

# Joint area review

**London Borough of Waltham Forest Children's Services  
Authority Area**

---

Review of services for children and young people

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

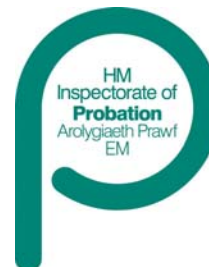
**Age group:** All

---

**Published:** 9 September 2008

---

**Reference no:** 320



---

© Crown copyright 2008

Website: [www.ofsted.gov.uk](http://www.ofsted.gov.uk)

This document may be reproduced in whole or in part for non-commercial purposes, provided that the information quoted is reproduced without adaptation and the source and date of publication are stated.

Further copies of this report are obtainable from the local authority or at [www.ofsted.gov.uk](http://www.ofsted.gov.uk)

---

# Contents

<b>Introduction</b>	<b>2</b>
<b>Context</b>	<b>2</b>
<b>Main findings</b>	<b>3</b>
<b>Grades</b>	<b>5</b>
<b>Recommendations</b>	<b>5</b>
<b>Areas for investigation through fieldwork during the joint area review</b>	
1. Safeguarding	7
2. Looked after children and young people	11
3. Children and young people with learning difficulties and/or disabilities	15
4. Additional investigations	19
5. Service management	25
6. Capacity to improve	25
<b>Annex A: The 2007 APA letter</b>	<b>30</b>
<b>Annex B: Children and young people's section of the corporate assessment report</b>	<b>31</b>
<b>Annex C: Summary of joint area review and annual performance assessment arrangements</b>	<b>34</b>

---

## Introduction

1. The most recent Annual Performance Assessment (APA) for Waltham Forest judged the council's children's services and its capacity to improve as good.
2. This report assesses the contribution of local services in ensuring that children and young people:
  - at risk, or requiring safeguarding are effectively cared for
  - who are looked after achieve the best possible outcomes
  - with learning difficulties and/or disabilities achieve the best possible outcomes.
3. The following investigations were also carried out:
  - quality of service and outcomes achieved from Child and Adolescent Mental Health Services (CAMHS)
  - addressing the needs and well-being of Black and minority ethnic groups.

## Context

4. Waltham Forest is an outer London borough situated in the north east of the city and the 15<sup>th</sup> most deprived local authority in England. The north of the borough is relatively affluent but some of the most deprived areas in the country are concentrated in the centre and south. Nearly 60,000 children and young people are aged 0 to 19, a higher proportion of the total population than other London or England authorities. This is mainly due to high numbers of children aged 0 to four.

5. The borough is highly diverse, ethnically and culturally and has the third largest Muslim population in London. Minority groups total 65% of the statutory school age population and figures are projected to rise. Major groups comprise Pakistanis (14%); Black Caribbean (10%); Black African (9%); dual heritage (8%) and other ethnic minorities (4%). An estimated 5,640 children and young people up to the age of 18 are seeking asylum, 58 of whom are unaccompanied minors. Newly arrived asylum seekers and refugees contribute to high mobility figures in some schools. At over 40% in primary schools and 34% in secondary schools, numbers of pupils with English as an additional language are above comparable authorities and four times the national average. There are 332 looked after children aged under 18, which is in line with outer London boroughs but significantly below that of similar authorities.

6. Twelve out of 14 designated children's centres are operational. The borough maintains four nursery schools, 55 primary schools, 17 secondary schools, five special schools, three Pupil Referral Units and a range of alternative provision.
7. Following inspection by Ofsted in 2000, ministers directed the council to outsource most education functions. The contract was awarded to a private provider, EduAction, from September 2001 to August 2006 and extended to 31 March 2008. Ministerial intervention has now been lifted following sustained improvement evidenced in the 2007 APA. The authority has awarded a four-year contract to a preferred provider, VT Education and Skills, to deliver a targeted range of school improvement services. No single party has had political control of the council since May 2002.
8. Services to children and young people who are at risk of offending or have offended are provided through the Waltham Forest youth offending service. There are no secure units for young people who offend in the area.
9. Primary health care services are provided by the Waltham Forest Primary Care Trust (PCT); acute hospital services are provided mainly by Whipps Cross University Hospital NHS Trust and mental health services are provided by North East London Mental Health NHS Foundation Trust.
10. Post-16 education and training is provided by one further education college, two sixth form colleges, four school sixth forms and three local apprenticeship providers. Entry to employment is provided by four in-borough providers, who support young people not ready to progress to Level 2 provision, apprenticeships or employment, with 199 places in total. Adult and community learning is predominantly provided through Waltham Forest College and the council's community learning and skills service (ClASS). Additional provision is made by a number of local community groups and from extended services in schools.
11. Children's social care services are provided through a range of local providers including: 87 registered foster carers, supplemented by independent foster agencies and a residential respite centre for children with disabilities. There are 11 field social work teams and a specialist multi-agency service for disabled children delivered jointly by the council and the PCT. In addition, the council contracts services with a number of voluntary and community sector providers.

