Joint area review
Southend-on-Sea Children’s Services Authority Area

Review of services for children and young people

Audit Commission
Healthcare Commission
HM Crown Prosecution Service Inspectorate
HM Inspectorate of Constabulary
HM Inspectorate of Prisons
HM Inspectorate of Probation
Ofsted

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Introduction

1. The most recent Annual Performance Assessment for Southend-on-sea judged the council’s children’s services as adequate, and its capacity to improve as good.

2. This report assesses the contribution of local services in ensuring that children and young people:
   - at risk, or requiring safeguarding are effectively cared for
   - who are looked after achieve the best possible outcomes
   - with learning difficulties and/or disabilities achieve the best possible outcomes.

3. The following investigations were also carried out:
   - an investigation into the contribution of services to prevent substance misuse and improving outcomes for those currently misusing.
   - an investigation into the impact of local services in narrowing the gap between the performance of the least effective and the most effective schools, colleges and work based education providers
   - an investigation into the effectiveness of services for young carers.

Context

4. Southend is a seaside unitary authority that was created from the former district council in 1998. It has a relatively small population of approximately 160,000, of whom 39,162 are aged under 20. Geographically the borough covers a relatively small area, which is largely urban with a smaller than average amount of green spaces. The majority of the population is White British with only 7% from Black and minority ethnic groups. Of this group 13.6% are of school age with children and young people of Black African, Pakistani, Indian and Eastern European heritage making up the largest numbers.

5. Southend is included within the ‘Thames Gateway’, a national, regional and European priority area for regeneration and growth. There are many affluent areas in Southend, but in four wards there are significant levels of social and economic deprivation. Unemployment, at 5.7%, is above the national average of 5.3%, gross weekly income is above average, and about 35% of those in employment commute out of the borough to work, many to London.

6. Pre-16 education provision comprises:
• 66 private or voluntary early years settings and five children’s centres with six more planned
• seven independent schools offering funded nursery education provision
• 167 childminders
• 37 primary schools which include 13 nursery units
• 12 secondary schools, four of which are fully selective
• five special schools.

7. Post-16 education and training is provided by:

• 12 sixth forms
• one college
• seven work-based learning providers.

8. Entry to Employment (E2E) provision is managed by the NOVA partnership, a local consortium controlling around 961 places.

9. Adult and community learning, including family learning is provided by Southend Adult Community College.

10. Primary care is provided by South East Essex Trust and acute hospital services are provided by Southend University Foundation Trust.

11. Mental health services are provided by South Essex Partnership Foundation Trust.

12. Children’s social care services are provided through: 156 foster carers; one family centre; six field social work teams. There are no children’s residential care homes managed by the council, secure children’s homes or young offender institutions in the borough.

**Main Findings**

13. The main findings of this joint area review are as follows:

- a good range of positive action has been taken by partners to improve the services to safeguard children and these are adequate. Some aspects are well-established and effective, while improvements to others are more recent and although there are indications of good early impact they will require more work to fully embed and ensure improvements are sustained

- the impact of services for looked after children and young people is adequate and improving. However, a number of improvements are relatively recent and are being embedded into all aspects of service provision
- There are variations in the quality of services for children and young people with learning difficulties and/or disabilities which are adequate overall. Some receive very good support, but significant groups do not receive good enough services.

- There is an appropriate range of collaborative initiatives to raise awareness of substance misuse which effectively reach children and young people in a variety of settings across Southend borough. However, the partnership does not fully identify needs, or capture outcomes across the range and diversity of provision to accurately assess the impact of all this activity.

- The council and its partners have made good progress in narrowing the gap between the most effective and least effective schools and improving the outcomes for pupils and students. The breadth and quality of provision in college and work-based learning have improved and school improvement services are highly effective.

- The local authority and its partners are fully committed to supporting young carers and have provided good support through local projects for a number of years. However, this provision is only reaching a limited proportion of young carers and current systems and provision are not yet identifying all young carers who could benefit from support.

- Ambitions and priorities for children and young people are based on consultation and needs analysis. The delivery of the priorities is underpinned by comprehensive and generally robust strategies and plans. The Council and its partners are effectively extending their capacity to deliver service improvements. However, the approach of the partnership is not sufficiently inclusive for some hard to reach groups, and children and young people should be further engaged in service delivery. Effective performance management and systems to deliver value for money across the partnership are not yet embedded.
Grades
4: outstanding; 3: good; 2: adequate; 1: inadequate

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<td>Safeguarding</td>
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<td>Looked after children</td>
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<tr>
<td>Learning difficulties and/ or disabilities</td>
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<td>Service management</td>
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<td>Capacity to improve</td>
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Recommendations

For immediate action

The local partnership should:

- ensure that an appropriate way is found to successfully disseminate the findings of this report to children and young people in the area
- ensure that the local community is aware of and supports the vision and main priorities for children and young people
- review provision for out of hours and weekend cover to ensure appropriate services are available at all times to young people with substance misuse needs.

The council should:

- engage councillors more extensively, for example in corporate parenting.

For action over the next six months

The local partnership should:

- ensure that comprehensive and accessible mental health services are in place for all children and young people
- improve the collation and analysis of data to support forward planning and improve outcomes for children and young people with learning difficulties and/or disabilities
• improve the shortfalls in health, educational psychology, and advocacy services for children and young people with learning difficulties and/or disabilities

• improve education and training opportunities for unaccompanied minors

• ensure that the needs of substance misusers are identified and met

• ensure that future consultation, needs analysis and service development are inclusive, involve young people, and address the needs of minority and vulnerable groups effectively

• improve the consistency of performance management across the partnership.

The council should:

• ensure that recent improvements to initial and core assessments and reviews of looked after children are sustained.

For action in the longer term

The partnership should:

• ensure appropriate mechanisms are in place to identify a greater proportion of young carers and their needs and expand the range of good, accessible and sustainable support for them

• improve attendance in the secondary schools where it has reduced

• improve access to post-16 courses and consistency in the achievements in work-based learning

• ensure that plans and strategies are costed and proposals to embed value for money in the partnership are agreed and delivered.

Equality and diversity

14. The Council and its partners are prioritising the development of equality and diversity, but significant inequalities for children and young people remain across the Borough. The council has achieved level 2 of the equality standard. It has undertaken a range of equality audits and has taken some early action to deal with issues arising from them. An equality survey across the partnership has recently been completed with outcomes informing future planning. Consultation with children and young people and needs analysis is informing the partnership’s vision, objectives and strategic direction for children’s services. The Youth Council endeavours to speak out and act on behalf of all children and young people, but opportunities for some more vulnerable groups to make their views known are more limited. Some vulnerable and
disadvantaged groups are strongly prioritised within the Children and Young People’s Plan, but others less so. The quality of services for children and young people with learning difficulties and/or disabilities is variable. The gap in the attainment of children and young people in the borough who attend the least effective and most effective schools is being reduced. However, educational opportunities for unaccompanied minors when they become care leavers are unsatisfactory.

