /Ofsted notifiable events
 - Independent monthly monitoring reports
 - Managers monitoring reports
 - Statement of purpose
 - Restraint records/missing information.
4. An example of improvement made as a result of monitoring visits is in relation to complaints procedures. It was identified that some children were not aware of the complaints procedure for the home they were living in. As a result, the Resource Team has requested that time is spent with the young person outlining the process for complaints. The Team has liaised with individual workers to ensure this has been completed and this is then followed up at

8. Children who are looked after and are living outside of the local authority area

SMcL

monitoring visits.

5. All new residential placements are sourced by the Resource Team. Placements are only made with providers who have been graded as Good or Outstanding in their most recent Ofsted inspection. Wherever possible placements are made with providers known to the authority where there is knowledge of the ethos and quality of care provided. If a provision is unknown to the authority, other local authorities using that provision are contacted, before a decision is made to place a young person except in an emergency placement.
6. A process and procedure have been developed for consultation with the 'home' local authority when children are to be placed outside of the borough
7. The Corporate Director Children Education and Social Care approves funding for all placements outside the borough in relation to Looked after Children requiring a residential placement and receives information in respect of the child and young person in this process. These placements are reviewed within the Children's Multi-Agency Panel. Any placements outside the authority made with Independent Fostering Agencies are approved by the Head of Children and Young People Services in the same way.
8. Visits to children in external Fostering placements are made by the Children's Rights Officer and they offer the young person and opportunity to be seen alone and feedback any worries or concerns they have. The Resource Team continues to undertake monitoring visits to children in external residential placements and these visits are an added assurance that children are being appropriately safeguarded.
9. Meeting the health needs of children placed out of borough in a timely manner has been a concern due to the re-charge policy. Children placed in long term provision, where we have previously paid for health assessments, tend to be responded to in a more timely way; however, there have been significant delays where a new placement is made or where an authority has begun to charge. This is being addressed by the Clinical Commissioning Group who have put pathways in place but the process continues to be lengthy.
10. Work is being progressed also to improve the pathway for access to CAMHS and other therapeutic services for those placed out of area.
11. Children living out of the area are invited to and supported to attend the meetings of the Lets Take Action Group (LTAG – our Children in Care Council) and to celebration and achievement events.
12. Children living out of the area are supported in the same way as children living in the area to access leisure and cultural activities and there is a corporate fund which can be accessed in order to facilitate such activities.
13. School transport arrangements (details to be added).

8. Children who are looked after and are living outside of the local authority area

SMcL

14. Use of escalation procedures – example where info was not being provided by a school in another LA in the region; this was escalated to DCS who contacted DCS in the other LA.

Supporting documents

1. SLSCB Assurance Report on Looked after Children Placed out of Area 2014 / 2015
2. Records of Monitoring Visits?

Performance / activity data

9. Achieving permanence

SMcL / MG / MW

Inspectors should always report the key strengths and weaknesses in relation to the issues outlined in this column

- the extent to which all children and young people are helped to achieve permanence (including long term fostering and SGOs where appropriate) without delay.
- how well children, families and foster carers are supported where the plan is for the child to return home.
- whether there is an effective permanence plan in place for all children looked after by the time of their second review
- the rigour of tracking permanence plans for children.
- the quality and effectiveness of family-finding
- the quality and effectiveness of matching
- whether support is effective and provided for as long as it is needed
- the effectiveness of the independent reviewing officer’s role in overseeing plans.

Our assessment (summary and detail)

Summary statement

All permanence options are considered for children including adoption, long term fostering and special guardianship, in line with our permanence and kinship care policy. The PLO panel scrutinises and tracks all permanence plans. The majority of care proceedings are concluded within 26 weeks. There have been some delays in securing adoptive placements but the reasons behind all delays are monitored and scrutinised by the Children’s Social Care Performance Clinic.