## **Main findings**

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

- Arrangements for safeguarding are good. Strong corporate commitment, an effective Local Safeguarding Children's Board (LSCB) and innovative work, safeguard children and young people well. There are very good examples of multi-agency work, good early support and intervention, a good focus on community safety, good quality assurance of child protection practice and prompt and effective action to protect children who are identified as being at risk from significant harm. Social care assessments are of variable quality and there are delays in the completion of Initial and Core Assessments.
- Support for looked after children is good as a result of good corporate parenting, effective work with partners and good quality services, including CAMHS. There is a strong emphasis on targeted prevention, effective strategies and procedures to secure stable placements and very good involvement of young people in shaping the delivery of services. For looked after children placed outside the borough, provision from some services is inconsistent. For those with learning difficulties and/or disabilities, action to address a limited range of post-16 options is underway.
- Provision for children and young people with learning difficulties and/or disabilities is good. Attainment and progress is good, due in part to good quality services, including from CAHMS, and a dramatic fall in exclusions. Effective multi-agency support for young children, particularly good outreach support from special schools and the wide range of respite care provision are particular strengths, as is very good support for parents who are involved in the statutory assessment process. Health outcomes are good, despite long waiting times for some specialist services. Action to address a limited range of post-16 options is underway.
- The quality of services provided, and outcomes achieved by children and young people using CAMHS, are good. Strong multi-agency partnerships and high quality and innovative provision deliver a fully comprehensive service, in particular for children aged up to three and vulnerable groups. Good universal and targeted provision result in early diagnosis and targeted support. There are a few inappropriate admissions of young people under the age of 18 to adult mental health environments and targeting of some hard-to-reach young people from Black and minority ethnic groups is at an early stage.
- The impact of the partnership in addressing the needs and well-being of children and young people from Black and minority ethnic groups is good. Good action with partners to address inequalities has improved participation in learning and raised attainment, although securing education places and other provision for a small number of

vulnerable children and young people is slow. A good range of high quality provision meet the needs for health, recreation and leisure and broader well-being. Excellent initiatives involve children and young people in decision-making.

- Service management and the capacity to improve are both good. Strong political and managerial leadership and productive inter-agency partnerships drive improvement. Ambitions are high, needs are known well and good prioritisation underpins good strategic planning. Very good engagement with children and young people, very good project management, good financial and staff capability and good performance management have led to significant improvement over recent years. Strategies for taking outsourced functions in-house are well defined, commissioning is widespread, value for money is prioritised and efficiency savings are clear and achieved. As yet, strategic workforce planning is not fully comprehensive, there are gaps in measurable outcomes in some strategic and service plans and some smaller partners are not involved well enough in decision-making.

## Grades

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

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

## 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
- ensure workforce planning is fully comprehensive

- address gaps in measurable outcomes in some strategic and service plans
- improve the timeliness of access to education places and other provision for a small number of vulnerable children and young people
- improve waiting times for access to some specialist services for children and young people with learning difficulties and/or disabilities
- ensure continued focus on improving the quality of assessments across the partnership, particularly for social care
- improve further the timescales for completing Initial and Core Assessments in social care.

### **For action over the next six months**

- Improve consistency in the provision of services for looked after children placed outside the borough.
- Increase the range of learning options at post-16 for young people with learning difficulties and/or disabilities, including those who are looked after.
- Strengthen engagement with some smaller partners, including private, voluntary and community organisations.