**Safeguarding**

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15. **The contribution of local services to improving outcomes for children and young people at risk or requiring safeguarding is adequate.**

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<tr>
<th>Major strengths</th>
<th>Important weaknesses</th>
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<tr>
<td>The quality of leadership in social care.</td>
<td>Insufficiently coherent and comprehensive CAMHS service.</td>
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<td>Robust action undertaken by managers in social care.</td>
<td>The rate of teenage pregnancies.</td>
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<td>Effective multi-agency public protection arrangements.</td>
<td>Quality of analysis and individual case planning.</td>
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<td>Action to promote children’s physical health and emotional development.</td>
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<td>Action to reduce offending and anti-social behaviour.</td>
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16. Parents and carers are well informed about risks to children and provided with good advice about safe parenting, child protection and domestic violence. Effective action by partners has significantly reduced the number of children killed or injured on the road over the past four years. Work with schools to address bullying has successfully reduced exclusions and young people report positive improvements.

17. Healthy lifestyles are promoted well with a good range of initiatives. Ofsted reports show schools are very effective in promoting healthy lifestyles. Local targets in relation to the Healthy Schools programme have been met, but the number of schools achieving Healthy Schools status is below national comparators. All schools are involved in the national Physical Education and
School Sport and Club Link strategy. Over 500 school staff have accessed training and 68% of schools have achieved the required standard.

18. The rate of teenage pregnancy is higher than in similar areas, but effective action has led to good reductions at a faster rate than in comparative authorities. However, the reduction is too slow in more deprived parts of Southend.

19. Good support is provided to help children’s emotional development. Southend was one of the pilot boroughs for the national programme to support children’s social and emotional aspects of learning (SEAL). The partnership has rightly recognised that mental health services for children and young people are not currently sufficiently comprehensive and coherent. While some aspects such as the service for those needing treatment in the community are good, the overall service varies in its capacity and quality. For example, arrangements to offer support at an earlier stage and access to 24 hour support are unsatisfactory, and the lack of an integrated pathway through the system means that children do not receive appropriate and flexible support as their needs change. A pilot project to meet the mental health needs of young people with learning difficulties and/or disabilities aged between five and 11 years has been funded by the Department of Health until 2008. The needs of older children in this category are not clearly identified and there is no funding to provide appropriate services. Looked after children have access to a dedicated clinician but the post has been vacant for some time. The council and the primary care trust have jointly funded a child and adolescent mental health service (CAMHS) transformation project which is planned to report very soon. There are no children’s mental health residential units in South Essex and early discussions have begun to consider a possible regional unit.

20. Good progress has been made in developing the range of provision to meet the educational needs of young people not at school. This was an area identified for improvement in the 2006 annual performance assessment. Almost all children in this category are now receiving full-time education and individual students are routinely monitored. The pupil referral unit (PRU) provides prompt places for all those in Years 10 and 11 while permanent education is sought. Access to the PRU for primary aged pupils is more limited. The engagement of secondary schools with re-integration packages is good. A wider range of alternative provision continues to be developed with external providers and these placements are monitored and reviewed. An additional member of staff works to maintain young people’s attendance and to support providers. The Next Steps course for young people who offend and who are out of school is an innovative and effective example of good practice. This is a good collaboration between the youth offending service and the local rugby club, and is being transferred to become part of the overall service managed by the PRU.

21. Effective multi-agency action is reducing anti-social behaviour and offending rates. There is a good range of parenting programmes and individual work with young people. The early intervention team has worked successfully
with families to reduce the number receiving further anti-social behaviour orders (ASBO), and the authority must now refer to the preventive team before an ASBO is made. Of 110 young people identified as at risk of offending who received support and were tracked over the year only six committed an offence. Offending rates are lower than similar authorities and final warnings and convictions of looked after young people have reduced significantly to well below similar authorities.

22. The local safeguarding children board (LSCB) has worked well to develop its safeguarding agenda although the speed of development has been delayed by a major restructuring of the primary care trust, a vacancy for the post of business manager, now appointed, and establishing the roles and the management of some of the sub-groups. These arrangements have now been implemented and health representatives allocated to all the groups. Agencies support the LSCB well, and it is well positioned to drive developments and improvements. During this period the LSCB has ensured that recommendations from serious case reviews have been implemented and has regularly reviewed performance data from partner agencies. Data sets are being usefully refined to enable partners to enhance the quality of their analysis. Formal protocols to share information and to track missing children are sound, but have not been in place long enough to have a measurable impact. A detailed quarterly report to the LSCB on young people who go missing from care or home enables partners to monitor and intervene.

23. Strong leadership within the council has provided good direction, engaged staff well, and driven improvements in social care over the past year. A well-received training programme has helped to develop a more positive approach to multi-agency working. Staffing levels and turnover in social work have been a significant challenge and much needed action to improve recruitment and retention has been successful. Key senior and middle management posts and social work vacancies have been filled during the year, and appointments to most of the few remaining vacancies for frontline staff will be in place in the very near future. The use of agency staff has markedly reduced and a number have taken permanent posts in the department, which reflects the positive changes that have taken place. Social work caseloads remain high and a proposal to establish seven additional posts has been supported by the corporate management team. Staff receive regular supervision and annual appraisals; they spoke positively about the culture of informal support available. Staff were also positive about the vision and the drive provided by senior and middle managers.

24. Good referral and response arrangements protect children most at risk. Over the past two years all those on the child protection register have been allocated a social worker and their cases reviewed on time. Re-registrations on the child protection register have been consistently in line with or better than similar authorities. The number of children on the register has been slightly above comparators and partners have addressed this by appropriately removing those for whom it is no longer necessary.
25. Robust actions, including staff recruitment and more focused systems closely monitored by frontline managers, have led to significant recent improvements in the timeliness of initial and core assessments for children in need. This was an area identified for improvement in the last annual performance assessment in 2006, and reported figures for 2006/07 were well below similar authorities at 46.5% and 41.1% respectively. However, concerted action, which began last year, has improved both the timeliness of assessments and the accuracy of data on the system which had exaggerated the poor picture. Figures provided by the council show that performance is now satisfactory and this is confirmed by partners. Further work is needed to fully embed these improvements. The council has recognised the need to improve the overall quality of analysis, assessment and planning, and mandatory training is in place to address this.

26. The common assessment framework (CAF) has been implemented within the three multi-agency localities and the needs of children and families are being increasingly managed at an earlier and more appropriate level. Good numbers of staff have been trained across the partnership, and the CAF process and assessment form are being increasingly used as agencies become more aware of and familiar with them. However, some agencies find the existing format too lengthy and others continue to use their own forms. A revision is being considered to improve consistency and the overall completion rate.

