

Joint area review

Telford and Wrekin 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
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Introduction

1. The most recent Annual Performance Assessment (APA) for Telford and Wrekin judged the council's children's services as good, 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 investigation was also carried out:
 - the quality of the partners' strategy for addressing teenage conception rates and providing support for young parents.

Context

4. The borough of Telford and Wrekin has an estimated population of 164,000, of whom 22% are between the ages of 0-15 years and 63% are of working age. The Black and minority ethnic population is 7% which is lower than the West Midlands figure of 11% and they make up 9% of the school-age population. Asian/Asian-British are the largest single group.
5. The borough ranks 84th in the Indices of Deprivation which places it midway in the national table, and 19% of the population live in the country's 10% most deprived wards. The employment rate is just above the regional and national averages, with average wages in line with the region but below those nationally.
6. Pre-16 education is provided through seven networks of childminders, 62 private, voluntary and independent providers inclusive of 13 children's centres, 57 primary schools, 13 secondary schools, four special schools and four pupil referral units. Integrated youth support services are provided by the recently established Connexions 4 Youth service.
7. The Learning and Skills Council operates across Shropshire, Telford and Wrekin, Hereford and Worcester.
8. The majority of learners access post-16 education and training through a further education college and a sixth form college located in Telford. A minority attend further education provision outside the area. There are four sixth forms based in Telford and Wrekin, including the City Technology College. Seven work-based learning providers operate in the borough, with Shropshire County

Training as the largest provider. Telford College of Arts and Technology, Shropshire County Training and NACRO all have contracts to deliver Entry to Employment.

9. Family learning is delivered in partnership with schools and also by the council's lifelong learning team in community centres and learning centres.

10. Primary care is provided by Telford and Wrekin Primary Care Trust. Acute hospital services are provided by Shrewsbury and Telford Hospital NHS Trust. Mental health services for children and young people are provided by the Telford and Wrekin Primary Care Trust.

11. Children's social care services are provided through: 78 foster carers, 13 shared carers for disabled children, two children's residential care homes, a duty and assessment service, the safeguarding team, two assessment and case management teams, a children in care team, an integrated disabled children's team, a 16+ team and an emergency duty team. Children's residential respite facilities are accessed by 38 families for children and young people with learning difficulties and/or disabilities.

12. There are no young offender institutions in the area.

13. The police service operates across West Mercia. Services to children and young people who are at risk of offending, or who have offended, are provided through the Shropshire and Telford and Wrekin Youth Offending Service.

14. The Director of Children's Services has been in post since January 2008 following a long period of internal temporary arrangements. The senior management team is in the process of restructuring which will result in an additional post and a team of six senior managers.

Main Findings

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

- The contribution of local services to improving outcomes for children and young people at risk or requiring safeguarding is adequate. Outstanding family support services are delivered through five local integrated multi-agency cluster teams and aligned networks which provide effective early support for families. Good arrangements promote physical and mental health, and secure education for those not at school. Although appropriate action protects children at risk of harm, the quality of practice in social care services is variable which means that not all children receive timely and purposeful support.
- The contribution of local services to improving outcomes for looked after children and young people is good. Partners have a strong and effective commitment to looked after children. Regular consultation with young people helps shape and improve the services they

receive. Care plans vary in quality but effective multi-agency collaboration ensures outcomes are good for most children and young people. GCSE results are in line with similar councils, however there are high levels of absence from school. Care leavers receive very good support.

- The contribution of local services to improving outcomes for children and young people with learning difficulties and/or disabilities is good. Well-established partnership working provides responsive, local services for children with learning difficulties and/or disabilities and their families. Specialist services are valued highly by schools and parents although access to support for autistic spectrum disorder is inconsistent. Whilst progress in school is often good, the council does not use borough-wide performance data well enough to evaluate the impact of its inclusion strategy.
- The quality of the partners' strategy for addressing teenage conception rates and providing support for young parents is adequate. Young people receive a good range of information, advice, and support around relationships and sexual health. Young parents are well supported. However, taken together, the work of partners has not had sufficient impact on reducing the high teenage pregnancy rate. It is too early to judge whether the significant but very recent reductions in the teenage pregnancy rate are part of a firm downward trend.
- Service management is good with good capacity to improve further. Commitment to fulfilling the ambitions for children and young people is strong at all levels of the council and partner organisations. The involvement of children and young people at both strategic and operational levels is very good. A new, more focused Children and Young People's Plan is in place to deliver key priorities, supported by very good partnership working which enhances capacity. Performance management arrangements are adequate but with areas for improvement.

Grades

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

	Local services overall
Safeguarding	2
Looked after children	3
Learning difficulties and/or disabilities	3
Service management	3
Capacity to improve	3

Recommendations

For immediate action

The local partnership should:

- ensure that an appropriate way is found for the successful dissemination of the findings of this report to children and young people in the area
- reduce the high levels of absence from school by looked after children.

The local authority should:

- ensure that all cases are allocated promptly, care plans are of a high standard and that the actions in them are progressed in a timely way
- ensure that all social care casefiles record ethnicity and have an up-to-date chronology
- establish a systematic and comprehensive approach to case file monitoring to ensure continuous improvement in social work practice.

For action over the next six months

The local partnership should:

- establish consistent quality assurance and performance management arrangements to provide an objective knowledge of all service areas and better identify areas for improvement across the partnership

- review capacity in children's social care to ensure that the needs of children and young people are being met effectively
- further reduce the rate of teenage conception by ensuring resources are targeted effectively in the areas of greatest need and on vulnerable groups
- increase the use of performance data to evaluate the impact of the inclusion strategy and drive improvements.

For action in the longer term

The local partnership should:

- promote awareness of and consistency in the support for children and young people with autistic spectrum disorder.

Equality and diversity

16. Corporate processes focus appropriately on equality and diversity issues. The council has achieved Level 3 of the equality standard. Partners understand the different needs of their communities in the five cluster areas as a result of good and detailed needs analysis although operational delivery is variable. The new Children and Young People's Plan 2008-11 addresses equality issues well and identifies priority groups including children with disabilities, those of Asian and mixed heritage backgrounds, and looked after young people. Some equality impact assessments have been undertaken and there is a rolling programme to complete the remainder. Monitoring information on equality and diversity issues is inconsistent and the Children's Trust Board does not receive specific data.