Detail

1. A range of permanence options are used, with data reported on a monthly basis to the CYP Social Care Performance Clinic.
2. There are some delays in the adoption family finding process, for reasons which are well understood but outcomes remain good and there are very few placement breakdowns.
3. Family finding and matching in both adoption and fostering cases is based on sound principles with some innovative practice and aims to be inclusive of the child, for example using a DVD for a child to ask questions of potential carers, and for carers to respond, as a way of communicating without meeting. Adoption family finding includes all methods such as referrals to adoption link, adoption register and profile information circulated nationally and use of adoption activity days. Practice also includes an ‘adoption play day’ approach, which involves prospective adopters meeting children in a community setting in a play activity so that a realistic view of interaction and ‘chemistry’ can be observed.
4. Long term fostering plans are presented to Scrutiny Panel.

9. Achieving permanence

SMcL / MG / MW

- 5. We need to develop our tracking of permanence plans so that we have better information in relation to outcomes.
- 6. Options for the provision of therapeutic support need to be developed.
- 7. Children awaiting permanence are regularly monitored to avoid unnecessary delay.

Supporting documents

Performance / activity data

10. Educational progress of looked after children	DMcC
<p>Inspectors should always report the key strengths and weaknesses in relation to the issues outlined in this column</p>	
<ul style="list-style-type: none"> ■ the educational progress of children looked after, including the extent to which the attainment gap between looked after children and their peers is narrowing. ■ the effectiveness of multi-agency support, to help looked after children achieve at school, including the quality and impact of personal education plans, and whether they are disproportionately excluded. ■ whether looked after children are helped to remain in their current school or whether an appropriate school is found quickly when they become looked after or change placement ■ the effectiveness of the support provided by the virtual school and its head teacher. ■ the effectiveness of support to young people to achieve successful transitions into higher and further education, training and employment. ■ the effectiveness of the IRO in reviewing educational progress. ■ how ambitious corporate parents are for children and young people’s educational progress ■ how well pupil premium funding is targeted to help looked after children achieve well and in accordance with the grant conditions 	
<p>Our assessment (summary and detail)</p>	
<p>Summary statement</p> <p>Allowing for the small cohort of pupils each year, and the resultant fluctuations in performance, the overall position following the 2015 results is an encouraging picture. Progress made by pupils in EYFS and KS1 was good; KS2 attainment levels were maintained at good levels compared to last national LAC benchmarks; and particularly good progress was made at KS4. Good progress is being made in the quality of PEPs; there is a clear focus on extending this work to improve support in early years and post-16 settings.</p>	
<p>Detail</p> <ol style="list-style-type: none"> 1. Good progress has been made in tracking and monitoring arrangements – for example, capacity for monitoring Out of Borough pupils has been increased to ensure we have timely and good quality information from all schools regarding pupil’s progress. 2. There has been a significant focus on developing PEPS, and on rigorous quality assurance of PEPs. Evidence from monitoring is showing a good improvement trend in the use and quality of PEPs. There is a focus now on improving arrangements for monitoring children in Early Years provision, and young people in post-16 provision (e.g work on development of a bespoke ‘PEP’ tailored to needs of students in post 16 settings). 3. Services work together effectively to keep children in school, and absence and exclusion rates are very low, comparing favourably with national averages. We operate a transport policy to enable children to maintain stability of school placement when required due to any placement moves. 	

10. Educational progress of looked after children

DMcC

4. Schools' use of pupil premium is an area of continuing focus and challenge. Evidence of challenge / improvement?
5. The Virtual School Head Teacher reports regularly to MALAP and to CYPMT, where progress and performance is challenged. The VSHT annual report gives good analysis of achievement, progress and identification of areas for improvement.

Supporting documents

1. Annual Report of Virtual School H/T
2. Report to Cabinet October 2015 on 2014-15 Performance of vulnerable pupils
3. Reports to MALAP and CYPMT on use and quality of PEPs

Performance / activity data

Data as presented and analysed in above reports.

11. Rights and entitlements as a looked after child or care leaver

SMcL

Inspectors should always report the key strengths and weaknesses in relation to the issues outlined in this column

- the extent to which children looked after and care leavers are aware of, and receive, their rights and entitlements
- how well children and young people are enabled to negotiate how and when they receive their entitlements.

Our assessment (summary and detail)

Summary statement

Looked after children and care leavers are aware of and in receipt of their entitlements. Information is provided to them directly through information packs and via the Children’s Rights and Participation Officer and Let’s Take Action Group.

Young people are consulted about how they wish to receive these entitlements and their views are recorded in care plans and pathway plans.