27. Multi-agency public protection arrangements in Essex are effective in monitoring serious offenders and Southend council engages fully in the relevant forum. Processes are in place across the partnership to ensure that the necessary recruitment checks are carried out for new staff. Evidence gathered during the inspection showed that agencies were completing these checks appropriately. A system is in place in the council to update criminal record bureau checks on staff, and work is in progress to complete this.

28. In summary, a good range of positive action has been taken by partners to improve the services to safeguard children and these are now adequate. Some aspects are well-established and effective while others are more recent, and although they show evidence of good early impact they will require more work to fully embed them. The council is self-aware and has identified areas for development, for example mental health services and the quality of social work analysis, and plans are already in place to address these.

**Looked after children and young people**

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29. **The contribution of local services to improving outcomes for looked after children and young people is adequate.**
The number of looked after children has been reducing at a steady and slow rate, but the overall number remains high and significantly above similar authorities. Good management oversight is now in place to ensure that entry to care is appropriate. This has been achieved by improving the quality of assessments and work with partners to provide family support. Partners are taking appropriate action to meet the needs of children at an earlier stage, including the implementation of the common assessment framework at the beginning of 2007. Placement stability is good and in line with similar authorities and the national average.

The council has high aspirations for looked after children and most indicators are in line with, and some better than, similar authorities. However, evidence collected during the inspection identified a variable level of social work practice and delays in crucial decisions which have resulted in some children remaining at home too long before coming into the care system. Young people who have been looked after for some time report that they have experienced frequent changes of social workers. This has resulted in them being reluctant to engage in social work processes. Good action has been taken by the council to make improvements, with more robust management arrangements beginning to reduce the delays in decision making and to secure the improvements already evident. The percentage of looked after children with an allocated social worker has improved from 77% in 2005/06 to 92% in 2006/07, and figures provided by the council indicate this is now 100%. A good level of advocacy services is provided to children and young people through an independent provider.

The number of the reviews of looked after children that have been held on time have been poor, and partner agencies report that they were sometimes unable to contribute because of late notification. In 2005/06, at 67%, they were below the national average and that of statistical neighbours and they fell to 55% in 2006/07. This low rate of timely reviews is attributed to inadequate staffing levels in social care during this period. Concerted and successful efforts to recruit social care staff have led to a significant reduction in the vacancy rate, which is now good at 7%, with further appointments taking place. Information provided by the council during the inspection indicates a marked
improvement trend in the timeliness of reviews as a consequence, with figures over the last three months, for example, averaging 79%.

33. Good action is taken to provide advice to looked after children and young people about their sexual health by health professionals and about drugs and alcohol prevention through the drugs and alcohol team. The proportion of children and young people who receive a health assessment is very good and above similar authorities. However, the quality of health assessments by GPs is variable and this has led the partnership to establish a designated doctor post to drive improvements. The co-location of the nurse for looked after children in one of the social work teams has been positive in improving communication and enabling the sharing of information about the health of children. A number of initiatives to improve the quality of assessments and to provide a more holistic health model are being developed. Support for the emotional needs and mental health of looked after children is not easily accessible nor provided in a timely way. A comprehensive review of the child and adolescent mental health service is being carried out and will include proposals to give a more timely and responsive service to this group of children and young people.

34. Educational outcomes for looked after children are adequate. The percentage of children looked after who left school with one GCSE grade A*-G in 2006 was slightly below the national average but figures supplied by the council for 2007 indicate this has improved. Recent changes in the staffing complement of the Looked After Children Education (LACE) team have led to social workers now taking responsibility for ensuring the completion of personal education plans with the support of the LACE officer. The council has recognised that social workers require training to ensure that the plans are consistently completed to a high standard and a programme has been planned.

35. The council undertakes detailed monitoring of looked after children who are absent from school. This has revealed that while the percentage of children missing from school for 25 days in 2006/7 was in line with comparators, the number receiving fixed term exclusions is relatively high when compared to most other children and young people in the borough. The attendance of looked after children placed at home has been identified as an area of concern by the authority who have put monitoring arrangements in place to improve this outcome.

36. The council’s adoption rates for looked after children have improved and are now in line with those of statistical neighbours. However, the number of children adopted within timescales remains below that of comparators. The council has been successful in its drive to increase its number of foster carers in the borough. Foster carers report they feel well supported and trained and a high number are fee paid. Children and young people spoken to during the inspection said they feel well supported by their carers. The local authority’s pool of carers does not enable the wide range of children’s needs to be met within the borough of Southend. Consequently, an above average proportion, approximately one third of placements, is with independent fostering agencies
outside of the borough. Significant improvements have been made with the recommissioning of this provision to four preferred providers, which has resulted in savings of £1.8 million. In 2006/07 no children were placed more than 20 miles away from Southend and the council’s longer term intention is to return children to the borough where appropriate.

37. The number of care leavers who are in education, training and employment is in line with similar areas. The Connexions service and local colleges are well engaged in helping young people to access courses to improve their qualification levels. Through its corporate parenting role the council has agreed to provide further opportunities for training and apprenticeships for care leavers within its various departments. Care leavers are generally provided with suitable accommodation to meet their individual needs. These services are provided by the council’s housing department in partnership with a number of independent providers. Bed and breakfast is used in a very small number of cases. A review of the leaving care service is in progress with attention being paid to the provision of supported lodgings for those who need this service.

38. Educational opportunities for unaccompanied asylum seekers when they become care leavers are unsatisfactory. The council is now aware of this situation and is taking action to improve the matters.

39. In summary, the council and its partners have a commitment to ensure good outcomes for looked after children and care leavers. A number of outcomes are currently in line with or better than similar authorities, but there are significant weaknesses which the council has begun to successfully address and to ensure that improvements are sustained.

### Children and young people with learning difficulties and/ or disabilities

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40. The contribution of local services to improving outcomes for children and young people with learning difficulties and/ or disabilities is adequate.

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<th>Major strengths</th>
<th>Important weaknesses</th>
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<td>Very good multi-agency approach to identifying and meeting the needs of young children.</td>
<td>Significant gaps in health provision. Poor transition planning.</td>
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<td>Very good support to parents of pre-school children from initial identification through to starting school.</td>
<td>Insufficient collation, analysis and use of information concerning the progress of pupils who are functioning below national curriculum levels.</td>
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<td>Good increase in numbers of young people engaged in post-16 education and work-based learning.</td>
<td>Length of time taken to produce statements requiring medical information.</td>
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<td>Good support for children and young people with longer term medical needs.</td>
<td>Lack of independent advocacy services.</td>
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41. There is a clear commitment across all partners to work together to improve outcomes for children and young people with learning difficulties and/or disabilities. The learning difficulties and/or disabilities strategy is adequate. It sets out the vision and strategic objectives for strengthening co-ordinated support at locality level and improving the ability of services to meet needs at an earlier stage. However, it is not underpinned by a thorough analysis by type of need or trends over time which informs planning for the future. Neither does it identify the resources required to deliver the action plan. Not all partners are aware of the key messages in the strategy, and while special school headteachers were consulted about it they were not involved in its development.