17. Impact and outcomes for children and young people vary. Looked after young people and those with learning difficulties and/or disabilities are consulted well and influence service delivery. Both groups are involved in recruitment at the highest levels. Diversity issues are addressed for many but not all young people who offend and ethnicity is largely unrecorded in referrals to social care. Social work practice varies widely in relation to diversity. Connexions 4 Youth ensures that jointly planned and well-differentiated programmes are provided for vulnerable groups including teenage mothers, Travellers and those from Black and minority ethnic backgrounds. The council is not yet meeting its employment targets for disabled employees and those from black and minority ethnic groups.

Safeguarding

Inadequate

☐

Adequate

X

Good

☐

Outstanding

☐

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

Major strengths	Important weaknesses
<p>Outstanding multi-agency preventative and family support services delivered through local clusters.</p> <p>All child protection case conferences held on time and within timescales.</p> <p>Effective partnership work to secure a comprehensive Child and Adolescent Mental Health Service (CAMHS).</p> <p>Good arrangements promote physical and mental health, and secure education for those not at school.</p> <p>Effective action to identify and respond to risk.</p> <p>Large reduction in the number of children killed or seriously injured in road accidents.</p>	<p>Deficiencies in the arrangements for case allocation.</p> <p>Capacity problems for the case management teams.</p> <p>No systematic processes to collate information about the quality of practice and drive improvements in this respect.</p> <p>Inconsistent recording of ethnicity on files.</p>

19. The 2007 APA judged staying safe as good, although it made two recommendations regarding domestic violence and arrangements to safeguard missing children. Good progress has been made in addressing the issues relating to both these services.

20. Partners have a robust approach to children's general safety and well-being and provide a good range of information on safety in several community languages. The number of children killed or seriously injured in road accidents has reduced significantly and is very low and, with a reduction of 86% from the baseline, much better than the national average of 51%. Partners have worked effectively to reduce bullying and young people report an overall improvement in schools, although partners recognise the need for further work and have begun to action this. Revised strategy and practice guidance now covers all settings, although it is too early to judge their impact. Race monitoring has effectively identified the most vulnerable groups who receive targeted support and a new post has just been established to work with mixed heritage children. The inspection of private fostering in 2007 judged it unsatisfactory. The council has taken appropriate action and there has been a good increase, from five to 24, in the number of private fostering placements it has been notified about, and responded to, in the last two years.

21. A wide range of agencies work collaboratively and effectively at a local level to promote healthy lifestyles. Young women spoken to at a youth club described the positive impact of the sessions on their personal development, attitudes and values. A well-established substance misuse service is delivered by NACRO, and the Help to Quit programme has met its target of 54 young people who stopped smoking. An increasing number of schools are meeting Healthy Schools standards but the number is below the target and a coordinator has been appointed to improve the rate of progress.

22. Partners work effectively to deliver a comprehensive CAMHS. Waiting lists for specialist services have decreased significantly since local multi-agency family support teams were established with more children and young people now effectively helped at earlier stages. This has also significantly improved the transition experience of young people who are subsequently referred to specialist services. According to data provided by the partners for the period up to March 2008, all referrals are now seen in less than 11 weeks which is a very good performance. Good progress has been made to extend CAMHS to young people up to age 18, and partners are currently considering how to improve the targeting of services for young people who need support at earlier stages.

23. The council has outstanding family support services which are delivered through five well-established local multi-agency cluster teams to provide very prompt and effective support for all the families who require early intervention. The clusters use the Common Assessment Framework and Team Around the Child arrangements very well to assess, coordinate and deliver support. All relevant support and preventative services are delivered through or aligned with these clusters which continue to provide support when children and young people become looked after or subject to a child protection plan. Since 2004, some 1900 assessments have been completed which represents a very good performance. Staff within the clusters are confident about their role and clear about thresholds for referrals to social care.

24. Domestic abuse is one of the priorities for the partnership and effective action has led to good improvements in protecting children and parents. Very good promotional materials are widely available and all front-line staff have undertaken training. Police risk assess each incident involving children and refer cases to either the local cluster teams or social care. Multi-agency risk assessment conferences are in place. Early indications are that there has been a significant decrease in the numbers of repeat referrals.

25. Referral, assessment, planning and review arrangements are adequate. The safeguarding helpdesk is well organised and respected by the clusters, both for providing advice and as a single referral point for social care. However, the requirement for parental consent to be sought before undertaking agency checks for referrals which are not designated formal child protection enquiries was not being consistently applied. Prompt action was taken by the council to rectify this when it was raised by inspectors. Ethnicity is not recorded systematically on referrals.

26. The number of initial assessments undertaken by social care has decreased as a result of the earlier assessments undertaken by cluster teams, and referrals are now more likely to go straight to a core assessment. Despite this decrease, the number completed within seven days has dropped slightly, but at 64% remains in line with statistical neighbours. The timeliness of core assessments remains in the top band although performance has dropped since last year from 96% to 82%. In 2007-08, all child protection cases were reviewed on time, which is very good.

27. There is insufficient capacity in the two long-term case management teams, which reduces the effectiveness of their work. Both teams have been put under strain by increased numbers of children in care and an increase in the last two years in the number of children with a child protection plan from 103 to 161 at March 2008, with numbers now considerably higher than statistical neighbours. Further pressures have resulted from the implementation of a new IT system and long-term sickness in the teams. The council has managed this by prompt use of agency staff to cover absence and by holding unallocated cases on a helpdesk staffed by two duty desk coordinators, and a senior social worker and two social workers on a rotational basis. Although these are mainly family support cases, child protection cases are also transferred to the helpdesk from the safeguarding team pending allocation, and some looked after and child protection cases are similarly held as a result of staff sickness. While the necessary visits and tasks are undertaken, little meaningful work with families is possible and the arrangement is therefore unsatisfactory. The IT system does not currently enable the council to monitor case transfers electronically.

28. Appropriate action is taken to protect children at risk of harm. However, social care case files inspected during the review revealed evidence of variable practice and poor quality intervention in some other cases. Staff reported that the implementation of the computerised recording system has created difficulties over the past year in readily producing and maintaining chronologies and the council are addressing this. In one case, a child protection case conference went ahead without any reports which is unsatisfactory. Once identified by inspectors, guidance reinforcing the requirement for written reports was issued to staff. Managers audit individual case files and performance management arrangements enable partners to monitor services through data and key performance indicators. However, there are no systematic processes to collate information about the quality of practice and drive improvements in this respect.

