



Joint area review

North Yorkshire Children's Services Authority Area

Review of services for children and young people

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

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

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

Context

7. North Yorkshire is England's largest geographic county and one of its most sparsely populated rural areas. It has a low population, of whom one-fifth are aged 0 to 19 years. Twenty-one per cent of residents live in the two main towns, Harrogate and Scarborough, with most of the remainder living in 28 small market towns or villages. The county has a very small black and minority ethnic (BME) population (1.1%), mainly of Chinese, Indian and Pakistani origin, but is attracting growing numbers of people from Eastern Europe. Travelling families, some of whom live in settled communities, form a small minority of the population.

8. Unemployment and crime levels are comparatively low and people are generally healthier than the average for England. However, there are problems of rural isolation and some severe urban deprivation in parts of Scarborough, Selby and Colburn that affect outcomes for some children and young people.

9. The county council is Conservative controlled and a leader and cabinet manage its strategic direction. The North Yorkshire Children and Young People's Strategic Partnership board, which has good representation and participation from all the relevant statutory and voluntary agencies, drives the delivery of children's services. A Director for Children and Young People heads a single children's services department. A Local Safeguarding Children Board is in place.

10. Primary care for children in North Yorkshire is provided by the Selby and York Primary Care Trust (PCT), Hambleton and Richmondshire PCT, Scarborough, Whitby and Rydale PCT and Craven, Harrogate and Rural District PCT. These four PCTs merged into one on 1 October 2006. Airedale National Health Service (NHS) Trust, Harrogate and District NHS Foundation Trust, and Scarborough and North East Yorkshire Healthcare NHS Trust are the main providers of acute health services. Other children's hospital services and accident and emergency services are provided by South Tees Hospital NHS Trust, York Hospitals NHS Trust, and County Durham and Darlington Acute Hospitals NHS Trust, which are based outside North Yorkshire. Children's mental health services are provided by Hambleton and Richmondshire PCT, Tees, Esk and Wear Valleys NHS Trust, Selby and York PCT, and, outside North Yorkshire, Bradford District Care Trust. The trusts providing health services for the children of North Yorkshire, with the exception of the Ambulance Service, fall within the Yorkshire and the Humber Region.

11. The area is served by North Yorkshire police. There are seven district councils, a Learning and Skills Council and a Connexions Service. A large number of voluntary agencies deliver a wide range of services across the area. Some are commissioned from national agencies and some are community responses to local need.

12. There are three nursery schools and 328 primary schools. The smallest primary school has 10 full-time pupils on roll and the largest has 594 (January 2006 DfES census figures). There are 47 secondary schools (full-time pupils on roll range from 139 to 1,794) of which 24 have sixth-form provision. There are 11 special schools and two pupil referral units in Harrogate and Scarborough. There are five resourced provisions in mainstream schools and two resourced schools for deaf children and those with hearing impairment. There are 438 providers of non-maintained early years provision and 791 registered childminders. There are 417 looked after children and young people, most of whom live in families with foster carers. A small number are placed for adoption.

13. North Yorkshire Learning and Skills Council (LSC) are partners with the local authority, colleges, training providers and schools in addressing the 14–19 strategy. Post-16 education and training is provided by four further education/tertiary colleges, 23 sixth forms, one sixth form college and a number of work-based training providers. Education into employment (E2E) provision is managed by a local consortium. Adult and community learning, including family learning, is provided by the local authority.

14. There are no young offender institutions in the area for young people under 18 years.

Summary report

Outcomes for children and young people

15. Outcomes for children and young people in North Yorkshire are good overall. Children and young people have high or very high self-esteem. Most children and young people appear safe and most report feeling safe. Children who are most at risk in the community are appropriately identified but, for some, child protection arrangements are not working effectively enough to minimise abuse and neglect. Family support contributes effectively to preventing children becoming looked after but those that enter the care system do not have a good enough opportunity to participate in their reviews: the number of those doing so has fallen to an unacceptably low level. The health and well-being of children and young people is good, rates of teenage pregnancies are low, well below national average, and infant mortality levels are also low. Most have good access to health services and support: while access to child and adolescent mental health services (CAMHS) is generally good, it is variable for children with learning difficulties and/or disabilities and

for young people involved in offending behaviour. Young children are very well prepared for school and benefit from good early years provision. A high percentage of children and young people attend school regularly, behave well, enjoy their education and achieve very high standards. Support for pupils from vulnerable groups is good; this includes tracking the individual progress of pupils from BME communities to ensure they have the support they need to achieve well. Young people, including those in more rural areas and those with learning difficulties and/or disabilities, have good access to youth service provision and leisure activities. However, the range and amount of specific support for families of children with learning difficulties and/or disabilities is variable. The number of first-time offenders is falling but is still higher than comparators; fewer young people re-offend than the national average. Very high numbers of young people, including those leaving care, are engaged in education, employment or training and most achieve well. There is very good consultation with children and young people, and good examples of young people participating in aspects of service planning and delivery.

The impact of local services

16. **The impact of local services in improving outcomes for children and young people is good overall, but with individual services varying from adequate to excellent.** Health outcomes are good and effective inter-agency working contributes well to this. There is a well coordinated approach to promoting healthy lifestyles for children and young people, including drugs, alcohol and sex education delivered in imaginative ways in schools and community settings. However, the contribution of the health service to achieving good outcomes is only adequate, due to a current lack of capacity in some specialist areas, for example designated doctors, specialist speech therapists and paediatric nurses, which affects the quality of service or leads to delays in service provision for some children. Some of these are unlikely to be resolved because of staffing difficulties and financial pressures.

17. Children's social care services are adequate. Children and young people most at risk are identified and appropriate action is taken to protect them. Good support and advice is given to parents and carers on how to keep their children safe. Recruitment procedures are sound and vetting is thorough. Most child protection enquiries are appropriately completed. Children on the child protection register (CPR) are all allocated to qualified social workers and plans are regularly reviewed. However, many assessments are not completed within the required timescale and their quality is not consistently satisfactory. This leaves some children without the support they need. Assessment and services for disabled children are not yet integrated, affecting service coordination and delivery adversely. The safeguarding of looked after children is generally good. The rate of children looked after is comparatively low and has reduced further due to tighter gate keeping and improved preventative support.

18. Education services are excellent and have a clear impact on the very good achievement of children and young people. High numbers of children and young people are consulted regularly on a range of issues. Opportunities for participation by children and young people in service planning and delivery are good. Targeted support for vulnerable young people is very good in some areas but is not consistently available across the county. Access to youth service provision and to leisure and sporting activities is good. The pace of partnership working is good in developing broader provision for 14–19 year olds. Collaboration between partners is very effective in ensuring high numbers of young people in education, employment and training. However, monitoring of 14–19 provision to ensure equal access for all is not systematic. Access to affordable childcare for parents with low incomes is limited. Mechanisms for monitoring and tracking achievement of looked after young people are not robust.