All looked after children aged 16 are allocated a Personal Adviser who works in tandem with the Social Worker.

Detail

1. Children’s Rights and Participation Officer available to all looked after children on an individual or group basis.
2. Access to independent advocacy service via NYAS.
3. Care Leavers exit surveys in place.
4. All Care Leavers have an allocated Personal Adviser.
5. Pathway Plans are independently reviewed.
6. Financial assistance provided on a flexible basis.
7. Majority of Care Leavers are in suitable accommodation.
8. Care Leavers are tracked and supported to be in EET.
9. Currently developing children’s guides for younger age range in variety of formats.
10. Details of links with DWP to be added.

Supporting documents

1. LAC Strategy (including Leaving Care Strategy).
2. Care Leavers Policy.
3. EET tracker.
4. Pathway plan.
5. Care Leaver information pack.

Performance / activity data

12. Those waiting for adoption and those in need of adoption support services

SMcL

Inspectors should always report the key strengths and weaknesses in relation to the issues outlined in this column

- the number of children waiting for adoption, the length of time they wait and the number of adopters approved.
- performance against the scorecard, including trajectory.
- evaluate the recruitment, assessment and approval process.
- the effectiveness of the agency decision maker with regard to the quality and timeliness of assessments and the decision to place brothers and sisters together or apart and maintain contact.
- the extent to which the adoption agency uses nationally available systems to maintain the interest of prospective adopters post approval and prior to children being matched
- the effectiveness of the arrangements for identifying children in need of adoption support services, the number of children who receive adoption support and the effectiveness of intervention.
- whether a sufficient range of support to meet need has been commissioned, including post adoption and therapeutic support where appropriate.

Our assessment (summary and detail)

Summary statement

In line with the recent trend nationally and regionally, the number of children waiting for adoption has reduced. Although some children wait longer than the national average there are specific reasons for this which are understood on a case by case basis, and evidence indicates good outcomes for children, with very few breakdowns. We have improved the rate of approving prospective adopters and currently have a number available for placements. Provision of adoption support services is supported by a contract with After Adoption.

The Agency Decision Maker makes timely decisions.

Detail

1. Adoption timescales have improved (over the three year rolling average) although performance in relation to the A2 indicator remains below average. The reasons for all delays are monitored and scrutinised through the Children's Social Care Performance Clinic.
2. We saw a significant increase in number of adoptions during 2014-15 but this is reducing during 2015-16.
3. 47% of children adopted in 2014/15 were matched within the government set timescale. 53% of children were placed outside this timescale. Typically this cohort tended to be older children or sibling groups and were placed on an interagency basis.
4. Recruitment of prospective adopters increased by 80% in year 2014/15 and as a result there are a number of prospective adopters now waiting for a match.
5. The stage 1 and stage 2 approval processes is well embedded. Timescales against stage 1 requires improvement but there has been good progress in relation to stage 2.
6. Family finding for children and prospective adopters uses all national systems available, includes the national adoption register, adoption link, regional

12. Those waiting for adoption and those in need of adoption support services

SMcL

exchange meetings, adoption activity days, national profile sharing and 'play day' meetings with prospective adopters.

7. Adoption support assessment numbers are low and further work is required to identify where these assessments should sit. The authority have made use of the Adoption Support Fund.
 8. Provision of adoption support services is supported by a contract with After Adoption.
 9. Stockton is part of the Tees valley combined adoption service in line with the Regional Adoption Initiative.
 10. Key issues include family finding and court decisions (three ADM decisions have been overturned this year). Refer to detail given in report to CYP Select Committee, Feb 2015?
 11. Support services are an area for development.
- Review bullet points at top of this section – not covered all these areas?