42. Young children with complex needs receive very good services through the Lighthouse Centre, children with disabilities team and early years support programme. The Team Around the Child (TAC) multi-agency approach to assessing need and making provision is a model of good practice. Parents play a key role in TAC meetings and highly value the support and advice available to them. As a result, many of these young children are being successfully supported in mainstream settings and schools.

43. Special educational needs procedures are being aligned with the CAF in locality-based services. For school aged children, this is starting to deliver a more co-ordinated response to early identification and provision to meet needs. A wide range of services is available to support schools in meeting the needs of learners with learning difficulties and/or disabilities, including advanced skills teachers from special schools and learning resource bases. However, the educational psychology (EP) service is understaffed, in particular the early years service. Access to EP advice for children and young people in special schools can be delayed as a CAF has to be completed for requests for re-assessments.

44. Special educational needs statutory procedures are adequate and at times good. Statements requiring no new medical information are all issued within the required timescale and contain useful advice for schools. However, when statements require medical reports too few are produced within the 18 week deadline. Action has been taken by health services and the local authority to address difficulties in paediatricians meeting deadlines for completing medical
reports, but it has not yet resulted in sufficient improvement. During the five months from April to August 2007, 58% of statements were issued within 18 weeks compared with the national average of 86%. There has been some success in reducing the length of the delay, as over the same period, 83% of statements were issued within 20 weeks.

45. Local analysis of educational achievement shows that children and young people with learning difficulties and/or disabilities generally make satisfactory and sometimes good progress. Schools monitor progress well at individual child and school level against National Curriculum (NC) expectations. However, the council has not systematically collected and analysed data on the progress of children working below NC levels to evaluate progress overall, or to establish whether the high spend on learning difficulties and/or disabilities provision is being effective in improving outcomes. Young people with learning difficulties and/or disabilities receive good advice from the Connexions service and teachers about post-16 opportunities and a wider range of post-16 provision is being developed. The number of young people aged 16-18 accessing NVQ level 1 courses has increased from 57 in 2003/04 to 95 in 2005/06. Success rates for all level 1 courses are in line with national averages. In 2006, 37% of young people with learning difficulties and/or disabilities were engaged in work-based learning compared with 14.5% nationally. For those on the Entry to Employment (E2E) courses based at St Nicholas School, 79% made a successful transfer to education and training in 2007 compared with 29% the previous year.

46. Children with long term medical needs such as asthma and diabetes are supported well by specialist nurses who provide advice, support and training to schools. They liaise well with school nurses in drawing up and reviewing care plans. Input from speech therapy services is limited. Therapists work with schools on developing programmes to address communication skills through a class and small group approach and provide assessment and individual programmes for children with specific language difficulties. However, if children do not attend appointments at the clinic, their names are removed from the list. There is insufficient speech and language therapy input from the primary health care trust (PCT) into special schools where pupils have significant communication difficulties.

47. Access to CAMH services for children and young people with learning difficulties and/or disabilities is inadequate. There are long delays in securing appointments for those with challenging behaviour. There is also a shortage of specialist support for those working with young people who need advice on the management of inappropriate sexual behaviour and for young people with sensory impairments. Partners have recognised the need to address these shortages and are developing a comprehensive CAMHS strategy.

48. Initiatives to improve behaviour in schools have had a positive impact. The number of permanently excluded children with statements has been reduced from five in 2004/05 to two in 2006/07. Fixed period exclusions have reduced
from 84 to 64 over the same period. However, meeting the needs of children and young people with challenging behaviour remains a difficulty because coordinated multi-agency support is not yet sufficiently well developed. This has resulted in the needs of these young people being met outside of the borough.

49. A fifth of all out of borough placements, and half the placements in independent and non-maintained special schools, are for children and young people with social, emotional or behavioural difficulties. For pupils whose needs cannot be met in the borough, there are agreed protocols for agreeing to a residential placement. Placements in residential schools comply with national minimum standards and independent reviewing officers and social workers regularly monitor progress and provision. Attendance of other partnership staff at reviews is less consistent.

50. Transition planning from child to adult health services is poor. There are different thresholds for accessing services and a lack of specialist services to take over cases. Partners have recognised this as an area of weakness and have initiated a transition planning project. The rigour of transition planning at age 14 is inconsistent. In 2006/07 only 80% of young people with statements in Year 9 had a transition plan prepared and only 75% in Year 10 or above had their transition plans reviewed. As a consequence plans for moves to further education, or adult services are unclear for a significant minority of young people.

51. Young people with learning difficulties and/or disabilities are supported in making their views know at annual reviews and transition plan meetings, but are not widely consulted on broader issues or service development. There is no independent advocacy service to support children and young people with learning difficulties and/or disabilities who are not looked after in making complaints or ensuring any concerns are addressed. Leisure and recreational opportunities for those with learning difficulties and/or disabilities are being developed but relatively few of these are fully inclusive, or have sufficient skilled staff to meet the range of needs. Teenagers in particular find the range of suitable activities limited. Access to appropriate transport outside the school day remains a problem for parents.

52. A good range of respite care is being developed, with a focus on providing flexibility for users. Direct payments are being promoted well and take-up has improved from 15 in 2006 to 33 in 2007. Parents told inspectors that, although the flexibility of provision is helpful, they feel there are insufficient residential respite care places available.

53. In summary, there are variations in the quality of services to children and young people with learning difficulties and/or disabilities. There is some very good work around young children with complex needs which provides a good model for further development. However, for older children and young people the same level of support is not so readily accessible and significant groups do
not receive good enough services. Data analysis does not sufficiently underpin planning and evaluation.

**Other issues identified for further investigation**

**An investigation into the contribution of services to preventing substance misuse and improving outcomes for those currently misusing**

54. **The contribution of services to preventing substance misuse and improving outcomes for those currently misusing is adequate.**

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<th>Major strengths</th>
<th>Important weaknesses</th>
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<tr>
<td>Well-received initiatives to prevent substance misuse.</td>
<td>Insufficient out of hours and weekend support for mental health and substance misuse.</td>
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<td>Good response to addressing the increase in alcohol misuse.</td>
<td>Inadequate arrangements to identify and assess community needs.</td>
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<tr>
<td>Good partnership working at an operational level.</td>
<td>Insufficiently developed systems for monitoring and evaluating outcomes for children and young people currently misusing alcohol and drugs.</td>
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55. The 2006 annual performance assessment (APA) identified shortcomings in the assessment and treatment of young people with substance misuse needs. It reported that whilst the number of young people who were accessing specific young people’s services was above the regional average, the proportion that were in treatment was below the regional average, so viewed provision as an area for improvement. Since 2006 the proportion of young people in treatment has improved and is now 3% above the regional average. There are appropriate referral systems to the young people’s substance misuse service. Quarterly reporting of the drug and alcohol team’s performance to Government Office East shows it is now satisfactory.