19. Service management is good overall, despite weaknesses in performance management in children's social care services. Capacity to improve is good. There is a record of delivering high quality and improving services at reasonable cost. Within the NHS, leadership for children across the PCTs provides strong direction. Plans for further integration of services for children and young people and a move to locality working are well in hand. The council's self-assessment demonstrates good self-awareness and knowledge of where and how improvement is needed. Inspectors broadly concur, with two exceptions: there are some significant weaknesses in the quality of provision for children in need, and some areas for further improvement in enabling young people to achieve economic well-being.

Being healthy

20. **The impact of all local services in securing the health of children and young people is good.** Hospital services for children are adequate and partnership working is good, with universal and targeted multi-agency services supporting parents and carers well in keeping children healthy. A well coordinated approach to promoting healthy lifestyles for school children and young people is effective, leading to good outcomes. Infant mortality rates are low, immunisation rates are higher than the national average in most of the county, and rates of teenage pregnancy are well below the national average and show a downward trend. Very high numbers of schools are involved in the Healthy Schools initiative and there are good programmes of drug, alcohol and sex education delivered in imaginative ways in schools and community settings. There are good examples of services for young people with drug or alcohol problems, including good use of voluntary sector provision, such as the Cambridge Centre in Scarborough, but there is no substance misuse strategy.

21. Multi-agency assessment and support for children with learning difficulties and/or disabilities is good, especially in the early years, but services for many individual children lack coordination by a key worker. Access to CAMHS is also generally good but, in parts of the county, mental health services for children

and young people with learning difficulties and/or disabilities have not been developed, leaving these children without an appropriate service. Not all young people involved in offending behaviour with mental health needs are consistently referred to CAMHS, which is unsatisfactory. However, dedicated CAMHS teams provide effective support to looked after children and their carers. Health care for looked after children is generally good but designated doctors are not in place for all of them. Some medical assessments are carried out by a variety of GPs rather than paediatricians, which results in less comprehensive reports that could leave some children's health needs not fully identified. Targeted services for travellers and homeless families help to ensure their health needs are met.

Staying safe

22. **The impact of all local services in keeping children and young people safe is adequate.** Information and advice to parents and children about personal safety in the environment are good and promoted effectively. Protocols and systems to track missing children work well, staff recruitment procedures are sound and satisfactory processes identify children most at risk.

23. Child protection procedures are generally effective: most enquiries are appropriately completed with good sharing of inter-agency information at a local level; all children on the CPR are allocated to qualified social workers; and reviews are held at the required intervals. However, for a growing number of children, child protection plans are not proving to be effective enough in ensuring longer-term safety. Too many children are being re-registered on the CPR indicating concerns regarding the quality of decision-making at child protection conferences. There are delays in completing initial assessments in some areas and plans lack clear focus on the needs of and impact on the child. The numbers of core assessments completed is low, which means that some children may not get the services they need. Core assessment work, particularly in relation to parental substance misuse and domestic violence, is often not informed by other agencies and lacks clear analysis. Arrangements to ensure access to legal advice 'out of hours' are not satisfactory. Emergency protection orders to protect children are not always used when appropriate.

24. Looked after children benefit from placements that are mostly with foster carers and are stable for many children. Services to support children looked after in foster care and with adopters are good. Placement choice has improved, though less so for older children. Most services for children with learning difficulties and/or disabilities are not integrated and many wait too long for an assessment of their needs and for services.

Enjoying and achieving

25. **The impact of all local services in helping children and young people to enjoy their education and recreation and to achieve well is excellent.** Good levels of support, information and advice are provided to parents and carers, particularly through Sure Start facilities and the growing

number of children's centres. The high standard of early years education and childcare is maintained through good links with voluntary and private settings and excellent training and support.

26. The quality of educational provision in schools is very good, educational attainment of pupils exceeding the national average at virtually all levels. The attainment of vulnerable groups is generally high and children from traveller families receive effective additional support. The attainment of looked after children is improving and is above the national average, but a high percentage of them do not have a completed personal education plan.

27. Levels of school attendance are very good. A wide range of successful strategies, such as focus weeks in schools and attendance presentations, are used well to maintain and increase these figures. Fixed-term and permanent exclusions are low and decreasing because of, for example, effective collaboration between schools and the use of learning support units to support children to remain in mainstream provision. Support for schools where some children underachieve, or have lower than expected attainment, is exemplary, resulting in very few schools causing concern. The availability and analysis of data is insufficiently well developed for special schools, making it difficult to target improvement. Concentrated efforts to include children and young people with learning difficulties and/or disabilities in mainstream provision are showing good results.

28. Good opportunities for recreation help children to enjoy life and stay healthy, and good use is made of mobile facilities to reach children in smaller and more isolated communities.

Making a positive contribution

The impact of all local services in helping children and young people to contribute to society is good. Services provide good support for children, young people and their families. A directory of family services is well presented with useful information and good signposting, which helps families access the right services. The home-to-school support service is highly valued by parents, helping them to manage their children's behaviour more effectively. Schools provide good support for pupils' social and emotional development. Most young people are very positive about the support they receive from the Connexions Service in helping them to re-engage in school, or gain employment.

29. There is a very good range of consultation activities with children and young people. Young people also participate well in aspects of service planning and delivery, for example they were involved in recruiting, tendering, developing a website and a newsletter for Children's Fund activities. Levels of achievement and accreditation within youth service activities are good and young people, including those in more rural areas and those with learning difficulties and/or disabilities, have good access to youth provision.

30. Effective targeted support for many vulnerable young people is in place. A wide range of good support is offered to young carers by the carers' centres. The extent of additional specific support for families with disabled children is variable. Effective targeted support for vulnerable young people at risk of anti-social behaviour is in place in four areas, but not across the county. Overall, the work of the YOT in working with young people to help them address their offending is adequate.

Achieving economic well-being

31. **The impact of all local services in helping children and young people to achieve economic well-being is good.** The majority of parents and carers have increasingly good access to day care, but access to training or employment opportunities for parents and carers on low incomes is limited by the lack of a scheme to subsidise childcare fees. Very high numbers of young people are engaged in education, employment or training and the whereabouts of almost all young people is known as a result of effective collaboration between partner organisations.

32. A comprehensive structure delegates the planning, development and monitoring of 14–19 provision to local partners in different parts of the county. The pace of partnership working is good in developing broader provision for 14–19 year olds. The development of vocational options is gaining momentum, with an increasing number of young people making appropriate choices. However, overall, there is insufficient systematic monitoring of development to ensure that all young people have the same access to provision. Most pupils at Key Stage 4 gain adequate work-related experience through education and business partnerships but work-based providers are insufficiently involved at a strategic level.

33. Strategies to support the transition of looked after children and young people into adult life and for them to achieve economic independence through education and/or employment and financial support are good. The authority and its partners have developed, and implemented, a very good strategy to prevent homelessness. The large majority of young people with learning difficulties and/or disabilities make good progress into post-16 education. However few progress beyond level 2.