29. Partners are fully engaged in the work of the Safeguarding Children Board (SCB). There is an independent chair, an arrangement which all partners believe works well. The Board has embraced the wider safeguarding agenda well and there is a comprehensive business plan. Child protection training is readily available and well received by all agencies. The procedures are web-based, regularly updated and easily accessible. There are good links with the multi-agency public protection arrangements and with the Children's Trust

Board of which the Executive Committee of the SCB is the 'staying safe' outcome group. Agencies have agreed long-term financial contributions although the overall level of resourcing remains a concern for partners. The SCB has identified the need to carry out multi-agency case file audits and develop a performance management framework.

30. All partners comply with safe recruitment practices. These are underpinned within the council's children's services by recruitment training for panels and reinforced by good monitoring and risk assessment arrangements. The primary care trust has plans in place to train all its recruitment managers, and the council is further enhancing its recruitment processes across all departments.

31. The partners' integrated approach to delivering family support and the deployment of youth inclusion and support panel workers in the cluster teams has enabled them to tackle antisocial behaviour effectively without the excessive use of antisocial behaviour orders. The evidence available from 42 cases tracked in the inspection of the Youth Offending Service suggests action has successfully led to a downward trend in offending and re-offending.

32. A robust and effective fair access panel ensures good managed transfers and prompt educational provision for excluded students. There is a strong focus on reintegration into mainstream schools. Young people educated at home are monitored well. The council has effective policies in place to track young runaways and children who go missing from education or care. Procedures require all missing children to be retained on the school roll until their whereabouts have been established. Information is shared promptly between bordering councils and a regional partnership provides laptops for Traveller children to maintain continuity of education when families move around the area.

Looked after children and young people



33. **The contribution of local services to improving outcomes for looked after children and young people is good.**

Major strengths	Important weaknesses
<p>The high priority given to looked after children by the council.</p> <p>Effective multi-agency joint work producing good outcomes for most looked after children.</p> <p>Good health promotion and health care provision.</p> <p>Strong participation of looked after children in service planning and delivery.</p> <p>A wide range of services promote learning and personal development.</p> <p>Very good service and outcomes for careleavers.</p>	<p>Variable quality of care plans.</p> <p>High levels of absence from school.</p> <p>Inadequate performance management systems.</p>

34. Looked after children and young people are a high priority for the council. They receive strong support from the lead member for children's services and the Chief Executive. The corporate parenting scrutiny group meets regularly with the 'Talk 2 Us' group of looked after children and care leavers. Issues raised by young people are taken seriously and acted upon by the scrutiny group. Elected members have undertaken training in their corporate parenting role and undertake regular visits to children's homes.

35. A wide range of very effective family support services is provided by the five well-established multi-agency cluster teams. Following the introduction of these teams the number of looked after children increased, rising by approximately 30 over the last 18 months including a rise in 12-15 year olds. The number of looked after children has now stabilized at 230 which is in line with similar councils. 'Edge of care' processes, family group conferences and 'resource allocation' meetings are used well to support families to maintain children at home. Short-term placement stability is good, with long-term stability slightly better than similar councils.

36. The inspection of the council's fostering service in 2007 identified that foster carers are well supported. An action plan is in place to address issues relating to the management of the service and its performance management. The latest data provided by the council showed a slight reduction, from 17.5% to 16%, in the number of looked after children placed in residential accommodation, which is slightly above similar areas. The council is committed to placing children appropriately, including the commissioning of external places when necessary. An action plan is in place to reduce the dependency on placements outside the borough and senior managers routinely monitor the

care plans of children placed externally. Local placement choice is improving with a net increase of nine foster carers and four kinship care placements over the past year bringing the number of kinship placements to 20 with a further 15 awaiting assessment. Special guardianship is also being used where appropriate, with seven in place. Good action in relation to special school provision has enabled the council to place more children with learning difficulties and/or disabilities locally.

37. The quality of social work for looked after children is good overall. Agencies work together effectively and communicate well to produce good outcomes for young people. Resources within the local clusters are deployed well to support looked after children. The council has negotiated, through local flexibility arrangements, the use of unqualified social work staff to manage looked after cases, and have effective systems in place to continue increasing the number of qualified staff. Measures are in place to address the needs of Black and minority ethnic children, some of whom are placed with white carers. Foster carers and residential workers are trained in diversity and meeting diverse needs, and interpreters are used appropriately. Unaccompanied asylum seekers, mainly from Afghanistan, are placed appropriately through independent fostering agencies.

38. All looked after children's reviews are held on time and almost all young people participate. Independent reviewing officers chair all reviews and undertake those for children placed out of authority at their home. Reviews are of good quality, focusing well on the five Every Child Matters outcomes and sustaining family links. However, the quality of care plans is variable, partly due to the new electronic social care records system which is still being configured. While reviewing officers feed back any concerns to operational staff and managers on a case-by-case basis, the overall information available to them is not aggregated for use as a quality assurance tool. There are no arrangements in place to monitor the overall quality of the services for looked after children and to secure continuous improvements.

39. The corporate parenting team based in children's services assesses and promotes the health of looked after children effectively. A very high number of looked after children, 91%, receive their regular health assessments which is better than similar councils at 81% and the national average of 84%. Health assessments are comprehensive and take place at venues to meet individual needs. The team includes a life story worker and an integrative child psychotherapist who provides individual therapy and facilitates access to mainstream CAMHS. There is good access to substance misuse services. A dedicated sexual health worker provides a very accessible service and is appreciated by young people. Foster carers and residential staff receive useful training in health promotion from health care professionals.

40. Personal education plans are used well, audited and monitored by the corporate parenting team, and in a survey undertaken by the council 96% of the plans included a contribution from the young person. Education support is

targeted at Year 6 and Year 9 pupils, children with highest levels of need and those most at risk of exclusion, thus ensuring that no looked after children were excluded in 2007-08. The council has taken effective action to reduce the sudden and significant rise in the number absent from school for more than 25 days from 8.7% in 2005/06 to 24% in 2006/07 although it remains too high at 18%.