56. Initiatives to prevent substance misuse across schools, the voluntary sector and post-16 learning are good. The ‘Getting on with the Blues’ project at Southend United Football Club aimed at primary-aged children has been well received. It focuses on reducing alcohol misuse and antisocial behaviour and over 1,500 pupils have taken part in it. Evaluations of the project found that most pupils and all of their teachers rated it as excellent. The healthy schools advisers have good partnerships with other agencies focusing on substance misuse. The number of teachers in the borough who have the personal, health and social education certificate is good, being above the national average, and is particularly high in secondary schools.
57. The SOS bus and alcohol misuse outreach work have responded effectively to increased alcohol misuse by young people. Useful information, advice and guidance for young people are available on the bus along with first-aid provided by St John Ambulance volunteers. In the first year of the project, 200 interventions were made by St John Ambulance, of which 38 were life saving. The alcohol misuse outreach worker has been effective in reducing re-offending and alcohol use by young people. During the period November 2006 to August 2007, 70% of the young people who had completed the alcohol awareness programme had not re-offended; nor had there been a significant increase in the seriousness of the offences of those who had re-offended.

58. Partnership working at an operational level is good. The Southend YMCA, works closely with the integrated youth support services and the leaving care team. This close partnership work results in timely and appropriate referrals for 16-19 year olds to training programmes for substance misuse. The YMCA film ‘Killer in a Can’ was seen by 2000 young people via the ‘2 smart for drugs’ roadshow and has won the Princes Trust national award for good community impact. The young people’s drug and alcohol team, working with the pupil access team, have developed a pilot programme involving all schools within Southend. They aim to support the government’s Every Child Matters agenda and the national drug strategy by screening all persistent truants and excluded students for drug and alcohol use. Out of 22 pupils screened, 23% had taken up the support programmes in the first quarter of the scheme.

59. The arrangements to identify and assess community needs and monitoring systems to measure the effectiveness of the preventative initiatives are inadequate. In May 2007 the drug and alcohol team instigated a review looking at needs analysis and commissioning of services. A discussion paper was produced in August 2007 exploring a range of options to monitor the authority’s provision in preventing drug and alcohol misuse, which supports the strategic priorities within the Southend children and young people’s substance misuse plan 2007/08. This paper clearly identifies the need for data across a number of partner agencies to be routinely analysed and presented in a systematic and coherent way. As yet there has been no thorough needs analysis of alcohol and substance misuse with young people to help prioritise resources and match services more closely with local needs.

60. Monitoring and evaluation arrangements are insufficiently developed to accurately capture all outcomes for children and young people. Arrangements to evaluate the impact of early interventions are underdeveloped. Outcomes for the effectiveness of early intervention work for young people with substance misuse are not well coordinated. Although case review audits may highlight gaps, appropriate data collection systems are not in place to capture information effectively. Young people are not consistently involved in service planning or evaluating the quality of service provision.
61. Insufficient service provision is provided for young people needing mental health and substance misuse support out of hours and at weekends. Currently, the only formal support provision is through the emergency services at the local hospital. A review of current services is underway and the council and its partners are clear about the need to develop this area of the service.

62. In summary, there is a good range of collaborative initiatives to raise awareness of substance misuse that effectively reaches children and young people in a variety of settings across Southend borough. The proportion of young people in treatment has improved and targets set by the service to ensure timely referrals are met. Partnerships with voluntary sector projects, schools and the alcohol misuse outreach work are good. However, the service is unable to fully identify need or capture outcomes across the range and diversity of provision in order to accurately assess the effectiveness of all these services. The provision for out of hours and weekend cover is insufficient.

### An investigation into the impact of local services in narrowing the gap between the performance of the least effective and the most effective schools, colleges and work based learning providers

63. **The impact of local services in narrowing the gap between the performance of the least effective and most effective schools, colleges and work based learning providers is good.**

<table>
<thead>
<tr>
<th>Major strengths</th>
<th>Important weaknesses</th>
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<tbody>
<tr>
<td>Highly effective school improvement service.</td>
<td>Attendance at some non-selective schools.</td>
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<tr>
<td>Good range and use of performance data.</td>
<td>Equality of access to post-16 courses.</td>
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<tr>
<td>Significant improvement in 2007 foundation level attainment.</td>
<td>Achievement in some work-based learning subject sectors.</td>
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<tr>
<td>Good and improving attainment, particularly in non-selective schools.</td>
<td>Employer engagement in schools.</td>
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<tr>
<td>Significant reduction in exclusions.</td>
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<tr>
<td>Good range of developments to improve outcomes for young people aged 14-19.</td>
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<tr>
<td>Improved participation rates in post-16 education and training.</td>
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64. The 2006 APA identified the good start children make through early years provision. While standards at Key Stage 2 are broadly average, attainment in English, particularly boys’ writing, was not as high as it could be. Standards at
Key Stages 3 and 4 were above the national average, but overall results do not show the variations in performance between selective grammar and non-selective schools. A significant proportion of Key Stage 4 pupils in some schools did not build on what they achieved in Year 6 to achieve five A*-C grades in Year 11. The APA also raised concerns about unauthorised absence in secondary schools, exclusion rates and the scope for extending the range of level 1 and 2 courses for 16-19 year olds.

65. There is good evidence from unvalidated 2007 test and examination results that attainment in the least effective schools has improved significantly. Foundation Stage profile results for 2007 show significant improvements in scores. This is true across the borough, including the more disadvantaged areas, indicating that more vulnerable children are achieving better. At Key Stage 2, unvalidated data from the 2007 school tests suggest that standards remain broadly average. In English there was a slight fall in the percentages of pupils achieving level 4 or above, from 79.6% to 78.8%, although the standard of boys' writing showed a small increase. There is evidence of increased attainment for children in most of the primary schools targeted by the council for improvement.

66. At Key Stages 3 and 4 standards have been sustained above the national average and statistical neighbours in 2007. The proportion of Year 11 pupils achieving five or more A*-C grades at GCSE has risen significantly from 63% to 65.5%, which is well above both national average and statistical neighbours. At several of the non-selective secondary schools there are significant improvements in Key Stage 3 results. The capped average points score for GCSE has improved across the borough, and the rate of improvement in the non-selective secondary schools is faster than in the selective schools. The same is true regarding the proportion of pupils achieving five or more A*-C grades (including English and mathematics) at GCSE. Whilst there is a rise from 50% to 54% across the borough, the improvements in several non-selective secondary schools are substantial. The number of schools, both primary and secondary, failing to reach the government's minimum targets has reduced further during 2006/07.