Service management

34. **The management of services for children and young people is good. The capacity to improve further is good.** There are clear and challenging ambitions for the area, based on a shared understanding of local needs and on extensive consultation with children and young people, parents and carers. Prioritisation is good. The Children and Young People's Plan (CYPP) is clearly laid out with well-structured objectives, key activities, milestones and targets. Lead responsibilities are clear. There is a strong focus on the most vulnerable children and young people, with emphasis on prevention and

inclusion. For the most part, the capacity to achieve what is required is good. Partnership working is effective in many services, and the council delivers good value for money. There is a strong culture in this regard, led by elected members, with tight budget monitoring and scrutiny. Management of resources is good. Where there are capacity issues in the county council, most are being addressed effectively. There are some concerns, however, about the ability of the NHS to address capacity shortfalls given its serious financial position in North Yorkshire, even though efforts are being made to minimise the impact of this through reviewing the skill mix of frontline community health staff. Performance management is inconsistent. It is rigorous in relation to school performance, based on appropriate benchmarking, clear target setting and strong challenge. However, deficiencies in children's social care in relation to the availability and analysis of performance management information and inconsistent quality assurance contribute to the persistence of weakness in some areas in social care. Work is in hand through audits and improving performance capacity to begin to address these shortfalls. Capacity to improve is good. There is a record of delivering high quality and improving services at reasonable cost.

Grades

Grades awarded:

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

| | Local services overall | Council services | Health services |
|---------------------------------------|------------------------|------------------|-----------------|
| Being healthy | 3 | | |
| Staying safe | 2 | | |
| Enjoying and achieving | 4 | | |
| Making a positive contribution | 3 | | |
| Achieving economic well-being | 3 | | |
| Service management | 3 | | |
| Capacity to improve | 3 | 3 | |
| Children's services | | 3 | |
| The education service | | 4 | |
| The social care services for children | | 2 | |
| The health service for children | | | 2 |

Recommendations

For immediate action

- The council should review the operation of:
 - decision-making in child protection initial conferences

- the quality of core assessments, the number undertaken and inter-agency contributions
 - the effectiveness of child protection plans
 - arrangements for access to legal advice and the use of emergency protection orders 'out of hours'.
- The council should improve the speed of completion of initial assessments.
 - The council should ensure that all looked after children have a completed personal education plan.
 - The council and its partners should systematically monitor the development of, and access to, 14–19 provision.

For action over the next six months

- The council and its partners should develop and implement a scheme to subsidise childcare fees to improve access to training and employment for parents and carers on low incomes.
- The PCT should put in place a designated doctor for all looked after children.
- The council should increase the numbers of looked after children and young people who participate in their reviews.
- The council should improve performance management information and quality assurance in children's social care.

For action in the longer term

- The council and its partners should develop and implement an integrated approach to the delivery of services for children with learning difficulties and/or disabilities and improve the range and coverage of these services.

Main report

Outcomes for children and young people

35. Outcomes for children and young people in North Yorkshire are good overall.

36. **Overall, children and young people are healthy.** Most children and young people who responded to the inspection survey reported feeling quite or very healthy. Parents, carers, children and young people are provided with good information, advice and support. Teenage pregnancy rates are falling and are well below the national average. Smoking in pregnancy is below the national average in two areas of the county but above in two others. The incidence of low birth weight is below the national average. Deaths of babies around the time of birth, those of infants in the first year of life and of children up to the age of 15, are all below national averages. Immunisation rates in most parts of the county are better than the national average. The reported incidence of measles is low. Oral health is generally less good than the national average. Access to CAHMS is good for most young people, but is variable for children and young people with learning difficulties and/or disabilities and young people involved in offending behaviour. The health of looked after children is good, with 82% having had annual health and dental checks in the last 12 months. Not all looked after children have a designated doctor. In some parts of the county annual medical checks are carried out by general practitioners rather than paediatric doctors which means they are less comprehensive. Healthcare for children and young people with learning difficulties and/or disabilities is generally good. However, a lack of capacity in some specialist areas, for example specialist speech therapists, results in long delays for assessments for some children. There is prompt access to assessment and treatment for most young people with substance misuse problems.

37. **Most children and young people appear safe.** They are well informed about safety. General hazards in the environment, such as those contributing to road traffic accidents, have been identified and reduced effectively. Children who are most at risk in the community are identified appropriately but not all are consistently well protected by the agencies supporting them. In parts of the county, their needs are not promptly assessed, and too many are returned to the CPR because plans to protect them proved ineffective. The views of children and young people and the impact on them of their situation are not well covered in assessment work. The participation of children and parents in planning and decision-making is unsatisfactory. Wider safeguarding measures are working effectively, including protocols for tracking missing children and ensuring that vetting procedures for staff are satisfactorily carried out. The North Yorkshire Safeguarding Children Board has made a good start in addressing its new responsibilities and provides good advice and information to children and families. Family support offers skilled and valued help to many families and contributes effectively to preventing children becoming looked after. Looked after children are effectively safeguarded in their placements. High numbers of looked after children benefit from stable placements with foster carers. Children placed with family or friends are well supported.

38. **Children and young people achieve very well.** There are sufficient early education and childcare places to meet the needs of children and parents although there are some rural areas where options are limited. Young children

are very well prepared for school and benefit from good early years provision. A high percentage of children and young people attend school regularly and enjoy their education. Education standards are maintained at a very high level. Support for pupils from vulnerable groups is good; this includes tracking the individual progress of pupils from BME communities to ensure they have the support they need to achieve well. Support for schools with low achievement is exemplary. School attendance is very good both in primary and secondary schools, with North Yorkshire overall placed in the top six performing authorities nationally. Authorised and unauthorised absence rates have been maintained at a low level for many years, as has the number of fixed and permanent exclusions. Most children have access to good recreational activities and very good use is made of mobile facilities, such as a skate park and recording studio to enable children and young people in rural areas to access provision. Eighty-eight per cent of looked after young people sat one GCSE, significantly higher than the national average of 63%.

39. Children and young people have a good range of opportunities to make decisions and take personal responsibility and many make a good contribution to their communities. Children's behaviour at school is good. Young people, including those in more rural areas and those with learning difficulties and/or disabilities, have good access to youth provision. Of the children and young people surveyed, more than the national average number find it very or quite easy to find things to do locally. Children and young people have high or very high self-esteem. Specific projects provide effective support to many vulnerable young people and families but this is not consistent across the county. Young carers are well supported through a wide range of activities including individual support, clubs, information, advice and representation. Fewer young people re-offend than the national average. The number of first time offenders is reducing but is still higher than comparators. Children and young people with learning difficulties and/or disabilities are generally included well in mainstream provision, but the range and amount of specific support for them and their families is variable. The range of opportunities for children and young people, including looked after young people, to be involved in consultation is very good. There are examples of good participation by young people in service planning which have led to improvements in services. However the number of looked after children participating in reviews has fallen sharply from 80% to 53%. This is unacceptably low.