### **Equality and diversity**

13. Equality, diversity and inclusion issues have a high profile and permeate the strategic and operational work of the authority and its partners. The needs of vulnerable children are championed strongly and good prioritisation extends to minority, vulnerable and hard-to-reach groups, including refugee and asylum-seeking children. Gender equality and disability is being addressed well, following good assessment of need. Consultation with, and the involvement of, children and young people, including from Black and minority ethnic and vulnerable groups, is very good. Addressing community cohesion, the promotion of cultural and faith relations, tackling racism and addressing bullying receive good attention. A range of high quality services such as from children's centres, are successfully meeting diverse needs, with some innovative ways of doing so. Widespread commissioning and voluntary provision cover gaps in services for the vulnerable well. There is good evidence of success in improving outcomes for vulnerable children and young people, most notably in the relentless drive to raise educational standards that is closing the achievement gap.



## Safeguarding

Inadequate Adequate Good Outstanding 

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

Major strengths	Important weaknesses
<p>Strong corporate and partnership commitment to safeguarding, and innovative work.</p> <p>Good early support and intervention.</p> <p>Very good multi-agency work to promote healthy lifestyles.</p> <p>Good operational focus on safeguarding and good participation of young people across the community safety agenda.</p> <p>Good community-based support for families affected by domestic violence.</p> <p>Prompt and effective action to safeguard children who are identified as being at risk of significant harm.</p> <p>Effective multi-agency child protection case planning and reviewing.</p> <p>Good quality audits of safeguarding practice.</p>	<p>Delays in completing Initial and Core Assessments.</p> <p>Variable quality of assessments across the partnership, in particular in social care.</p>

15. Strong corporate commitment to safeguarding across the partnership and a well-established culture of openness, challenge and continuous improvement contribute to the promotion of children's safeguarding and well-being. An effective and well established LSCB has a good focus on the broader safeguarding agenda and strong links to other strategic partnerships including the Crime and Disorder Reduction Partnership (SafetyNet) and sound Multi Agency Public Protection Arrangements. The LSCB provides effective challenge to all partners and drives multi-agency service improvement through good quality assurance practice including multi-agency audit. This has resulted in some innovative practice, for example in relation to female genital mutilation

which is improving outcomes for children. Good learning from Serious Case Reviews and other quality assurance activity is disseminated well and good multi-agency training improves practice.

16. Sound procedures across the partnership ensure safe recruitment of staff. Anti-fraud and identity checks undertaken for all new council staff provide an excellent additional safeguard. Good and robust arrangements ensure prompt response to, and resolution of, allegations against staff, including foster carers.

17. Although there is no current overall preventative strategy, the Children and Young People's Plan (CYPP) clearly articulates the council's approach. Good early support and intervention from, for example, well-established multi-agency and outreach work in Children's Centres, effective parenting work undertaken by the youth offending service and work with vulnerable teenagers through the Youth Inclusion Support Panel, secure effective engagement with vulnerable families. Extended services in schools are developing well, although the development of family support services attached to schools is at an early stage. There is strong commitment across all agencies to the development of the Common Assessment Framework (CAF) and the lead professional role. A good start has been made, and implementation is supported by good policies and procedures and a comprehensive training programme.

18. Very good multi-agency work across the partnership, including with schools and young people with custodial sentences, promotes healthy lifestyles. The roll-out of the healthy schools programme is very good, with all schools engaged from April 2008. Strong partnership and good leadership deliver a range of successful universal and targeted initiatives through this programme, including a good and innovative start to tackling childhood obesity. There is good leadership of the drive to reduce teenage pregnancy and new initiatives are in place, addressing an area for development in the 2007 APA. Conception rates plateaued in 2005, but the rate of reduction since 1998 is better than that of similar authorities or nationally. Young parents are supported effectively by the well-resourced teenage pregnancy service and pregnant young women access appropriate educational provision. Services to curtail young people's use of drugs are good with very good intervention in schools. Substance misuse admissions to hospital for young people are lower than both similar authorities and England averages. Vulnerable children and young people have good access to these services. CAMHS are also good.

19. The partnership has a good multi-agency approach to reducing bullying. Good action promotes anti-bullying work in schools and in the Tellus survey more children in Waltham forest than nationally report that they have never been bullied at school. Local collection of data on incidence of bullying is improving. A comprehensive policy in relation to homophobic bullying follows concerns raised by young people in the community safety forum. This is an example of the very good participation of young people in shaping policy and service delivery across the community safety agenda. The anti-bullying campaign, peer mentoring and learning mentors in schools have all made a

very good start in promoting the general emotional well-being of young people, resulting in them feeling safer in schools than in their communities.