Supporting documents

1. Report to CYP Select Committee, Feb 2015 (in relation to national indicator A2 and family finding / matching issues).

Performance / activity data

1. National adoption scorecard data
2. QEC

13. The effectiveness of the local authority in meeting the 'Prevent Duty' in relation to safeguarding children (where the local authority has been identified as a Home Office priority area or the lines of enquiry have identified particular concerns) **MG**

Inspectors should always report the key strengths and weaknesses in relation to the issues outlined in this column

- The effectiveness of the local authority in meeting the 'Prevent Duty' and channel duties in relation to safeguarding children

Our assessment (summary and detail)

Summary statement

Detail

1. Detail included in report to SLSCB 19th Nov, including positive work being done with schools.

Supporting documents

Performance / activity data

14. Recruitment, retention and sufficiency in respect of foster carers

SMcL

Inspectors should always report the key strengths and weaknesses in relation to the issues outlined in this column

- the effectiveness of action taken by the local authority to recruit and retain a sufficient number of foster carers with the right skills to ensure a sufficient range of local placements to meet the needs of children. This should include the trajectory of recruitment and retention of foster carers.
- the effectiveness of the response to allegations against foster carers, including how well the local authority protects and supports the children, young people and carers involved, and ensures that decisions are focused on children’s needs.
- the effectiveness of support for and oversight of foster carers
- the extent to which information is shared with foster families prior to a child coming to live with them.
- timeliness and quality of matching, including the placement of brothers and sisters together wherever possible.
- the effectiveness of the ‘foster to adopt’ initiative.

Our assessment (summary and detail)

Summary statement

A successful recruitment campaign has increased our number of foster carers, providing improved placement choice. The recent restructuring within Children’s Services has increased capacity within the Child Placement Team enabling a greater focus on support for and oversight of foster carers. We aim to build on this positive progress by focusing on gaps in provision for specific needs, and enhancing our training and support programme to improve further the balance of our own provision compared to independent providers.

Detail

1. We have successfully implemented a recruitment campaign which has produced more enquiries than ever before and there has been a significant increase in the number of foster carers approved. The approval rate increased by 50% in year 2014/15 compared to the previous year.. Retention rates remain good and there is a loyal foster care resource base This is evidenced by only 6 carers leaving the service in 2014/15 and all 6 left either for personal reasons or retirement. There are currently more vacancies in foster care placements than ever before. The use of Independent providers has decreased.
2. The Marketing Officer post was initially introduced on an ‘invest to save’ basis and is now permanent .
3. The recruitment campaign is now focusing on specific gaps in provision, including teenagers, sibling groups, parent and child placements and placements that can manage young people who are considered to be at risk of CSE. Foster carers feel well supported by their supervising Social Worker and have good access to training (This is evidenced via the annual foster care reviews and feedback from the carers).
4. We have reviewed areas where we can improve the quality of our support for foster care placements. The provision of information prior to placement is an area where practice has been variable and is the subject of further work.

14. Recruitment, retention and sufficiency in respect of foster carers

SMcL

5. All foster carers are offered independent advice and support when allegations have been made against them. Lado is involved in all cases where there is an allegation made against the carer
6. All requests for a placement are made using a referral form which identifies child's needs and this is used as the basis for matching in emergency situations,. Where a need isn't matched then support/training is offered to the placement. Long term/planned matches involves meetings between carers and social workers to exchange information. Children are involved in the matching process. Children are encouraged to take part and are offered opportunities to communicate either face to face with prospective foster carers or via DVD where they are asking the potential long term carers questions
7. The increased investment in the Child Placement Team provides capacity to respond to enquiries and provide timely preparation training groups.
8. The foster to adopt recruitment initiative has not been successful despite efforts to recruit people interested in offering early permanence placements.
9. No children have been identified where early permanence plans / foster to adopt placement would suit their situation and this area remains under developed in Stockton.

Supporting documents

1. Annual child placement report.
2. End of placement evaluations.

Performance / activity data

1. Numbers of foster carers/recruitment activity.
2. Data about numbers of in house IFA placements (e.g as included in monthly update to CYP Performance Clinic).

15. The local authority's knowledge about domestic abuse, parental substance misuse and the mental ill health of parents or carers SMcL / EC

Inspectors should always report the key strengths and weaknesses in relation to the issues outlined in this column

- The prevalence of children supported by a child protection plan or child in need plan where domestic abuse, parental substance misuse and/or mental ill health are a factor. Does the local authority have sufficient knowledge about these children?
- The effectiveness of the local authority's and LSCB's work, including work with partners, on the experiences and progress of these children and young people.