40. Children and young people are able to achieve economic well-being and are prepared well for working life. The proportion of 16–18 year olds participating in education, employment and training is significantly higher than the national average. The number of young people whose whereabouts is not known is very low. Access to childcare is good for most parents; however some parents on low incomes cannot afford this provision. The proportion of young people who gain advanced level qualifications is good and remains above the national average. Almost all pupils at Key Stage 4 gain work-related experience. Overall success rates for young people on level 1, 2

and 3 courses and apprenticeships in further education and work-based learning are in line with national averages. Participation rates in higher education have increased and are good. The progression of young people with learning difficulties and/or disabilities into post-16 education is good but their levels of achievement are not sufficiently high. The large majority of care leavers are engaged successfully in education or training and almost all live in decent housing.

The impact of local services

Being healthy

41. **The work of all local services in securing the health of children and young people is good.** A good range of universal and targeted services helps parents and carers to keep their children healthy. A good example of multi-agency working, seen in the Sure Start programmes, promotes healthy lifestyles for parents and pre-school children, particularly for those from hard-to-reach groups. In one centre, parents and children were successfully engaged in cook and taste sessions using vegetables grown at a Sure Start centre. Breast feeding is actively promoted with good results in two areas. A targeted service for homeless and traveller families is effective in ensuring their health needs are met. There is a well coordinated approach to promoting healthy lifestyles for children and young people; over 90% of schools are now enrolled in the Healthy Schools initiative. Good programmes of drug, alcohol and sex education are delivered in imaginative ways in school and community settings. In Scarborough, a multi-agency task group is making good progress in tackling binge drinking. Young people responding to surveys show a good level of understanding of the factors important in living healthily. This has improved the quality of their diet and reduced experimentation with drugs. There are very good and varied opportunities for sport, exercise and other recreational activities. A large majority of children and young people surveyed consider themselves to be quite or very healthy. Universal health screening is in place, and all but one general practice offers child health surveillance and support. Access and waiting times for hospital in-patient and day-care services are good. Services for children in hospital are at best adequate: most lack child friendly environments and have insufficient paediatric nurses. Community or hospital outreach teams ensure good access to services in all areas of the county. Contraceptive services, including emergency contraception, are widely available and well publicised.

42. A comprehensive self-assessment exercise informs a new three-year mental health strategy for children and young people. Waiting times for new cases to access CAMHS are satisfactory. There is a clear series of referral pathways agreed with other agencies which ensure that most young people with mental health difficulties are identified and referred appropriately. Care pathways are being developed to ensure consistency. The appointment of primary mental health workers is improving understanding of mental health

issues for children and young people across other professional groups and offer good support in this area to front line staff. There are good examples of support for young people with drug or alcohol problems, including good use of the voluntary sector such as the Cambridge Centre in Scarborough, but there is no overarching substance misuse strategy. Management protocols for children and young people who self-harm are clear and this helps ensure a consistent and appropriate response.

43. The health of looked after children and young people is generally good. The percentage of looked after children having annual health checks is good. However, designated doctors are not in place for all looked after children and some medical assessments are carried out by a variety of GPs rather than paediatricians. This results in less comprehensive reports which could leave some children's health needs not fully identified. Healthy Schools coordinators pay particular attention to the health needs of looked after children. In each PCT, a CAMHS looked after children team provides good support to looked after children and their carers, although many young people have to wait too long for a service due to delays in the provision of relevant information for complex referrals. The health of looked after children is overseen by enthusiastic and committed specialist nurses, who also provide a valuable active training programme for foster carers. Looked after children who move within or out of the county are carefully tracked to ensure their health needs continue to be met.

44. Multi-agency assessment and support for children with learning difficulties and/or disabilities is good, especially in the early years, but many services to individual children lack coordination by a key worker. There is a good level of support from health services for special schools and this expertise supports disabled children in mainstream schools well. Steps are taken to ensure that children with learning difficulties and/or disabilities are included in the Healthy Schools initiative. In two areas of the county, there is a comprehensive mental health service for disabled children and young people but this is less well developed in the rest of the county leaving these children without an appropriate service. In one area, waiting times for assessment of children with possible autistic spectrum disorder are unacceptably long due to a shortage of specialist speech therapists. Transition to adult health care sometimes poses problems for this group of young people and their families, particularly for young people with moderate learning difficulties, due to a lack of appropriate services.

Staying safe

45. **The work of all local services in keeping children and young people safe is adequate.** Children most at risk are identified and appropriate action is taken to protect them. Children and young people surveyed feel that they live in a safe environment. Outcomes for looked after children are good. Most child protection enquiries are undertaken satisfactorily with good

information sharing between agencies at a local level. However, performance in relation to children in need is inconsistent. Significant numbers of children do not have their needs promptly assessed, and for some children, child protection arrangements are not working effectively to minimise abuse and neglect.

46. A well used website on safeguarding children and a widely distributed safe parenting handbook offer an effective range of information for families about keeping safe. Good road safety advice is given to children, young people and parents and high numbers of safe travel to school plans are in place. The number of road traffic accident deaths and injuries is reducing. A 'safety in schools' website is informative and interactive for the notification of outdoor activities and gives useful advice on risk assessment. Similarly, the policy for anti-bullying measures is communicated well through a website readily accessed by children, parents and professionals. An inter-agency domestic violence protocol is in place, but this has not been evaluated for its impact on child protection work. Although an inter-agency protocol for information sharing was drawn up in 2005, frontline staff are unaware of this and in some cases there are difficulties in obtaining information, even with parental consent. The roll-out of the common assessment framework is slow. Protocols and systems to track missing children are effective.

47. The North Yorkshire Safeguarding Children Board is well established and is addressing the wider safeguarding agenda well. It has clear objectives and priorities, and its multi-agency sub-groups are working effectively on agreed actions. Work has already been undertaken to review the safeguarding capacity of agencies and this has led to improved safeguarding arrangements. A comprehensive training strategy covering both general safeguarding and specialist child protection training is available to staff across agencies. However, staff in the youth offending service are inadequately trained in child protection awareness. Serious case reviews and other management reviews have been undertaken appropriately and procedures strengthened to improve child protection work. Lessons from serious case reviews inform inter-agency training. Multi-agency public protection arrangements include York Unitary Authority, and procedures for practitioners in all agencies are clear and are working well. Recruitment practices and vetting procedures are sound. Children's services are implementing three-year Criminal Record Bureau (CRB) checks for all staff in contact with children.

48. In the early stages of referral and assessment work, many children do not have their needs and risks promptly assessed. In some areas of the county, performance in completing initial assessments within seven days is very good but there are marked variations between areas, and overall performance remains below comparators. Referral and re-referral rates have increased and significant numbers of children, including children with disabilities, are waiting for an assessment or service.