41. Educational achievement remains in line with similar councils. In 2007, 54% of young people leaving care achieved at least one GCSE pass at grade A* to G. According to the council's own data, in the same year 18% of looked after children achieved five or more GCSE passes at grades A* to C a marked rise on the 8% over the previous two years. However, cohorts are small and a significant number have special educational needs, most of whom achieved some form of qualification, including entry level certificates or ASDAN awards.

42. Looked after children participate in a wide range of leisure activities, special projects and educational activities to promote learning and personal development. The council values the contribution looked after young people make to service planning and delivery and consults them regularly on a range of issues. A significant number of young people participate and influence changes. Looked after young people told inspectors how their involvement had raised their self-confidence and aspirations. They provide training for officers and councillors and contribute to the recruitment of staff at all levels, including the Chief Executive and the Director of Children's Services.

43. The proportion of looked after children who offended fell to 1.7% in 2006-07 compared to 2.5% for similar councils but rose to 3.4% in 2007-08 although this relates to a very small cohort. A protocol between the Youth Offending Service and the Police focusing on children's homes has begun to impact with evidence of a reduction in offending.

44. The joint adoption service with Shropshire is effective with a strong panel and an independent chair. A consistently good rate of local applicants want to adopt, and although there is a lower representation of local adopters from Black and minority ethnic communities, good consortium arrangements ensure appropriate matches for this group of children. The cohort of children placed for adoption is small which makes comparison difficult. There has been some success in placing hard to place children. Effective support is provided to families following adoption and disruptions are very rare.

45. The service to care leavers is very good with a well coordinated multi-agency approach and good proportion, 75%, engaged in education, training or employment which is in line with similar authorities. Care leavers are provided with a high level of support and all are in suitable, good quality accommodation, some commissioned from independent specialist providers. Opportunities for careleavers to work in the direct employment of the council are very limited and only one has been appointed to date, as a short-term specialist youth support worker.

Children and young people with learning difficulties and/or disabilities

Inadequate ☐Adequate ☐Good ☒Outstanding ☐

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

Major strengths	Important weaknesses
<p>Well-established partnerships between health, social care and education.</p> <p>Common Assessment Framework and Team Around the Child arrangements ensure cohesive and flexible support to families to keep children within the family.</p> <p>Good health provision for children with physical disabilities in mainstream schools.</p> <p>Good support services for children with visual and hearing impairment.</p> <p>Flexible and responsive short breaks/ respite arrangements.</p> <p>A very good range of leisure and recreational opportunities.</p>	<p>Inconsistency in the delivery of provision for children and young people with autistic spectrum disorder.</p> <p>Borough-wide performance data is not analysed rigorously.</p> <p>Lack of challenge by the local authority to ensure good progress in special schools.</p>

47. Well-established multi-agency working underpins responsive local services contributing to good outcomes for children and young people. Partnership working between health and social care services is particularly effective.

48. Parents and carers of young children with disabilities receive very good support. Physical and sensory disabilities are identified early and local agencies provide responsive and supportive help to families. Assessments involve the family or carer, and lead to well-focused actions providing an appropriate level of support for each family, for example, in managing a medical condition at home, offering parenting support for those whose children have challenging behaviour and providing short breaks. The Team Around the Child approach is well established and the very good communication between health and social

care agencies promotes a cohesive and responsive service to families. As a national short breaks Pathfinder, the council provides an imaginative range of breaks which include interesting, age-related activity for the child whilst also offering parents and carers respite.

49. Most children are cared for within their family with good support from local multi-agency teams. All partners are aware of the arrangements for initiating a common assessment and the approach is applied consistently and effectively in providing early support. Effective support is provided by community nurses from CAMHS, and case files illustrate good support to individuals with mental health issues. However, CAMHS have identified the need to extend specific services for children and young people with autistic spectrum disorder (ASD). A recently agreed strategy for ASD provides an appropriate approach to better coordinate services to ensure consistent provision.

50. The youngest children with learning difficulties and/or disabilities, from birth to age five, receive good access to health services such as speech and language therapy, and occupational therapy in special schools and local nursery settings. Considered and thoughtful planning for children with long-term health needs in the move from nursery settings to school gives both the parents and the receiving school confidence that needs can be met in local mainstream provision.

51. Statutory statementing processes for children with special educational needs (SEN) are carried out securely within expected timescales. However, the promotion of inclusive practice is not fully effective: although reducing, the percentage of statements at 3.8% remains above similar authorities (3%) and national figures (2%), the proportion of children and young people with statements in special schools remains higher than elsewhere, and full delegation of funding for pupils with statements has not been implemented. Local data and knowledge of school performance is not currently used consistently well to evaluate the overall effectiveness of the inclusion strategy or to inform strategic development of SEN provision. Gaps in strategic development have been identified and the new leadership structure addresses this with a new post which includes responsibility for special educational needs.

52. Children and young people with learning difficulties and/or disabilities usually do well at school. In the Foundation Stage, the good partnership between speech and language therapists and teachers supports good progress for those with communication and language difficulties. Ofsted inspection grades illustrate that most children and young people with learning difficulties and/or disabilities make good progress at school. One special school is currently in special measures. There are no mainstream schools where progress is judged to be less than satisfactory and progress is good or outstanding in more primary and secondary schools than in similar councils. Progress in most of the pupil referral units is judged to be good. The proportion (90%) of young people achieving some form of external accreditation by the end of Key Stage 4 is in line with similar councils and the national average.

53. Mainstream schools receive good data and effective challenge to track the progress of children and young people with learning difficulties and/or disabilities. However, insufficient focus has been given to developing systems for tracking progress in special schools. Monitoring information has not been used well to challenge weaknesses in provision where children make insufficient progress.

54. Schools report very good support from a range of specialist services and children and young people with physical and sensory impairments receive very good health advice and technical support to enhance their inclusion in mainstream schools.

55. Children and young people with learning difficulties and/or disabilities have a good range of leisure and recreational activities to choose from and there are opportunities through the Active Involvement Forum for Disabled Children to influence the shape of services. However, there are waiting lists for some activities and the range is not always clearly coordinated and communicated to parents and schools. A high priority is given to the arts and sports activities to motivate young people at risk of exclusion and successfully keep them interested in learning. Voluntary and community groups, including Telford United Football Club and junior Arty Party, provide structured opportunities for achieving through enjoyable activities.