Our assessment (summary and detail)

Summary statement

Detail

1. See also section 5 – analysis of categories of abuse / risk factors identified in assessment.
2. The approach to domestic abuse is an example of the process undertaken for needs assessment and service review: at the point of review the domestic abuse service was commissioned by four different departments within the Authority, as well as a social housing provider, Tristar. Consultation took place with service users (victims, perpetrators and children affected by domestic abuse) and stakeholders who that interacted with the service, such as children's social workers and healthcare staff, and a review of the evidence base relating to interventions took place, eg, NICE guidance. All of this information resulted in a revised service specification which integrated all of the different departmental elements of commissioning into one streamlined process. A service was then tendered with the new specification and providers were assessed on a range of areas including quality of service provision and safeguarding. Monthly contract monitoring takes place with the service provider.
3. Wider needs assessment work was taking place at the same time as the service review to inform not only future service provision but the wider strategic approach that is required to address the issues associated with domestic abuse. Information used to inform this included a review of the national guidance and good practice documentation, a scoping of activities that were outside of the commissioned service provision, consultation with residents of the borough, consultation with stakeholders, and the collation of data regarding domestic abuse, such as, police data, repeat incidence rates, accident and emergency attendances, etc. Initiatives were progressed as a consequence of this which included domestic abuse link workers based within social care and the local hospital and developments regarding early intervention such as ensuring specific staff groups involved in early intervention are trained in identification and response to domestic abuse, eg, health visitors. Data regarding domestic abuse is collated on a six monthly bases and presented to

15. The local authority's knowledge about domestic abuse, parental substance misuse and the mental ill health of parents or carers **SMcL / EC**

relevant Partnership meetings.

Supporting documents

1. SLSCB Performance Report with analysis of categories of abuse / risk factors identified in assessment.
2. Domestic Abuse Strategy

Performance / activity data

1. Data included in performance reports to relevant Partnership meetings.

Discussion with SLSCB needed also.

16. How well the leaders and managers know the strengths and weaknesses of their services

JH / SW

Inspectors should always report the key strengths and weaknesses in relation to the issues outlined in this column

- How well senior leaders, including the DCS and lead member discharge their statutory responsibilities
- How well the local authority understands its local community and the needs of specific communities.
- Whether the local authority effectively identifies and addresses areas for development, deficiencies or new demands.
- How well the local authority understands the strengths and weaknesses of frontline practice and how shortfalls are identified and addressed.

Our assessment (summary and detail)

Summary statement

There is a good level of scrutiny and oversight of services by senior leaders, with regular reporting to Cabinet and Scrutiny Committees on performance. The DCS and lead member are proactive and visible in their work to understand front line practice and respond to concerns. The recent restructuring within Children’s services reflects the commitment of corporate leaders to address capacity issues and reduce risks to vulnerable children.

Detail

1. Improving levels of scrutiny and oversight.
2. Performance Framework has developed to support more effective challenge.
3. CMT Improvement Clinic sessions, reviewing and challenging performance on key areas.
4. Quarterly Social Care Activity & Performance report to Cabinet.
5. Quarterly performance reports to CYP Seelct Committee, including in-depth discussion of priority areas e.g adoption; cp plans; CSE (with a subsequent Task & Finish Scrutiny Review).
6. Strong corporate support via Big Ticket / Children’s Board.
7. Openness to external challenge e.g Peer Review.
8. Mandatory elements (LAC and Safeguarding) in Member induction programme.
9. Scrutiny Member visits to services are being planned.
10. DCS / DASS Assurance Statement
11. Current corporate senior management review, including separation of DCS / DASS role to create capacity for driving key improvement projects.

Have we shown enough progress, quickly enough, though, since last inspection?

Supporting documents

1. CMT Improvement Clinic reports
2. Cabinet reports on CYP Social Care Activity & Performance

16. How well the leaders and managers know the strengths and weaknesses of their services

JH / SW

- 3. Children and Young People Select Committee – Quarterly Performance Reports
- 4. Children’s Board minutes / agendas
- 5. Shaping Brighter Future Cabinet report

Performance / activity data

17. How effective leaders are at creating the right environment for social work to flourish (including management oversight, guidance and direction) **SMcL**

Inspectors should always report the key strengths and weaknesses in relation to the issues outlined in this column

- the adequacy of the social work workforce in respect of vacancies, experience, training and development.
- whether practice is informed by feedback, research and intelligence about the quality of services.
- Is learning from Serious Case Reviews (SCRs) effective
- how the experiences of children and families are used to inform practice.
- how effectively supervision is used to quality assure practice and oversee decision making
- whether social workers have manageable caseloads

Our assessment (summary and detail)

Summary statement

The Council places a high value on recruiting, retaining and developing a positive and committed social work workforce, and has introduced a wide range of measures in order to achieve this. As a result, the social care workforce has been relatively stable and staff survey results have been positive. Investment in additional social care staffing capacity has strengthened management oversight, and will help caseloads to be maintained at manageable levels.