20. The borough has seen a very significant reduction in fear of crime overall since 2004, however more children in Waltham Forest feel unsafe in their communities than nationally. Young people's fear of crime is taken very seriously and good targeted action addresses this, for example, through the work of community safety officers in schools and deployment of public safety officers on bus routes. Good support provided to young people who have been victims of crime includes provision from the youth offending team (YOT). Serious road accidents are reducing and the authority is well on course to meet the Government's target.

21. A good focus on safeguarding within the crime and disorder strategy includes good action to promote community cohesion, and innovative work with young people, including those who offend, to address the risk of violent extremism and to reduce the influence of gangs. A very good strategic approach and considerable investment in intervention and prevention has resulted in a recent reduction in anti-social behaviour of 18%, as shown by local data. The youth service contributes well to activities deterring young people from anti-social behaviour, for example, through good opportunities for accredited learning. A good range of early intervention and targeted preventative services supporting those who are at risk of offending include a jointly funded social worker post in the YOT for looked after children. Effective work to deter young people from crime has resulted in a reduction in new entrants to the criminal justice system. There is much good work to prevent re-offending, including good access to substance misuse services and CAMHS for young people who have offended. Local data shows that re-offending rates are reducing.

22. In the main, young people who have offended or who are at risk of offending are well supported to access suitable educational provision. Action to address some gaps in full-time provision for alternative education and to improve access to education, training or employment (EET) is improving this further.

23. Secure procedures identify children who are missing or who are not in school and follow-up of non-attendance is rigorous. Further work is planned by the LSCB to address the needs of children placed in private children's homes in the borough by other authorities and to improve satisfactory arrangements for safeguarding children educated at home. The number of children and young people permanently excluded from school has reduced markedly from 53 in 2005-06 to 15 in 2006-07. Nearly all children educated other than at school receive appropriate educational provision and recent effective action to ensure that those attending pupil referral units and alternative provisions receive their full entitlement to education focused particularly well on ensuring safeguarding.

24. A good strategic approach to reducing the incidence of domestic violence includes good community support for families provided by voluntary sector projects that address the needs of minority ethnic groups well. Implementation of the new pan-London child protection procedures and a new assessment tool has ensured a sharp focus on identifying risks to children and further work is planned to improve information sharing across agencies. Arrangements to identify and support children who are privately fostered are satisfactory, although the rate of notifications is low and only increasing slowly. There is good support for young carers through the young carers' project, although the authority acknowledges further work is needed to improve arrangements to identify young carers and to assess their needs.

25. Secure systems within the first response social care duty service ensure that prompt and effective action is taken to safeguard children who are identified as being at risk of significant harm. However, there are delays in addressing the needs of children and young people who are referred to social care services with lower priority needs. While many partners report that services are responsive, some schools report delays in responding to referrals of children in need.

26. The proportions of Initial Assessments and Core Assessments completed within timescales have fallen in 2007-08 and are now significantly below those in similar authorities and nationally. The former was identified as an area for improvement in the 2007 APA. Significant system failure within the computerised records system during 2007 undermined performance management arrangements which, combined with an increase in workload, contributed to this deterioration. Difficulties with the system have now been resolved. There is a clear understanding of the factors that contribute to delays, which include recruitment and retention difficulties and insufficiently tight targeting of resources in the first response team. An urgent review of structure and organisation to address these issues has been completed with implementation planned for autumn 2008. Training for CAF is consolidating the understanding of social care thresholds in partner agencies. Effective work by the hospital social work team and good multi-agency working ensures a high quality, prompt response to prevention for children with a wide range of needs referred within the hospital, including those at significant risk and a particularly high number of babies under one. Arrangements for out-of-hours emergency response are good. These include clear communication with other services. Training, advice and support on safeguarding is readily available to schools and valued very highly by staff.

27. The number of children who are the subject of child protection plans is low compared to similar authorities. Very thorough audit of child protection work as well as quality assurance of family support casework confirms that decision-making is safe and the level of child protection plans is appropriate.

28. All children who are the subject of child protection plans have an allocated social worker. Arrangements to safeguard children within the child protection system are good with effective multi-agency case planning and reviewing. Engagement of adult drug and alcohol services in child protection work is good but that of adult mental health services is more variable. A good range of services support children in need and their families. Care planning and review of children subject to Children in Need plans is good.