49. The recording of strategy discussions in child protection enquiries varies and files lack evidence of clear managerial oversight. Although there is a programme of case audit in place, poor practice is not always identified and challenged. The rate of re-registration of children on the CPR is unsatisfactory. It has increased over the last two years and is above national and comparator rates. This means that for these children inter-agency child protection plans have not been successful in reducing risk. This raises questions about the quality of decision-making at child protection case conferences and suggests that they may have been removed too quickly from the CPR.

50. The timeliness of child protection reviews is good and all children on the CPR are allocated to qualified social workers. Access to the CPR and to legal advice out of office hours is limited by staff availability. This is unsatisfactory. The routine use of police protection orders as an alternative to emergency protection orders out of office hours is not appropriate, as decisions are not informed by a social work assessment. Initial child protection conference reports and core assessments lack sufficient focus on the needs of children and young people. The number of core assessments undertaken is unusually low, which means that the needs of some children are not fully assessed in order to identify appropriate support. There are delays in completing assessments in some areas and many lack a clear analysis of need, particularly with regard to parents abusing drugs and alcohol. In many cases, relevant professionals including the police, probation and substance misuse teams are not making the necessary contributions to inform these assessments.

51. There are no area wide threshold criteria in place. In practice, thresholds for accessing children's social care services are low, enabling early intervention to prevent concerns escalating. Although there is no overall preventative or family support strategy, a mix of services offer a good range of interventions to families through children's centres and outreach work in family homes.

52. The safeguarding of looked after children is generally good. The rate of children looked after is comparatively low. There has been a significant reduction in the number of 10–15 year olds entering the care system in the last six months due to tighter gatekeeping and improved preventative support. A high proportion of looked after children are in foster placements or placed for adoption. Reviews are carried out at the required intervals. The council has had some recent success in recruiting more foster carers, although not sufficient for older young people who are harder to match with appropriate carers. A joint commissioning approach to meeting placement requirements is not in place. Placement stability for looked after children is good, although long-term placement stability has declined recently.

53. Services for children with learning difficulties and/or disabilities are organised through single agency structures and there are long waiting times for some children for an assessment or services. The supply and range of respite care services is insufficient to meet demand. Transition arrangements to adult

social care services do not work well for some young people, leaving them without the support they need.

Enjoying and achieving

54. **The work of all local services in helping children and young people to enjoy their education and recreation and to achieve well is outstanding.** Very good support, advice and guidance are provided for parents and carers to enable pupils to enjoy school and achieve well. Information is clearly written, comprehensive and informative, for example, guidelines for parents of children and young people with statements of special educational need. Although the provision of information in various languages is limited, good efforts are made to provide individual contact and support to individuals from minority ethnic groups. Parents and carers are engaged well in consultation exercises through the long established County Parents' Consultative Group and the effectiveness of the Parent Partnership Service. Very good links between families and schools through the Home School Support Service enhance the enjoyment and achievement of vulnerable children. Family Learning Centres work well with a significant number of parents and carers, although the impact of this work has yet to be evaluated fully.

55. The very good quality of early education and childcare provision continues to be maintained, with a significantly higher percentage of settings graded better than the national average in Ofsted inspections. Systematic action has been taken to further support and train private and voluntary childcare providers and early years staff to further improve the quality of provision. Additional programmes, such as Early Support, have also helped to increase the cooperation of agencies to provide a better service to very young children with severe and complex needs. The rural nature of the county makes it difficult to ensure equitable access to early years provision, but there are good proposals to deal with this, such as the innovative use of 'virtual' children's centres.

56. The quality of performance data is outstanding for mainstream schools and provides a very clear picture of high attainment and good levels of progress for individual pupils at all key stages. The level and availability of data analysis is, however, insufficiently well developed for special schools, which make it difficult to target improvement work appropriately.

57. The internal categorisation of schools requiring support is well established and widely understood. Robust action is taken to deal with issues of low attainment and underachievement. The proportion of schools in Ofsted categories of concern is low and is significantly below national averages and that of statistical neighbours. The school improvement service offers very high quality, coherent support which strongly focuses on improving teaching and learning. The service is appropriately challenging and remains highly valued by schools. Support is well targeted and prioritised. Practice is well evaluated with,

for example, suitable changes introduced to the self-evaluation process for schools to meet increased expectations from external inspection.

58. Pupils' attainment is high at all key stages. Progress is very good between Key Stages 2 and 3, and often above or well above the national average. The council is clearly aware of the reasons for, and the need to improve, the relatively lower performance between Key Stages 3 and 4 in a small number of schools. Good progress has been made in building on the successful introduction of an intervention programme for those pupils having significant difficulties in learning to read. This programme is showing impressive results.

59. School attendance is very good both in primary and secondary schools, with North Yorkshire overall placed in the top six performing authorities nationally. There are very good recent examples of targeted work, such as multi-agency planning meetings and the behaviour and attendance strategy used at one secondary school, which demonstrate significant improvements in attendance. The monitoring of attendance is thorough and there are effective approaches to targeting existing truants, and deterring those at risk of non-attendance, using parenting contracts and sanctions. Fixed-term and permanent exclusions are below the national average, with targeted work again demonstrating good improvements. The creation, and ongoing work, of the Eastern Areas Collaborative, for example, has resulted in only one permanent exclusion compared to six in the same period in the previous year. This initiative has significantly reduced days lost to fixed-term exclusions. Exclusion and accountability panels effectively monitor the progress of pupils who are not in school. The options offered for the 'reintegration and education other than at school' scheme are active and purposeful with work targeted well at the most vulnerable pupils. It is successful in reintegrating children into mainstream schools.

60. Most children and young people contributing to the survey conducted for this inspection indicated that they enjoy their lives and that they can get involved readily in activities at school. Schools provide a good range of activities and opportunities for learning outside school hours. Even where rural transport makes after-school attendance difficult, many schools now offer more options during lunch periods. The use of existing facilities is improving with the development of extended schools and a drive towards locality working. However, in specific areas there remains a lack of available local options. Efforts are being made to address this through good liaison between the county and district councils. Opportunities for recreation are also enhanced through the creative use of mobile facilities, such as a skate park and recording studio.

61. Recreational activities are diverse and generally purposeful. The Positive Activities programme, for example, has led directly to good outcomes for young people. The encouragement of arts and culture is outstanding, particularly in the work of 'CYC' (connecting youth culture). Young people with learning difficulties and disabilities are included well in positive activities. Young people involved in a hip-hop week, including one confident freestyle rapper performing

from his wheelchair, spoke about the value of the hip-hop week and subsequent support from CYC. Many have performed at large public events and on the radio, despite a lack of any previous experience. The outdoor education service is also highly regarded and well used by schools, offering a distinct and valuable resource for building the skills and confidence of young people.

62. The attainment of looked after children has improved. Eighty-eight per cent of looked after young people sat one GCSE, significantly higher than the national average of 63%. There is good monitoring of attainment by the education of looked after children team, although the continued tracking of progress ends after compulsory schooling. A high percentage of looked after children do not have a completed personal education plan. The team responsible for reintegration and education other than at school responds quickly to ensure appropriate provision for looked after children out of school. One district council has usefully allocated passes to care leavers to give them access to local leisure facilities. This is to be extended to other districts.