Detail

1. Children and Family Social Work Board established to ensure ongoing dialogue between Cabinet Member/Corporate Director/Head of Service and social work workforce.
2. Children’s Review has resulted in additional investment in children’s social care.
3. Regular activity and performance reports to Cabinet to ensure senior officers and elected members are aware of key developments within children’s social care.
4. Visits by Cabinet Member and members of CYP Select Committee to key services.
5. Introduction of flexible working to support social workers maintain work/life balance.
6. Provision of IT equipment to support home working.
7. Provision of personal alarms to support health and safety of workforce.
8. Effective caseload management system in place.
9. Employee survey and social worker survey indicate high levels of satisfaction across workforce.
10. ‘Golden hellos’ offered for hard to fill posts.
11. Consideration of retention payment to reward staff loyalty.
12. Introduction of annual team health checks to engage staff in performance agenda and set clear and shared goals for improvement at team health check.

17. How effective leaders are at creating the right environment for social work to flourish (including management oversight, guidance and direction) **SMcL**

13. Regular case file audits by senior officers and feedback provided to improve services to children and families and further develop social work practice.
14. Exit interviews and complaint reports used to improve services and further develop practice.
15. Development of supervision procedures with particular emphasis on reflection and challenge.
16. Development of training to support professional development.
17. Although the workforce has been relatively stable over the 2014-15 period, we are now experiencing some challenges in the recruitment and retention of experienced staff (including agency staff).

Supporting documents

1. CFSWB report, terms of reference and minutes.
2. CSC activity and performance reports to Cabinet.
3. Caseload management system.
4. Employee/social work survey.
5. Team health check template.
6. Case file audit reports.
7. Exit interview report to CYPMT.

Performance / activity data

1. Employee Survey results.
2. Benchmarking data on vacancy and turnover rates.

18. The impact of commissioning and sufficiency arrangements		MG / MW / SMcL / EC
Inspectors should always report the key strengths and weaknesses in relation to the issues outlined in this column		
<ul style="list-style-type: none"> ■ describe how effectively the council is meeting its sufficiency duty.³ ■ the impact of commissioning across early help, children in need, children in need of protection, looked after children and care leavers. ■ how effectively commissioning is informed by the JSNA. ■ do commissioned placements ensure that the individual needs of children are effectively met by the provider ■ Where social care functions have been delegated <ul style="list-style-type: none"> –do third party providers offer services which meet the needs of children who are in need of help and protection, and/or in their care. –the effectiveness of contract management arrangements between a local authority and a third party provider to which local authority functions have been delegated. 		
Our assessment (summary and detail)		
<p>Summary statement</p> <p>A proactive response is being made to ensuring sufficient local provision for LAC, including an innovative Joint Venture for development of children’s homes. A range of services are commissioned across early help, children in need, child protection and LAC. The early help strategy sets out a programme to review provision and ensure services are coordinated and targeted effectively. The Children and Young People’s Joint Commissioning Group draws on the JSNA and other sources of data to help identify priorities and inform commissioning decisions. It is accountable through the Health and Wellbeing Board and also reports to the Children and Young People’s Partnership. For LAC there is a good level of scrutiny of providers prior to placements being made</p>		
<p>Detail</p> <ol style="list-style-type: none"> 1. Development of Spark of Genius joint venture to enable more children to be placed in good quality provision, closer to home. 2. Arrangements for the commissioning and contract monitoring of placements have been consolidated within the Public Health team. 3. We are developing plans for commissioning additional supported living provision for care leavers. 4. See section 8 of this document for details regarding commissioning of placements for LAC out of the area. 		