56. A major strength is the flexibility offered through the common assessment and Team Around the Child processes to access leisure activities. Young people can choose an activity that reflects their age and interest and local support workers facilitate their attendance. Opportunities for teenagers include activities such as having a coffee in town or attending organised youth groups. For those with more complex needs there are regular short breaks. Good holiday provision is offered to all ages at The Bridge Playscheme. The youth service provides some outstanding opportunities, such as Club 17 which effectively meets the specific needs of individual young people with learning difficulties and/or disabilities. Although there are some mainstream clubs where children with learning difficulties and/or disabilities are included well, the council has recognised the need to extend the opportunities for them to participate in inclusive activities.

57. The views and opinions of children and young people with learning difficulties and/or disabilities are increasingly contributing to their annual reviews and service development. The Children with Disabilities Forum meets regularly and members are actively involved, for example in the appointment of the commissioner for learning difficulties and/or disabilities and the development of the accessibility strategy. They are also represented on the borough's Young People's Forum.

58. Good arrangements prepare young people for adult life well. At 90%, the proportion contributing to their transition review is well above national (63%) and statistical neighbours (70%). At 82%, the proportion of young people with

learning difficulties and/or disabilities aged 16-19 engaged in education, employment or training is 6% above national figures. This demonstrates good progress over time from 2005 when only 63% of young people with statements continued into post-16 education. Most young people continue into local colleges and activities include Skills for Life courses, GNVQ qualifications and Entry to Employment courses. Schools report good, specialist support from the Connexions 4 Youth service.

59. Arrangements for the transition to adult services are developing well and are under review. The joint Adult and Children and Young People Transition Planning Group identifies young people requiring continuing care, support and provision post-16. Clear written protocols between adult and children's services underpin developing processes for person-centred planning to adult services. There is some good and successful practice in moving young people to adult services although professionals acknowledge further work is required, for example with young people with autistic spectrum disorders, to ensure that transition arrangements are consistently applied.

Other issues identified for further investigation

The quality of the partners' strategy for addressing teenage conception rates and providing support for young parents

60. The quality of the partners' strategy for addressing teenage conception rates and providing support for young parents is adequate.

Major strengths	Important weaknesses
<p>Strong partnership work and collaboration at local level.</p> <p>Effective action to improve and deliver good quality relationships and sex education programmes.</p> <p>Good range of sexual health information, advice and support.</p> <p>Good support for teenage mothers-to-be and young parents.</p>	<p>Collection, use and analysis of data to inform the targeting of resources.</p> <p>Evaluation of the impact and outcomes of the work.</p> <p>Very low proportion of 16-19 young parents in education, training or employment.</p>

61. The APAs of 2006 and 2007 identified the need to reduce the high number of teenage pregnancies as an area for improvement. Teenage pregnancy rates in Telford and Wrekin have been consistently above the national average since 1998. Reducing the teenage pregnancy rate is one of the top priorities of the Children and Young People's Plan and a key Local Area Agreement target. The Teenage Pregnancy and Parenthood Strategy 2006-2009 sets a clear vision and priorities for improving outcomes for children, young people and families. The strategy was developed following good consultation with young people and

teenage parents and a wide range of stakeholders. The strategy accurately recognises the complex issues surrounding teenage pregnancy, such as the link with aspirations and multiple deprivation, and acknowledges the significant challenge presented by the national target to achieve a 55% reduction in the teenage pregnancy rate by 2010.

62. Taken together, the partners' action to reduce the rate of teenage pregnancy has not had sufficient impact. Although the teenage conception rates decreased at a faster rate than the national average between 1998 and 2006, the rate remains significantly higher than the national average for England and that of similar authorities. The partnership is therefore not on track to meet the national reduction target by 2010. Until recently, there has been insufficient targeting of resources on the areas of greatest need and insufficient focus on vulnerable groups. The partnership does not have a robust performance management system in place to monitor and evaluate the outcomes of work undertaken to date. The collection, use and analysis of data are under-developed. A number of important project reports include raw data with no trend information and little evaluation of impact. The partners recognised these key weaknesses in a thorough self-assessment undertaken in 2007. A draft performance management framework has now been developed and provides a good basis from which to move forward. Very recent action to improve the reliability and timeliness of data means partners are in a much stronger position to prioritise actions and target resources.

63. Recent improvements in information management systems, such as the Eclipse system for maternity services, together with data provided by the British Pregnancy Advisory Service, are starting to provide a clear and up-to-date picture of local conceptions, abortions and maternities in each area of the borough. Local data from the Child Health System in the Primary Care Trust currently indicates a marked reduction in teenage pregnancy rates for January to June 2007. However, it is too early to judge whether this represents a sustained downward trend in teenage conception rates.

64. Over the past two years, well-planned and effective action has been taken to improve the quality of relationships and sex education (RSE) in primary and secondary schools. This has included the creation of a dedicated RSE coordinator post based in the school improvement team. The partnership recognises rightly that there is still more to do to ensure that schools are fully engaged. The partnership has been responsive to feedback from young people in redesigning RSE programmes. The local approach places a positive emphasis on the importance of relationships in their entirety and equipping young people with the knowledge, skills and confidence to make informed choices about their lives. Programmes are adapted well to meet the particular needs of young people in special schools and PRUs. The capacity of the community school nurses team is being increased to better support RSE work and to enable the service to operate during the school holidays.

65. The systematic targeting of resources is at an early stage of development. Where a targeted and comprehensive approach to raising awareness has been undertaken, for example in schools in the central cluster, there are early signs of a very positive impact on behaviour, attitudes and outcomes. One school in particular has seen a systematic reduction in conceptions amongst young women aged 11–16, from eight, six and five pregnancies in the preceding three years to no known conceptions since September 2007. Lessons learned from this approach have yet to be rolled out fully across the borough.