63. Children with learning difficulties and/or disabilities are generally identified early and supported well by clear inter-agency protocols. They attain well and make good progress in school. Information for parents and carers is very clear and well presented. A valued specific programme supports families and children 0–3 years with severe and complex needs. It is planned to expand this through children's centres using a key worker approach. The special educational needs and behaviour review takes account of the full needs of children and links to the CYPP, the Education Development Plan and the corporate social inclusion strategy. The proposals in the review involve schools in meeting more complex needs in mainstream schools. Initial funding has already been reallocated to schools to support this strategy.

Making a positive contribution

64. **The impact of all local services in helping children and young people to contribute to society is good.** A directory of family services is well presented with useful information and good signposting which helps families access the right services. The home to school support service is highly valued by parents, helping them to manage their children's behaviour more effectively. Of the schools inspected by Ofsted, the large majority are judged as good and many as excellent in supporting children and young people in developing socially and emotionally. Good mentoring opportunities are available in schools and include effective support in primary schools for children for Traveller families, but the impact is not systematically evaluated.

65. Very high numbers of young people are involved in activities and projects run by the youth service, which build their confidence and social skills. Good use is made of a fleet of mobile youth units to reach young people in rural locations. Detached youth workers have a good rapport with young people to whom they offer valued advice and support to help them cope with life

challenges. Youth service activities are effectively quality assured and levels of achievement and accreditation are good. A well attended annual three-day youth festival to celebrate youth culture and tackle contemporary issues is held in a different area each year. This year the major headline act reinforced a strong anti-drugs message.

66. Parents and children receive useful support from Sure Start children's centres, for example families from BME groups report receiving helpful support with transition into school and more generally with adjusting to local life. Effective targeted support is available for families affected by domestic abuse or homelessness. Most young people are very positive about the support they received from the Connexions Service in helping them to re-engage in school or gain employment. A wide range of good support is offered to young carers by the carers' centres, which provide one-to-one counselling, clubs, advice and representation. An easily accessible, well laid out website provides good information about services. Community cohesion is actively promoted through inter-agency groups, which include parents; however, young people are not involved so their views are not directly heard. Information sharing between agencies to ensure that families from other countries or communities are identified and well supported is variable.

67. Extensive consultation with children and young people informed the development of the CYPP well. However children and young people are not represented on the Children and Young People's Strategic Partnership (CYPSP) so their voice is not directly heard in decision-making at this level. A coherent participation strategy, overseen by a 'voice, influence and participation' group, which includes seven young people's development workers jointly funded by the Connexions and the youth service, has promoted very good examples of participation across the county. This includes the involvement of young people in recruiting, developing websites and newsletters, and producing a youth entitlement document. However the involvement of service users in evaluating and planning CAMH services has been inadequate. Youth groups and sports provide good opportunities for mentoring and the development of leadership skills. The involvement of young people in school councils and through consultations at school has improved aspects of school life for young people in some schools. Improvements include the organisation of an adventure playground and better supervision at lunchtimes. There are good examples of young people undertaking activities to raise money for charities, for example in one school pupils coordinated and produced a talent show and donated the proceeds to charity. Opportunities exist for young people to engage in volunteering, for example through the positive work of Millennium Volunteers, but volunteer opportunities are not well coordinated.

68. Projects such as 'U-Turn' in Scarborough and 'Smile' in Selby identify and divert children and young people at risk of anti-social behaviour, but these opportunities are not available across the county. Planning and implementation of preventative activity does not always involve local voluntary groups and this can result in duplication and less effective use of resources. The 'Life' initiative

by the Fire Service is a good example of innovative work with young people, resulting in better awareness of the implications of hoax calls and safety risks from fires while raising self-esteem, encouraging leadership skills and inspiring confidence. Evaluation of the work by the U-Turn project, with vulnerable young people in Scarborough, shows it has had a clear impact on reducing offending and anti-social behaviour. Young people who took part in the scheme highlighted how they had benefited from mediation work and victim awareness and had raised confidence and self-esteem. Parents were universal in their praise of this scheme and were able to indicate clear outcomes relating to anger management, greater respect, an awareness of safety issues within the neighbourhood (for example, the risks of discarded needles) and individual support such as bereavement counselling. The anti-social behaviour report line and the hate reporting centres are helping to tackle diversity issues by emphasising the importance of reporting racist incidences though in practice the number of reported incidences is low. Not enough is being done by the youth service to engage with older young people aged 16 to 17.

69. The rate of re-offending has risen over the past year although this remains below comparators and the national average. The number of first time entrants to the youth justice system is declining but remains higher than comparators. Strong involvement and good information sharing by all agencies in crime and disorder reduction partnerships help to identify young people at risk and prevent their involvement in crime by putting appropriate support in place for them, for example by involving them in the Positive Activities for Youth Programme (PAYP). Constructive work by the Youth Offending Service is beginning to impact on reducing offending behaviour. However, not all cases are allocated to a key worker and this leaves some young people who offend without appropriate intervention or support. Outcomes from the intensive supervision and surveillance programme are good, with substantial reductions in frequency and seriousness of re-offending following programme completion. Rates of final warnings, reprimands and convictions of looked after young people are reducing and are significantly below comparators. Access to CAMHS for young people who offend is variable.

70. There is good ongoing consultation with looked after children through three local consultation groups, with opportunities for representatives from these groups to meet with senior management and elected members to raise issues of concern. A number of members of these local groups are trained to handle meetings and have good levels of confidence in discussions. A well established corporate parenting group, made up of elected members, actively seeks and responds to the views of looked after children. Evidence of improvements made as a result includes improved provision of computers, better out-of-hours support and changes to the looked after review process. Care leavers have been involved in the inspection of children's homes and contribute well to the training of foster carers. The number of looked after children participating in reviews has however fallen sharply from 80% to 53%, which is unacceptably low.

71. There are good examples of consultation with children and young people with learning difficulties and/or disabilities using an interesting mix of audio, video and written information. These succeed in giving strong and clear messages about what it is like to be a child with a disability and is being used in planning services, for example in the special educational needs review. Inclusion is well promoted and planned across mainstream provision. In Scarborough, children and young people with learning difficulties and/or disabilities attended local summer schemes and all young people involved were positive about this experience. The Parent Partnership Service website and a wide range of leaflets offer useful information and advice for parents of children with LDD; they include specific information for children with learning difficulties and/or disabilities in mainstream schools and promote opportunities for pupil participation. Consultation arrangements on the special educational needs review are good. The consultation document has been distributed widely and is easily accessible on the internet. This has been followed by a number of direct meetings with parents, carers, partner agencies, schools, and children and young people. Connexions Service special needs advisers link effectively to schools to support young people at the transition stage.