³ Sufficiency: statutory guidance on securing sufficient accommodation for looked after children, Department for Children, Schools and Families, 2010; www.gov.uk/government/publications/securing-sufficient-accommodation-for-looked-after-children

18. The impact of commissioning and sufficiency arrangements

MG / MW / SMcL / EC

5. The Council and its partners are proactive in the use of data and performance to evaluate the effectiveness of provision. The JSNA is widely used as the basis for the consideration of need. Specific additional work is commissioned to inform the commissioning process. A comprehensive approach to information gathering takes place to inform needs assessments, this approach includes reviewing commissioned service provision, including access to services, client outcomes and client consultation, data regarding prevalence within the population and populations most at risk is utilised, as is data from a wide range of sources. Three specific examples are highlighted:
 - Child and Adolescent Mental Health / emotional well being – early help, children in need of protection
 - School nursing – prevention and early help
 - Fairer Start – prevention and early help
6. **CAMHS.** Partners undertook a Mental Health Needs Assessment to respond to the changing commissioning landscape and develop preparatory analysis to inform the CAMHS transformation Plan. This needs assessment was completed in May 2015 and focused on determining the level of need within 0-18 year olds in Stockton-On-Tees; mapping existing mental health services for Stockton – statutory and non-statutory ; establishing the views on current mental health support in Stockton from the services themselves and current service users; understanding how far current service provision meets the needs of children and young people in terms of mental health and wellbeing and identifying how the transformation plan could fill gaps in provision and lead to new models of delivery. This is now being taken forward in the delivery plan for 2015/16.
7. **School nursing.** In April 2015 the newly commissioned Children and Young People's Public Health School nurse service began delivery of its service model. The model was based on national good practice frameworks to deliver high quality early intervention services to children and young people across the borough, with the service leading, coordination and delivering the Healthy Child Programme for 5-16 years olds. The service model was developed in response to consultation with parents / carers, children and young people who told us that they needed a more visible and accessible service. Service provision is now available to children and young people both during term time and in school holidays, every secondary school and its cluster of primary schools has access to a named school nurse, parents / carers can access talk to their school nurse about health concerns they have about their child at primary school based drop ins and young people can directly talk to their school nurse about their health at drop ins in their school.
8. The service is working on developing health profiles to be able to target their service delivery to the health needs of areas of the borough, and also in supporting schools to further understand and respond to their population health needs. The service is continuing to develop methods to be more accessible to young people including young people focused information materials
9. **Fairer Start.** 'A Fairer Start' is a three year pilot funded by SBC and Hartlepool and Stockton on Tees CCG which focuses on improving three key outcomes of social, emotional and cognitive development, speech and language development and nutrition for 0-3 year olds living in Stockton Town Centre ward. The overarching outcome is for all children to be school ready by the age of 5. Through ongoing consultation with the local community, A Fairer Start aims to proactively challenge, influence and support stakeholders to:

18. The impact of commissioning and sufficiency arrangements

MG / MW / SMcL / EC

- Respond to the needs and experiences of children, families and communities
- Support work and communicate with families in a way that is relevant to their individual needs
- Remove barriers to improving services and strengthen relationships between practitioners across all sectors
- Create a sense of belonging to the 'A Fairer Start' town amongst children, families, communities, professionals and local organisations and businesses.
- Support the development of community champions to empower families, foster community spirit and raise awareness of available services.
- Create an environment where families are comfortable in their decisions and can build trusting relationships with professionals and their community.
- Provide opportunities for volunteers and professionals to develop skills and knowledge to ensure sharing of consistent messages.

10. 32 community champions have been recruited to date to engage and support families and to promote A Fairer Start to local organisations and businesses. 22 local businesses and organisations have been contacted to become 'A Fairer Start' businesses with many offering support for the programme and discounts and incentives for volunteers and families.

11. Work to further develop the skills of the workforce and promote cultural change is ongoing. A framework of competencies has been agreed and a workforce strategy and programme can now be developed for roll out during 2016-17.

Supporting documents

1. LAC & Care Leaver Strategy (covers Sufficiency duty).
2. SLSCB Assurance Report on Looked after Children Placed out of Area 2014 / 2015
3. Early Help Strategy
4. CAMHS Delivery Plan 2015/16

Performance / activity data