67. One reason for these improvements is the highly effective school improvement service. Under excellent leadership, the service has successfully implemented national strategies and introduced school improvement partner (SIP) arrangements. These are significant elements within a more transparent and more rigorous relationship between the council and its schools. There is a much better shared understanding of data and how it should be used. For example, target setting is more challenging, and more specific to particular groups of pupils. There is closer monitoring of the performance of schools through the School Review Group. Interventions to support schools are speedier and more effective. As a result of this improved support and intervention the number of schools that are in Ofsted's categories of concern has been reduced significantly within the last two years. Inspection outcomes are improving. During 2006/07 (up to March 2007), 20 primary and secondary
schools were inspected and the overall effectiveness of 12 of these was judged to be good or outstanding. Whilst in line with the national picture, the proportion reflects an improving trend for Southend.

68. Across the borough most schools had improved attendance figures for 2006/07 compared to the previous year. Overall attendance has increased slightly at both primary and secondary level, although remains below government targets. At some non-selective secondary schools attendance figures dropped during 2006/07 and remain a particular cause for concern. The council has sought to tackle this issue through a revised attendance strategy and some new support materials and mechanisms, but improvement is too slow. Efforts to reduce the number of holidays taken in term time have not been sufficiently effective and the council has increased the resources to support schools in improving their attendance.

69. Exclusions figures show a further, substantial reduction in 2007. The number of fixed-term exclusions almost halved between 2003/04 and 2006/07 from approximately 1,500 to 800 and the number of permanent exclusions has also fallen significantly. A range of initiatives has contributed to this success: these include the behaviour improvement programme (BIP) and the introduction of social and emotional education schemes (SEAL).

70. The 2006 annual performance assessment raised concerns over the range of level 1 and 2 courses available for 16-19 year old students. This has increased substantially, but it is unclear whether the way in which provision is distributed across the borough results in all young people being able to access courses which meet their needs. The pace of developments to improve 14–19 provision is increasing. The local consortium is the only such body within the area covered by the Essex Learning and Skills Council to gain approval for the launch of one of the new diplomas for post-16 students in September 2008, with a second planned for implementation the following year. Partnership work with Southend United Football Club and the YMCA is resulting in a growing number of projects with schools aimed at lower attaining young people. The local work-based learning consortium, NOVA, has effective quality assurance systems and good referral arrangements. Success rates for learners in work-based learning have improved significantly, although they remain below national average in some subject sectors and are below average overall.

71. The Connexions partnership works effectively with schools and colleges. Performance data is shared and used well to identify trends. Issues, such as gender imbalances in Year 11 destinations, have been identified and are subject to appropriate action. As a result of these various contributions from the council and its partners there has been a further reduction in the number of young people who are not involved in education, employment or training (NEET). The improved tracking systems indicate that in March 2006 7.9% of young people were classified as NEET and by January 2007 this figure had reduced to 6.4%. The proportion whose engagement is classified as ‘not known’ had fallen from 3.5% to 1.3%.
72. Despite this generally improving picture, the 14-19 partnership has given insufficient attention to mapping the equality of provision across the three localities of the borough and the consequent access and transport issues. Further work is underway to complete the online prospectus and to monitor and evaluate its effectiveness as a tool for informing young people of the choices open to them. Employer engagement in learning, whilst good in work-based learning and satisfactory at the college remains underdeveloped in schools.

73. In summary, attainment is good overall in Southend schools and is improving, particularly the attainment in the non-selective secondary schools. The number of schools which are in an Ofsted category of concern has reduced significantly as has the number of schools failing to reach floor targets. There has been a substantial reduction in the number of exclusions from school. Achievement at post-16 is improving, including work-based learning, and the number of young people not in education, employment and training has reduced.

**An investigation into the effectiveness of services for Young Carers**

74. **The contribution of local services to improving outcomes for young carers is adequate.**

<table>
<thead>
<tr>
<th>Major strengths</th>
<th>Important weaknesses</th>
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<tbody>
<tr>
<td>The good range of services available to known young carers.</td>
<td>The action plan does not identify targets or the resources required for implementation.</td>
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<tr>
<td>Outstanding practice in the young carers’ project.</td>
<td>Insufficient identification of young carers and the support they may require.</td>
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<tr>
<td>Young carers highly value the staff who work with them.</td>
<td>Low proportion of known young carers receiving support.</td>
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<td>Insecure future funding arrangements.</td>
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75. The 2006 APA identified that peer mentoring including support for young carers is available through the voluntary sector but identified the number of young carers accessing support as an area for development. The numbers of young carers accessing some provision has improved significantly from 45 in 2006 to 139 in 2007. However, the total number of young carers in Southend remains unknown.

76. The council and its partners are committed to supporting young carers and their needs are prioritised through the Children and Young People’s Plan. They recognise that services require further development and that there is a
need for a comprehensive system to identify young people in this group. A young carers’ strategy has been developed which addresses current demand, although it is not based on a thorough needs analysis. An action plan is in place and is in the early stages of implementation but it does not specify desired outcomes nor the resources required for its delivery. A multi-agency development group forum has recently been established with representatives from adult and community services, the Children and Learning Directorate, the voluntary and community sector and South East Essex Primary Care Trust, but at the time of the inspection it had not yet become operational. This forum is accountable to the Children and Young People’s Strategic Partnership and will be responsible for commissioning and developing services for young carers.

77. Local projects provide good support to known young carers. They offer opportunities to meet other young people in similar situations and are highly valued by them. Two exceptional and well-established projects, CHIL and COOL, are provided by Connexions and the youth service and offer a good range of creative activities covering all five Every Child Matters outcomes. A full-time worker is funded through the national carers’ grant. A key element of this support is personal, social and emotional development, and young people are offered accreditation through the courses provided. Individual files are maintained to enable staff to record and monitor the young carers’ progress by the use of photographs and video evidence. They are also involved in producing Fit It and Vibe magazines, which focus on health issues and are aimed at young carers. Frequent additional opportunities are provided for them to join in day trips and weekend activities away from home. Twenty-four carers attended the Young Carers’ Festival in Southampton and also took part in a range of outdoor activities.

78. Relate provides mentoring in some schools and ‘Special Play’, to address some of the complex needs of young carers. Some young people report that they are offered good support from their school in the form of additional help with homework and being linked with mentors once they have been identified as a young carer. Young carers are involved in the Youth Council and regularly consulted on their ideas and their views about the projects so that they can contribute to further developments.

79. The council and its partners are aware they have insufficient information about the number of young carers in Southend. The last census in 2001 identified 380, although it is recognised this is likely to be an underestimation. Young carers are usually identified by education and social care services; however this is not a systematic or rigorous process. The partnership understands that it provides support for only a small proportion of carers within the borough. The council and its partners have recognised they need to identify young carers more systematically and a part time worker has been appointed to work with schools to raise their profile. Currently, there is no central database of young carers identified through the range of services they come into contact with and no overarching strategy across all the relevant services to improve the identification of young carers.
80. Funding for provision of the young carers service is provided through a combination of monies from the Children's Fund, the council, the youth service, Connexions, and the carers grant. Some of this funding comes to an end in 2008 and future funding to develop services and support young carers is uncertain. Future capacity is dependent in part on the success of new initiatives to assess whole family needs, specifically focusing on adults who have a disability, in order to develop care packages to support children and young people in their caring responsibilities. However, these initiatives are still at an early stage of development and the only protocol relating to the work of such services is in place with the adult and community service. The use of the common assessment has not yet impacted on young carers. The partnership with substance misuse services is underdeveloped.