Achieving economic well-being

72. **The work of all local services in helping children and young people achieve economic well-being is good.** Very high numbers of young people are engaged in education, employment and training as a result of effective collaboration between partner organisations. Partnership working has also been very effective in ensuring that the whereabouts of almost all young people is known. The pace of partnership working is good, with an increasing number of schools and colleges providing a broader range of provision for 14–19 year olds. The development of vocational options is gaining momentum, with an increasing number of young people making appropriate choices. There are examples of very good collaborative development of vocational options between employers and schools, and schools and colleges, but provision is not systematically monitored to ensure equal access for all young people, including young people with learning difficulties and/or disabilities.

73. Good childcare services strategies ensure sufficient day-care provision is available to enable parents and carers to work. However access to training or employment opportunities for some parents and carers on low incomes is limited by the lack of a scheme to subsidise childcare fees. Progress in the development of children's centres in disadvantaged communities is good, with good examples of well integrated services including family support, health, employment advice through Jobcentre Plus advisors and education courses. All of these effectively support parents in returning to work. Comprehensive policies and appropriate additional training supports the provision of inclusive childcare provision for disabled children well. Despite this, access to consistent childcare provision remains a concern for many of their parents. Arrangements

for family learning provision are effective and are available in various locations, including rural areas readily accessible through supported transport.

74. The great majority of pupils at Key Stage 4 gain satisfactory work-related experience through an effective education and business partnership. Work-based providers are insufficiently involved at a strategic level. There are examples of very effective collaboration in different geographical areas in providing for clear progression routes and sound options. The council and its partners have devised a comprehensive structure to delegate the planning, development and monitoring of 14–19 provision to local partnerships to meet the needs in different parts of the county. However, monitoring is not sufficiently robust, with some significant changes in provision taking place at level 1 and in work-based learning without the knowledge or due consideration of the strategy group. The rate of participation in higher education has increased to good levels overall.

75. Much of the European funding for regeneration precludes direct support to children and young people. However, within these constraints it is used effectively to devise and develop a wide range of projects to improve the quality of life of children and young people in the most deprived communities. For example, in one area parents and carers understanding of healthy diet improved through producing a booklet on healthy food with their children.

76. The council and its partners have developed and implemented a very good strategy to prevent homelessness, which has led to improved outcomes for young people. For example, in Scarborough over 75% of the young people who were at risk of becoming homeless moved back with their families following very effective mediation. However, securing appropriate accommodation for young people who offend remains problematic. The council and its partners are working well with private and social housing providers to provide more decent homes for young people, levels of which are currently insufficient. Effective partnership working with district councils ensures that housing for care leavers is prioritised and as a result almost all care leavers live in suitable accommodation.

77. Strategies to support the transition of looked after children and young people into adult life and economic independence through education and/or employment are good. A wide range of alternative curriculum activities and events support their motivation and engagement. This has led to good participation rates by looked after young people and care leavers in education, employment or training. It remains above comparators despite a significant decline since last year. There is insufficient systematic collation and analysis of the achievements of young people leaving care, including the recording of the broader range of skills gained through wider curriculum activities. The council provides ring fenced opportunities for care leavers to gain work-related experience through structured apprenticeships. Financial support for care leavers to engage with education or training and to progress to higher education is very good; for example, one care leaver was supported to study a

postgraduate course in law. However, the number of care leavers accessing higher education is low.

78. The large majority of young people with learning difficulties and/or disabilities make good progress into post-16 education. However, not many progress to higher levels of achievement, with few progressing beyond level 2. Targets to support higher attainment are not clear in transition plans. The quality of learning support offered by schools and colleges is at least adequate overall. Direct payment arrangements to the families and carers of these young people are adequate, but some carers report very long delays in receiving payments.

Service management

79. **The management of services for children and young people is good.** Ambition is good. Issues concerning children and young people are a high priority within the council and are reflected well in the council plan. The Community Strategy includes relatively little about children and young people. This is recognised and there is an intention that it should be rewritten next year.

80. Partners have developed a clear shared vision and strategy set out in the CYPP. Appropriate priorities for improvement have been identified through joint assessment, performance audit, large scale consultation (involving 8,000 children and young people and 1,200 parents), and a detailed census of every child and young person with learning difficulties and/or disabilities.

81. Good progress is being made to take the CYPP to a further stage. Audits of current activity and needs analysis have been completed for the three areas identified for piloting integrated locality working and a further survey has been undertaken recently of 4,500 pupils aged 13 and 15. There are questions and responses covering all the five areas of Every Child Matters to inform planning future services.

82. The CYPSP has sound governance arrangements and is working well. There has been particularly positive engagement of NHS bodies and of district councils. Though represented on the CYPSP, engagement of the police at senior level has not been consistent. Children and young people are not represented on the CYPSP so their voice is not directly heard in decision-making at this level.

83. Prioritisation is good. The CYPP is clearly laid out with well structured objectives, key activities, milestones and targets. Lead responsibilities are clear. There is a strong focus on the most vulnerable children and young people, with emphasis on prevention and inclusion. Resource requirements are clear and major commitments are reflected in the council's medium-term financial plan. There is consistency in the priorities being pursued through the CYPP and the Local Area Agreement.

84. There is good evidence of actions to deliver key priorities, which have achieved good outcomes. Examples include delegation to schools of substantial resources for special educational needs aimed at early intervention and more cost effective provision, and development of behaviour collaboratives, which have had a positive impact on provision for vulnerable children by reducing the number of children excluded and without a school place.

85. There is a strong commitment to diversity issues, though impact has been more variable. Considerable efforts have, for example, been made to cater for the needs of the Traveller community. There is good awareness of cultural issues and sensitive working with parents. This has had a positive impact on school attendance at primary but not yet at secondary level. Development of provision for children and young people with learning difficulties and/or disabilities has not been consistent or well coordinated across all services. The needs of children and young people with autistic spectrum disorders, for example, are not adequately provided for and there is insufficient respite care to meet the need.

86. Capacity is good. Members have a good understanding of their roles and discharge these well. They make a positive contribution to service development and have direct links with looked after children and young people. However the lead member for children's services does not have a programme of visits to front-line children's social care services to ensure she remains directly informed regarding the quality of these services, which is not satisfactory.

87. There is good and long-standing partnership working in many services. These provide integrated services catering well for children and young people's needs. Joint commissioning is at an early stage, but a commissioning strategy was adopted by the CYPSP in May 2006 giving a good basis for further development.

88. The council delivers good value for money. There is a strong culture in this regard, led by elected members. Critical analysis is undertaken of high spend areas and appropriate action taken to address them. Costs are generally low and service performance and outcomes strong. There is tight budget monitoring and scrutiny.