66. Young people have access to a good range of information, advice and support through contraception and sexual health services and health promotion. There is good engagement from all key partners and effective inter-agency collaboration at local level. Young people are referred promptly to the specialist services when needed. Notable improvements have been made to waiting times for genito-urinary medicine appointments with 97% of appointments offered within 48 hours. A condom distribution scheme operates across the borough, in 36 venues which include schools, colleges and youth clubs. Well-targeted work by the Connexions 4 Youth service has been effective in encouraging young people to defer parenthood. Health drop-in centres are established in most schools but a survey in 2007 showed that not all were used to full effect. The partnership has actively sought the views of young people on branding, promotion and further development. Many GP practices have participated in the local accreditation scheme and been judged 'young people friendly'.

67. There are also good specialist services, such as Relationship, Information, Sexuality and Questions (RISQ) and Sexual Health for You (SHY), offering confidential services to young people under 25, which include counselling, medical treatments and outreach education programmes. Young people have good access to pregnancy testing and emergency contraception in primary care settings and all pharmacies. Following significant improvements in the availability of counselling and termination services, young women have good access to timely support which enables them to make informed choices about their pregnancies. There are sufficient termination services to meet need.

68. A dedicated sexual health programme for looked after young people provides well-targeted education packages for this group and a rolling programme of training for foster carers that is highly valued. The Speakeasy programme is used to support the education of carers and develop their confidence and skills in talking to children and young people about relationships and sex. This good practice is being built upon and the programme adapted for use with other parents and carers.

69. Good support is provided to teenage mothers-to-be and young parents by a wide range of statutory and voluntary agencies who work across the borough to ensure services are well coordinated and provide choice and seamless support through pregnancy and beyond. A specialist Teenage Identified Midwives Service meets the particular needs of young women up to the age of 18 very well. Dedicated health visitors are deployed in each of the five clusters

and support young parents in accessing services such as those provided in local children's centres and early years settings. The proportion of low birth weight babies is in line with similar areas and the national average. Immunisation rates for babies aged two and five years are in line with similar areas and the national average.

70. Well-planned education programmes are tailored to the individual needs and circumstances of young mothers aged under 16 and enable them to complete their compulsory education and achieve their qualifications. The council ensures that all young parents are housed in suitable accommodation and provides a small number of supported units where young parents are helped to develop independent living skills.

71. Most young parents have good access to self-help and support groups, such as Parent Craft, Bump 2 Baby and Cheeky Monkeys. These groups help to promote healthy lifestyles and provide practical sessions on parenting skills. Effective action has been taken to increase breastfeeding: rates have been above similar areas and improving faster than the national average for the last four years. Young parents' groups are well attended and highly valued, however access is more limited for those who live in the more remote areas and rely on public transport. Positive efforts have been made to engage young fathers, for example through the development of carefully designed information leaflets. However, partners recognise that their specific needs are not always well met by current provision. Detached youth work targeting young men and potential young fathers is planned but at an early stage of development.

72. At 20%, the proportion of young parents aged 16-19 in education, training or employment is very low compared to the national average and similar areas. The Bump 2 Baby programme, which to date has had an effective focus on health, personal development and reducing isolation, is being reviewed to better support young people to re-engage in formalised learning. The Care 2 Learn grant is successfully enabling 25 young mothers to participate in further education by funding high quality childcare. However, the scheme is not widely known about and work is underway to better promote it, for example through employment and benefit services. The partnership recognises there is much more to do to increase the numbers of young parents in education, training or employment and is making appropriate links with the 14-19 strategy.

Service Management

Inadequate



Adequate



Good

X

Outstanding



Capacity to improve

Inadequate ☐Adequate ☐

Good

XOutstanding ☐

73. The management of services for children and young people is good. Capacity to improve further is also good.

Major strengths	Important weaknesses
<p>Clear commitment to ambitions for children and young people at the highest levels of the local authority and its partner organisations, communicated down to and shared by officers and staff.</p> <p>Excellent partnership working.</p> <p>Good focus on early intervention and prevention, closing the gap and delivery of multi-disciplinary, inter-agency services in local cluster arrangements.</p> <p>The involvement and engagement of children and young people at both strategic and operational levels.</p> <p>Good professional development opportunities and training.</p>	<p>The lack of high quality information to inform performance management in some service areas.</p> <p>Capacity pressures in children's social care case management teams.</p>

74. Ambition for children and young people in Telford and Wrekin is outstanding. The Children and Young People's Plan, 2008-11, contains a clear vision, underpinned by an excellent and sustained focus on the Every Child Matters principles of early intervention and prevention, narrowing the gap, and delivery of multi-disciplinary, inter-agency services in localities known as School and Community Clusters. These ambitions are interwoven well with those for the wider community. The localisation agenda is at the heart of strategic development, not only for children and young people but also for the wider citizenry of the borough. Ambitions for children and young people are firmly owned at the highest levels of the council and partner organisations, including strong commitment from the Chief Executives of the council and the primary care trust, leading to ambitions being well embedded.

75. The new Children and Young People's Plan identifies a manageable number of key priorities, which are shared by all partners and based on very good knowledge of local need in clusters. These priorities relate appropriately to the new Local Area Agreement and to the Local Strategic Partnership's 'Vision 2026 – Transforming Telford and Wrekin: From New Town to Modern City', which identifies giving children and young people the best possible start in their lives as one of its six key priorities. Equalities and diversity issues are suitably considered within this context. The newly developed council Portfolio Management Plan is a useful addition to strategic planning and supports the development of a clearer 'golden thread' from the Children and Young People's Plan to service business plans and individual personal development plans.

76. Partnership working is excellent, including through Children's Trust arrangements but also across the wider agenda of regeneration, skills and economic development. Managers and staff across the council and in partner agencies have a clear understanding of the ambitions and how they can contribute to fulfilling them, both in the short and long term. Thus, operational delivery is well rooted in strategic objectives.

77. The involvement and engagement of children and young people at both strategic and operational levels is very good, including hard to reach groups. However, the involvement of parents and carers, whilst being good at service level, for example, in relation to parents of children and young people with learning difficulties and/or disabilities, is not developed at a strategic level. Appropriate plans are in place to address this.

78. Prioritisation is good. The eight key priorities in the new Children and Young People's Plan rightly include areas of weaker performance to date such as teenage pregnancy and young people not in education, employment or training. In addition, several cross-cutting strategic development priorities have been sensibly identified as integral to taking the Every Child Matters agenda forward. These include the delivery of Campus Telford and Wrekin, the Building Schools for the Future programme, which places schools and other facilities within Learning Communities at the heart of localities. Change for Children Boards, the locality boards for clusters, have developed their own plans, which identify clear local priorities, although these are not yet sufficiently focused on measuring outcomes.