81. In summary the council and its partners provide good level of support for young carers’ initiatives. The young people value highly the help and friendship they receive. However, this provision is reaching only a small proportion of young carers. While generic services also meet the needs of some young carers, methods to improve their identification and support are not sufficiently developed. Future funding for supporting young carers has not been identified.

## Service Management

<table>
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<th>Inadequate</th>
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<th>Good</th>
<th>Outstanding</th>
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## Capacity to improve

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## Major strengths

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<th>Important weaknesses</th>
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<tr>
<td>Strong leadership from lead member and senior managers.</td>
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<td>Partnership working is strong.</td>
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<td>Staff capacity issues addressed effectively.</td>
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<tr>
<td>Some robust strategies which underpin the development and delivery of quality services</td>
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<tr>
<td>Breadth of councillor involvement.</td>
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<tr>
<td>Consultation and needs analysis not inclusive.</td>
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<tr>
<td>Engagement of children and young people in service planning and delivery.</td>
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<tr>
<td>Performance management of the partnership is underdeveloped.</td>
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82. The management of services for children and young people is adequate. Capacity to improve further is good.

83. The ambition of the local partnership for services to children and young people is adequate. The Children and Young People’s Strategic Partnership (CYPSP) has a clear and challenging vision. Children and young people are a central part of the vision and ambitions for the council and its partners. Ambitions are both realistic and challenging. The ambitions are aligned through the community strategy, corporate plans of partner organisations and the Children and Young People’s Plan (CYPP) ensuring the agencies working with children and young people share common goals.

84. Consultation with children and young people and needs analysis is informing the partnerships vision, objectives and strategic direction for children’s services. However, the CYPSP rightly recognises that it needs to take further action to understand the needs of all children, and the partnership is seeking to improve the inclusiveness of these processes through equality assessments and reviews. The council acknowledges a need to further improve ‘knowing, understanding and consulting’ local residents. Information on some disadvantaged groups is currently underrepresented and it does not effectively inform locality developments.

85. The prioritisation of services for children and young people is adequate. The CYPP specifies the main priorities for improving services for children and young people. The CYPP for 2007 to 2010 identifies eight revised priorities based on consultation, a review of the first year of the plan and further needs analysis. Staff and partners understand and support the priorities. Partner organisations, including the voluntary and community sector, make a positive contribution to the delivery of CYPP targets and priorities. Resources are redirected to support priority areas, for example preventative approaches, but there is no consistent identification of what are non-priorities. Priorities are underpinned by a comprehensive range of strategies, which are generally of high quality and designed to deliver improved outcomes. A number of strategies, however, have recently been developed or revised and as such they are not yet embedded in practice.

86. The resource implications of delivering the priorities for children and young people have not been assessed. The CYPP and many of its supporting strategies and action plans are not costed. Medium term financial planning is at an early stage across the partnership and having little impact on the planning and delivery of the CYPP. Proposals to improve value for money and to develop baseline data have not yet been approved.

87. The council and its partners are prioritising the development of equality and diversity but significant inequalities for children and young people remain across the Borough. The council has achieved level 2 of the equality standard. It has undertaken a range of equality audits and has taken some early action to
deal with issues arising from them. An equality survey across the partnership has recently been completed with outcomes informing future planning.

88. The capacity of the partnership to deliver services for children and young people is good. Partnership working is strong and effectively enhancing capacity to deliver improved services for children and young people. Integrated governance arrangements for the partnership are being further developed. The CYPP provides a framework for decision making and incorporates some consideration of risk. There is a strong commitment to partnership working amongst all partners including the community and voluntary sector. The council and its partners are investing additional resources in their capacity to meet the local needs of children and young people. The partnership is adding value and sustainable improvements in key areas such as the common assessment framework. The CYPP provides a focus for multi-agency, integrated service planning and delivery and locality working is now established and being delivered through integrated multi-disciplinary teams.

89. The quality of leadership to deliver the ambitions for children and young people is generally strong but with some significant weaknesses. The Director of Children and Learning and senior managers are providing strong and visible leadership across the partnership. The lead councillor is highly engaged and is effectively influencing the children’s agenda. However, there is insufficient involvement of other councillors, for example in the corporate parenting function.

90. The partnership has taken effective action to develop the staff resources it requires in delivering services for children and young people. Staff capacity has been increased and supports effective service delivery. The partnership has endorsed a joint workforce strategy. Staff recruitment and retention initiatives, including close working with local higher education providers, has led to recruitment to unfilled posts in social work and education. Joint training initiatives have been developed. Council staff report a positive culture change supported by internal organisational development.

91. Value for money is adequate. The partnership is not currently maximising its ability to deliver value for money. The partnership is taking action to use its resources more effectively and deliver value for money, but this is not embedded across all aspects of its work. Performance with respect to cost and quality across the partnership is mixed. For example, the costs of looked after children remain high, but good levels of educational achievement result from an average level of spend. There is already some limited alignment and pooling of budgets within the partnership. The partnership has made a number of joint appointments such as a Director of Public Health. A joint approach to commissioning services is being developed and resources in the region of £1.7 million are already pooled within the partnership. A partnership approach to delivering value for money is under development with a clear commitment in principle from partners.
92. Performance monitoring is adequate. Performance monitoring by individual partners effectively identifies underperforming areas and leads to action which results in improvements against CYPP targets. Monthly performance reports on council-led targets are considered by the council’s corporate management team. The CYPSP receives quarterly performance reports but the evaluation of underperformance is inconsistent. Despite this these systems have contributed to some improvements in underperforming areas such as reducing teenage pregnancy and health assessments for looked after children. Performance monitoring through the partnership board is at an early stage and its impact is minimal.

93. Performance management across the partnership is adequate and improving. Council service plans are based on a standardised template and include lead responsibilities, targets and risk. However, children and young people are not sufficiently involved in their development. Strategic targets for service improvement are agreed through the CYPP. Not all targets demonstrate an impact on outcomes for children and young people, although there is a clear trend of improvement in this area. Benchmarking information is available to partners but it is not used consistently to evaluate performance improvement. The integration of performance, financial and risk reporting is at an early stage. Complaints are monitored, but the consistency with which they are acted upon is variable.

94. Capacity to improve further is good. The CYPSP can demonstrate a track record of improvement. Overall performance trends demonstrate improvements in a broad range of outcomes for children and young people, for example school improvement and aspects of social care. Where there are inconsistencies or, despite improvements, performance remains below comparators actions are being taken to deliver further improvement. The council is taking a lead in evaluating the impact of initiatives on children and young people with some evidence of learning being used to develop services further. Consequently the partnership can demonstrate an ability to sustain the improvements it is making in services.