89. Management of resources is good. Where there are capacity issues in the county council, most are being addressed effectively. The council's Chief Executive has taken on the chairmanship of the Youth Offending Team Board in order to give impetus to resolving a number of issues, such as capacity problems and partnership working. Since then good progress has been made in improving this service. Recruitment problems in social work have been largely overcome through a number of actions, including improving pay and progression and targeted recruitment campaigns. However retention is still problematic. The council's response to a high level of surplus primary school places is appropriate. It is systematically reviewing the future of each geographical cluster of schools, taking account of the implications of closure for

each community, as the village school is often seen as the heart of the community and closely linked to its sustainability. Modernising information technology and improving poor office accommodation are being addressed through a number of well developed corporate and children's services' initiatives, including a corporate transformation programme and the locality strategy.

90. Capacity issues within the NHS, such as designated doctors for looked after children, speech therapy and the quality of hospital services for children, present a more difficult problem, particularly in the short term, due to a £50 million deficit across the NHS in North Yorkshire and turbulence arising from the imminent amalgamation of four PCTs into one. While good efforts are being made to address issues such as these and to maximise the impact of resources by reviewing the roles and skill mix of front-line community health staff, it is clear that increased investment in children's health services will not be available.

91. There are some deficiencies in the way that the needs of individual children and young people are assessed, recorded and met. Involvement of children and young people, their families and carers is variable.

92. Performance management is adequate overall. There is a rigorous approach to performance management strategically at corporate and directorate levels, with good involvement of elected members. This is similarly rigorous in relation to school performance, based on appropriate benchmarking, clear target setting and strong challenge. There is an effective strong approach to supporting schools, which are most in need of improvement. Individual monitoring of BME pupils by advisers ensures that any particular issues affecting their progress are not overlooked.

93. However, performance management in children's social care and some aspects of post-16 education is inconsistent. Setting of objectives and planning and monitoring of work with individual young people in social care are also inconsistent. Deficiencies in the availability and analysis of data and a lack of consistent quality assurance contribute to the persistence of weaknesses in some areas of social care. Action taken to address some of these deficiencies includes strengthening of the Independent Review Officer service and detailed audits of practice, but it is too early for these to have an impact on improving practice.

94. Feedback from service users has informed improvement of a number of services, including the youth service, services for looked after children, and the development of treatment foster care for young people with very challenging needs. Feedback from looked after children, for example, has resulted in better information being given to them about reasons for being taken into care, changes to rules in children's homes and reservation of some places in the council's new apprenticeship scheme.

95. Performance management processes are being put in place for the CYPSP, but they have yet to agree which data partners should gather or establish the key indicators against which to measure progress on objectives and outcomes.

96. Capacity to improve is good. Performance of most services is good and improving, as is value for money. Action is being taken where improvement is most needed. Within the council, experience from the strong performance management arrangements which exist within the education service is being used to develop those parts of children's services where it is weaker. Staff capacity is also being strengthened within policy and performance to meet the need for improved data, regular audit and challenge. Within the NHS, leadership for children across the existing PCTs provide strong direction. Plans for greater integration of services for children and young people are well developed to roll out integrated children's services in three areas.

97. The council's self-assessment demonstrates good self-awareness and knowledge of where and how improvement is needed. Inspectors broadly concur, with two exceptions: there are some significant weaknesses in the quality of provision for children in need, and there are areas for further improvement in enabling young people to achieve economic well-being.

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

1. The council's performance in this area is good with individual services ranging from adequate to excellent. Outcomes for children and young people are good overall. Most children and young people appear safe. Children who are most at risk in the community are appropriately identified but not all are consistently well protected by the agencies supporting them. The youth offending service is performing adequately.

2. The management of services for children and young people is good. There are clear and challenging ambitions for the area, which are based on a shared understanding of local needs and on extensive consultation with children and young people, parents and carers. Prioritisation is good. Partners have developed a shared vision and strategy. This is set out in the Children and Young People's Plan (CYPP), which clearly outlines what needs to be done and the targets for achievement. There is a strong focus on the most vulnerable children and young people, with emphasis on prevention and inclusion. There is a strong commitment to diversity issues, though impact has been more variable.

3. Capacity is good. The Children and Young People's Partnership Board is well established. Members have a good understanding of their roles and discharge these well. The council delivers good value for money; costs are generally low and service performance and outcomes strong. There is tight budget monitoring and scrutiny. Performance management is adequate overall. There is a rigorous approach to performance management strategically at corporate and directorate levels. It is similarly rigorous in relation to school performance. However, performance management in children's social care is inconsistent, with deficiencies in relation to availability and analysis of data and quality assurance.

4. Capacity to improve is good. Performance of most services is good and improving, as is value for money. Action is being taken where improvement is most needed. There is a record of delivering high quality and improving services at a reasonable cost.

5. The impact of the council in securing the health of children and young people is good. The council takes a strong lead in focusing partnership working on securing improved health outcomes for children and young people. Universal and targeted multi-agency services support parents and carers well in keeping children healthy. A well coordinated approach to promoting healthy lifestyles for school children and young people is effective, leading to good outcomes. Health care for looked after children is generally good.

6. The impact of services in keeping children and young people safe is adequate. Satisfactory processes and systems identify children most at risk. Most child protection enquiries are appropriately completed with good sharing of inter-agency information at a local level. All children on the CPR are allocated to qualified social workers. However, there are significant delays in completing initial assessments and a lack of child focus in assessments and planning. For a growing number of children child protection plans are not proving to be effective in ensuring longer-term safety. Family support offers skilled and effective help to many families and contributes effectively to preventing children becoming looked after. Services to achieve permanence through fostering or adoption for looked after children are good. The range and number of services for disabled children and their families is variable.

7. The impact of the council in helping children and young people to enjoy their education and recreation and to achieve well is very good. Attainment of pupils exceeds the national average at virtually all levels. Good levels of support, information and advice are provided to parents and carers. The quality of educational provision is very good and is supported by strong leadership and good partnership working. The educational attainment of looked after children is improving year on year and is above the national average. Levels of school attendance are very good. Support for schools where some children underachieve, or have lower than expected attainment, is exemplary. Positive efforts are made to include children and young people with learning difficulties and/or disabilities in mainstream provision.

8. The impact of services in helping children and young people to contribute to society is good. The range of support for children, young people and their families is good with effective targeted support for many vulnerable young people. There are examples of very good consultation with children and young people and good examples of young people participating in aspects of service planning and delivery. Too few looked after children and young people participate in their reviews. Young people, including those in more rural areas, and those with learning difficulties and/or disabilities, have good access to youth provision, sport and recreation.

9. The impact of services in helping children and young people to achieve economic well-being is good. Very high numbers of young people are engaged in education, employment and training due to effective collaboration between local strategic partners. The pace of partnership working is good in developing broader provision for 14–19 year olds but work-based providers are insufficiently involved at a strategic level. Access to affordable childcare for people on low incomes is limited. Strategies to support the transition of looked after children and young people into adult life are good. The authority and its partners have developed and implemented a very good homelessness prevention strategy. Overall the provision for young people with learning difficulties and/or disabilities is adequate but planning and monitoring is underdeveloped.