79. The council has achieved Beacon status for Integrated Children's Services (2005-06), Early Intervention for Children at Risk, and Culture and Sport for Hard to Reach Groups (both 2006-07). Resources are well directed to these areas, both at a strategic level and at a locality level in clusters, including through the effective use of the Common Assessment Framework and Team Around the Child. Preventative services are easy to access and individually tailored and successful packages of support are provided, although there are currently insufficient means of quantitatively identifying the overall impact of these activities on outcomes. This is being addressed. Good examples of services which are successfully preventing escalation of need include the

introduction of the budget holding lead professional pilot, which is now being mainstreamed, and the use of senior mental health workers and the Relateen counselling service.

80. In some cases, such as integrated workforce planning and the creation of an overarching joint commissioning strategy, formal strategic planning is underdeveloped. This has been a conscious approach on the part of the council to develop high-level commitment to ambitions through leadership of the agenda, supported by effective implementation of integrated locality working as a cultural change tool, before using learning from these activities to inform more meaningful strategies. Consequently, engagement of all stakeholders is high, with a common understanding of the agenda.

81. Value for money is good overall. It is enhanced by efficiencies through partnership working, in a council with low council tax, a Dedicated Schools Grant below that of neighbouring councils, and a general trend of improvement in outcomes. Financial management is sound, with an appropriate focus on reducing the overspend on children's placements, and there is formal consideration of value for money in the council's service business plans. However, partnership analysis of this measure is underdeveloped in the Children and Young People's Plan and at the Children's Trust Board.

82. The capacity of the council and its partners is adequate. Capacity is enhanced by highly committed officers and staff who have developed effective relationships across the council and partner agencies at both strategic and operational levels, supported well by good training and professional development opportunities. The introduction of integrated service managers in clusters has also enhanced capacity to deliver priorities locally.

83. Elected members take their responsibilities for children and young people seriously, including their corporate parenting role. There is clear cross-party support for taking the children and young people's agenda forward and all parties have contributed to a smooth transition during a relatively recent change in administration, thus avoiding any potential for short-term negative impact on operational activity. The new portfolio holder for children and young people is dedicated to both championing the vulnerable and delivering improvement in universal services. He has already successfully increased the number of councillors undertaking statutory visits to children's homes and becoming school governors. Scrutiny also makes a useful contribution, with particular commitment from the Corporate Parenting Scrutiny Monitoring Group and effective reviews of such issues as foster care and leaving care services, which have led to improvements.

84. Lack of a substantive Director of Children's Services for a substantial period of time, together with the recent loss of two experienced Heads of Service, has given other officers good opportunities for professional development. However, the overall impact has been to stretch leadership and management capacity in the portfolio close to the limit of its reserves. The

recent arrival of the new Director of Children's Services has now enabled a renewed focus on strategic development. There is, however, insufficient capacity in the two children's social care long-term case management teams, which reduces the effectiveness of their work.

85. Although there is no overarching joint commissioning strategy in place, joint commissioning, through the Joint Commissioning Unit established in 2003 between the council and the primary care trust, has been used as an effective tool to meet need. Integrated workforce planning is in its infancy, although there are appropriate partnership workstreams in place under the Children's Trust Board to take the agenda forward beyond the good focus to date on training. Strategic engagement with the voluntary and community sector is underdeveloped in relation to smaller, local organisations, however suitable plans are in place in the Children and Young People's Plan to address this.

86. Performance management is adequate overall. Appropriate performance monitoring structures and systems are in place within the children and young people's portfolio and the theme groups of the Children's Trust Board to enable the council and its partners to know how overall performance is progressing and the level of improvement made. The approach to target-setting is sound and the portfolio management team has rightly focused on intractable issues such as the high costs of children's placements, putting sensible mechanisms in place to address underlying issues.

87. However, in some of the areas inspected, for example teenage pregnancy and youth work, there is a lack of more detailed high quality management information. There is insufficient disaggregation of data to inform analysis of impact of specific strategies and outcomes of particular activities. Additionally, there is a lack of quality assurance mechanisms, such as the systematic collection of evidence of practice from social care case file audits. Whilst high level focus within the Children's Trust Board is clear on key issues, such as young people not in education, employment or training and teenage pregnancy, the lack of prioritisation in the previous Children and Young People's Plan resulted in processes not being rigorous enough to enable strategic leaders to fully and effectively evaluate progress on the plan and ensure maximum impact of partnership. The new Children and Young People's Plan, and its relationship to the Local Area Agreement, better supports the ability of partners to add value to performance management.

88. The capacity of the council and its partners to improve further is good. The council and its partners are well aware of areas which need further development and now have a new Children and Young People's Plan which is much better equipped to support them in delivering targeted improvements. After a lengthy period of hiatus without a substantive Director of Children's Services, there is now clarity of leadership arrangements and sound plans for structural reorganisation in children's services to better meet the needs of the developing Every Child Matters agenda. These plans further increase capacity at Head of Service level and are sensibly designed to enable the locality and

partnership agenda to be drawn more overtly into the structure. The high quality of partnership working enhances financial and operational capacity. Change has been well managed, notably in cluster arrangements, and has benefited service users. There has been a general trend of improvement in performance to date, with the council now reaching national averages in many areas.

Annex A

MOST RECENTLY PUBLISHED ANNUAL PERFORMANCE ASSESSMENT OF SERVICES FOR CHILDREN AND YOUNG PEOPLE IN TELFORD AND WREKIN.

Summary

Telford and Wrekin Borough Council provides a good level of service to children and young people. The council has improved its services for looked after children and young people this year and as a result outcomes for them have improved. Services for young children continue to be effective and multi-agency collaboration enables families to benefit from this integrated approach. The services offered through the council and their partner agencies are flexible, responsive and provided in a timely and efficient way. The council's capacity to improve is good, whereas last year it was outstanding; this reflects the council's own evaluation. This reduction in capacity is mainly due to the absence of the Director of Children's Services for much of the year.