95. The CYPSP has taken effective action to address a range of staffing issues. Capacity to deliver services is good. Workforce planning and development is addressing capacity issues effectively. Integrated workforces are being successfully developed to deliver services within localities. The partnership is ensuring that it has the building blocks in place to deliver quality services for children and young people.
Annex A

MOST RECENTLY PUBLISHED ANNUAL PERFORMANCE ASSESSMENT OF SERVICES FOR CHILDREN AND YOUNG PEOPLE IN SOUTHEND-ON-SEA

Overall, Southend-on-Sea Borough Council delivers services for children and young people at an adequate level, although in a number of respects services contribute well to improving outcomes for their users. Children’s services are making a number of significant contributions to improving the achievement, enjoyment and economic well-being of children and young people within a borough that faces social and economic challenges. However, the council has only recently addressed inadequacies relating to their contribution in staying safe.

In addition their contribution to being healthy remains no more than adequate due to inconsistencies in Childhood and Adolescent Mental Health Services (CAMHS), and in the health provision for children and young people with learning difficulties and/or disabilities. Outcomes in these areas have yet to improve in line with other aspects of the council’s services.

The full annual performance assessment can be found at:

http://www.ofsted.gov.uk/reports/pdf/?inspectionNumber=270429&providerCategoryID=0&fileName=\APA\apa_2007_882.pdf
Annex B

CORPORATE ASSESSMENT ACHIEVEMENT - CHILDREN AND YOUNG PEOPLE

1. The overall effectiveness of the council’s children’s services is adequate and in a number of respects a good contribution is being made by services to improving outcomes. The arrangements for safeguarding children and young people have improved and are adequate. Appropriate action is taken to improve the health and well-being of children and young people however the rate of teenage pregnancy though falling at a faster rate than comparators remains too high. Good action has been taken to narrow the gap between the achievement of children and young people in the least effective and most effective schools, colleges and work-based learning providers. However, there is insufficient systematic collation and analysis of data by the council to assess the progress of pupils with learning difficulties and disabilities across all ranges of need. Service provided to, and outcomes for looked after children and those with learning difficulties and/or disabilities are adequate.

2. Service management in Southend is adequate and the capacity of council services to improve is good. Children and young people are an integral part of the vision and ambitions for the council and its partners. Strong and visible leadership is apparent in the Children and Learning Directorate. The portfolio holder for children and young people is highly engaged and is having a significant impact on the children’s agenda; however, the engagement of councillors in general with their corporate parenting role is more limited. Recent new management appointments in social care are beginning to effectively drive forward improvements in outcomes for children and young people. The commitment to partnership working focusing on prevention is strong and the council and its partners are investing in their capacity to meet local needs through the implementation of integrated locality working. Performance monitoring information is considered by the council and action is taken to address areas of underperformance. However, the use of benchmarking data in the development and review of the CYPP is inconsistent.

3. The combined work of all local services in securing the health of children and young people is adequate. Healthy lifestyles are promoted well through a range of initiatives. The proportion of young people receiving treatment for substance misuse has improved since 2006. Effective partnership work between the council, schools post-16 providers and voluntary organisations have resulted in the implementation of good initiatives which focus on the prevention of alcohol and drug misuse. However, services are not able to fully identify needs in relation to alcohol and substance misuse, nor to capture outcomes across the range and diversity of provision to accurately assess the impact of provision. Child and adolescent mental health services (CAMHS) are variable both in their capacity and quality. While some provision, such as tier 3 provision is good, others, such as 24 hour cover, tier 2 arrangements and access for children and
young people who are looked after or who have learning difficulties and/or disabilities are not good enough.

4. Children and young people appear safe and arrangements to ensure this are adequate. A good range of positive action has been taken by the council and its partners to improve services to safeguard children and to prevent them being looked after. The local safeguarding children board is beginning to strengthen its monitoring and oversight responsibilities. Robust action, including more focused systems closely monitored by frontline managers, has led to significant recent improvements in the timeliness of initial and core assessments for children in need although further work is needed to fully embed these improvements. The number of children looked after by the council though reducing remains too high. Children and young people who are looked after by the council have a good level of stability in their placements, but have experienced frequent changes of social workers and their reviews not being held on time because of staff shortages. Concerted and successful efforts to recruit social care staff are improving this situation. Safe recruitment practices are in place but council is aware that its systems for ensuring criminal record bureau checks are kept up to date need to be more robust.

5. The impact of local services in helping children and young people to enjoy their education and achieve economic well-being are good. Attainment is good overall in Southend schools and is improving, particularly in the non-selective secondary schools. The number of schools which are in an Ofsted category of concern has reduced significantly, as has the number of schools who are failing to reach floor targets. There has been a substantial reduction in the number of fixed-term exclusions from schools, although the level remains high for looked after children. While there is evidence of improved attendance overall in most Southend schools it remains below Department for Children, Schools and Families targets and in some non-selective secondary schools fell in 2006/07. Achievement post-16 overall is outstanding. However, this does not reflect the difference between the grammar and non-selective schools. Progression of young people aged 16 into education employment and training is improving. There has been a significant growth in the range of level 1 and 2 courses across the borough; however the 14-19 partnership still has to address inequalities in local access to such courses. A wider range of provision is being developed for young people with learning difficulties and/or disabilities and the number of care leavers in education and employment is in line with comparators. However, limited opportunities are provided to unaccompanied minors to achieve their aspirations for education and training.

6. The impact of all local services in helping children and young people contribute to society is adequate. Support for children and young people’s social and emotional development has been strengthened through the SEAL programme, Healthy Schools and the use of learning mentors. Consultation with children and young people has informed the CYPP and the Youth Council is very effective and endeavours to speak on behalf of all children and young people. However, opportunities for the voices and concerns of some more vulnerable
children and young people to be heard are more limited. The partnership has developed a participation strategy which has been approved but the action plan has not yet been implemented. Effective multi-agency action is reducing anti-social behaviour and offending rates.
Annex C

SUMMARY OF JOINT AREA REVIEW AND ANNUAL PERFORMANCE ASSESSMENT ARRANGEMENTS

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 multi-disciplinary team of inspectors from Ofsted, the Healthcare Commission 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 these findings plus aspects of the most recent Annual Performance Assessment 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 Southend-on-sea and evaluates the way local services, taken together, contribute to their well-being. Together with the Annual Performance Assessment of Children’s Services, 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. This review explores these issues by focussing on children with learning difficulties and/or disabilities, children who are looked after and children at risk or requiring safeguarding and a few additional investigations. It evaluates the collective contribution made by all relevant children’s services to outcomes for these children and young people.

4. The review took place in two stages consisting of an analysis stage (where recorded evidence was scrutinised) and a two week fieldwork stage (where inspectors met children and young people and those who deliver services for them).