The full annual performance assessment can be found at:

http://www.ofsted.gov.uk/reports/pdf/?inspectionNumber=3154&providerCategoryID=0&fileName=\\APA\\apa_2007_894.pdf

Annex B: Summary of the Enhanced Youth Inspection Report

Main findings

1. Youth work provision in Telford and Wrekin is good, and the local authority sufficiently secures its provision. The integration of youth and Connexions services in 2007 has progressed quickly and effectively, producing a more coherent service for young people. Their achievement is good, especially in vulnerable groups. The outcomes of well-targeted project work are very positive and, for young people with learning difficulties and disabilities, outstanding. However, the narrow range and restricted availability of accreditation are denying a significant proportion of young people the opportunity formally to recognise their achievements. Youth work practice is strong, and workers typically enjoy good relationships with young people. There is a good mix of qualifications and experience, which is well deployed and supplemented by expertise from partner organisations. Young people's needs are thoroughly analysed at all levels, and responsive programmes are developed by youth workers to meet them. Youth work provision is dynamic and flexible, and, for target groups, is inclusive and well differentiated. Access to provision is variable, and in some locations there is a significant lack of suitable accommodation. Access to information and communications technology (ICT) is also too limited. Leadership and management are good. The business plan is clear and consistent with those of partners. Partnerships are very strong and varied. Management information and quality assurance of practice are barely adequate, although a single quality assurance system for Connexions 4 Youth is beginning to enhance sessional youth work assessments with the assessment of individual practice.

Key aspect inspection grades

Key Aspect		Grade
1	Standards of young people's achievement	3
	Quality of youth work practice	3
2	Quality of curriculum and resources	3
3	Leadership and management	3

Inspectors make judgements based on the following scale

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

Strengths

- Young people's achievement is good, especially among vulnerable groups, and, among those with learning difficulties and/or disabilities, it is outstanding.
- Most youth work is good or better and is delivered by workers who are well qualified, motivated, experienced and respected by young people.
- The analysis of young people's needs is comprehensive and coherent.
- Youth work provision is flexible and responsive.
- The integration of the Youth Development and Connexions services is progressing well.

Areas for development

- Increase the range and take-up of accreditation opportunities.
- Improve the overall quality and availability of accommodation and ICT.
- Establish a management information system which meets the needs of an integrated service.
- Improve the quality assurance of professional practice.

Annex C

CORPORATE ASSESSMENT ACHIEVEMENT - CHILDREN AND YOUNG PEOPLE

1. Outcomes for children and young people in Telford and Wrekin are generally good. Most health outcomes are in line with similar councils and all referrals to specialist mental health services are seen within expected timescales. Educational achievements are in line with similar councils. Looked after children live in stable placements and a high number receive timely health assessments. Young people have good opportunities to contribute their views and these influence changes in service delivery. A high proportion of careleavers and young people with learning difficulties and/or disabilities is engaged in education, employment or training, although the overall proportion for young people in Telford and Wrekin has fallen and is now slightly below the national average.
2. Service management in Telford and Wrekin is good. Strong ambitions for children and young people are shared at the highest levels. The Children and Young People's Plan and its priorities link well with other strategic plans and resources are well directed to these priorities. Partnership working is very strong. Integrated workforce planning and strategic engagement with smaller voluntary organisations are underdeveloped although plans are in place to address them. Performance monitoring arrangements are in place but good quality management information is not gathered or used systematically to provide an overview of the performance of individual services and secure continuous service improvements across the partnerships as a whole.
3. The combined work of all local services in securing the health of children and young people is good. Partners and schools work effectively to promote healthy lifestyles. The number of schools achieving Healthy Schools standards is increasing, although partners recognise that more action is needed to achieve the target. Parents and carers of younger children with disabilities receive very good support. There is a comprehensive child and adolescent mental health service which offers timely intervention, although they have identified the need to extend services for those with autistic spectrum disorder. Good support is provided to teenage mothers-to-be and young parents but the rate of teenage conception remains persistently high.
4. Children and young people appear safe and arrangements to ensure this are adequate. A significant reduction in the number of children killed or seriously injured in road accidents has resulted in a very low figure. Partners collaborate very well to deliver outstanding family support services, delivered by five well-established local multi-agency cluster teams. Good action is taken to promote awareness of and tackle domestic abuse. Sound action is taken to ensure children at risk of harm are protected and social care arrangements to respond to referrals are adequate. Agencies work together effectively and communicate well to produce good outcomes for most young people. However

not all cases are allocated promptly to a named social worker and this, combined with the variable quality of care plans leads to some inconsistent practice.

5. The impact of all local services in helping children and young people to enjoy their education and to achieve well is good. Children receive a good start in education and sound progress is maintained throughout primary school. Progress in secondary education is not as good. At Key Stage 3, standards are in line with the national average, but the improvement trend is starting to fall below national averages. GCSE results continue to improve and are in line with the national picture, but there has been less success in securing good grades in English and mathematics. GCSE results for looked after young people are in line with the national average, but the number missing school for more than 25 days has risen sharply. Children with learning difficulties and/or disabilities usually do well at school, however a special school has recently been placed in special measures. The rate of permanent exclusion reduced significantly between 2005/06 and 2006/07 from 45 to 17. Robust arrangements ensure good managed transfers and prompt educational provision for excluded pupils.

6. The impact of all local services in helping children and young people to contribute to society is good. The council is committed to providing good opportunities for young people to contribute their views and responds positively to the results of consultation. All looked after children's reviews are held on time and almost all young people participate in them. Looked after young people are well consulted on services and have influenced changes. A high number of young people with learning difficulties and/or disabilities contribute to their transition reviews, and are well supported by the local multi-agency cluster teams to access leisure activities. The youth offending service is well managed and services are linked appropriately with partners' strategies and priorities.

7. The impact of all local services in helping children and young people achieve economic well-being is good. Strong partnerships promote awareness of career opportunities and raise young people's aspirations. A well planned and delivered 14-19 strategy helps to maintain good quality education and training. The proportion of young people not in education, employment or training has risen and is slightly above the national average. Very good support has resulted in all care leavers living in suitable accommodation and a high level of engagement in post-16 education and training. Good arrangements prepare young people with learning difficulties and/or disabilities well for adult life and the improving rate of those engaged in education, employment or training is above national figures.

8. The capacity of the council to improve is good.

Annex D

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 Telford and Wrekin 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).