29. There is a strong focus on improving assessment practice through audit, training and supervision and high aspirations to develop excellence through reflective practice to support improved assessments across all agencies. There is good management oversight of the quality of assessments within social care services, which is addressing some variability. Information gathering for the assessment is good but a minority lack sufficient analysis. The partnership has had a high national profile in contributing to the development of new guidance in relation to the Public Law Outline. Very good action has been taken to ensure the new requirements for statutory work with children are in place. This includes commissioning a new service to undertake intensive pre-proceedings work with children and families, extensive training for staff and an increased focus on improving the quality of assessment work.

## Looked after children and young people



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

Major strengths	Important weaknesses
<p>Good placement stability as a result of effective strategies and procedures.</p> <p>Strong emphasis on targeted prevention contributing to few older children entering the care system.</p> <p>Good quality services, including provision from CAMHS.</p> <p>Outstanding children's rights and advocacy services contributing to the very good involvement of young people in shaping the delivery of services.</p>	<p>Inconsistent provision from some services for looked after children and young people placed outside the borough.</p> <p>Insufficient range of learning options post-16 to enable sufficient career choices for those with learning difficulties and/or disabilities.</p>

Care leavers supported to live in suitable, safe and affordable accommodation.	
--	--

31. The council works effectively with its partners to prevent, wherever possible, the need for children and young people to enter or remain in care. Numbers continue to fall steadily and are now in line with those for outer London boroughs. A good range of targeted preventative services, including a highly effective post adoption support service and therapeutic CAMHS, support families well and contribute to fewer older children entering the care system and an overall reduction of children coming into care. The council is aware of the need to strengthen partnerships with the voluntary sector to further support children and young people on the threshold of care.

32. Services for most children and young people who become looked after are good. All looked after children are allocated a suitably qualified social worker, which is significantly better than in similar authorities and nationally. Social workers are well trained and supported to understand and meet the needs of children and young people. The percentage of care plans that were reviewed on time improved significantly in 2006-07, and at 89%, was in line with the national average. Local data shows further improvement in 2007-08. Following a decrease last year in the number of looked after children who contribute to their reviews, local data shows that numbers improved to 91% in 2007-08.

33. Twenty-eight percent of children and young people who are looked after are in foster placements in neighbouring authorities. Retaining the stability of placements is a high priority for the council. A significant improvement has been achieved through the implementation of effective strategies and procedures, including well-coordinated assessment and intensive therapeutic intervention when required. Short-term placement stability was very good in 2006-07 and local data shows further improvement in 2007-08, when the percentage of looked after children who had three or more placements during the year fell to 9%. Longer-term stability improved significantly in 2006-07 and, at 71%, was better than similar authorities and the national average. Local data shows further improvement this year. The in-house fostering service provides good quality placements supported by excellent training opportunities for foster carers. Placement choice is adequate. The authority recognises that there are insufficient foster carers locally to reflect fully the ethnic needs of looked after children and young people but satisfactory additional support is offered where needed. Effective partnerships at a regional level and good commissioning and monitoring arrangements ensure that purchased placements are also of high quality. Children placed outside the borough do not have the same ready access to all services, but are supported well nevertheless.

34. Robust action, including improved reviewing arrangements and careful tracking of cases, has addressed delays in planning and improved care planning processes, which are now good. This addresses an area for development in the

2007 APA. At 6%, the number of looked after children adopted or made subject to Special Guardianship Orders in 2006-07 was low. Effective action has resulted in a significant improvement in 2007-08, when local data shows a rise to 9%, which is above the national average for 2006-07, and addresses a further recommendation from the 2007 APA.

35. Good and focused attention is given to the health needs of looked after children and young people. A flexible approach to engaging young people and a highly supportive dedicated nurse have resulted in very high numbers of annual health assessments and dental checks. Health checks have been enhanced to include sexual health promotion and substance misuse prevention. Good quality coordinated multi-agency working continues to improve up-take of services, contributing to the reduction in teenage pregnancy among looked after young people. Appropriate access to good quality CAMHS provision, with fast tracking to specialist CAMHS where needed, has resulted in a number of young people with significant behavioural difficulties remaining in mainstream schools. For children and young people placed outside the borough, access to CAMHS is inconsistent, although provision is a routine consideration in the commissioning of agency placements. In some instances, additional CAMHS services are purchased.

36. Looked after children receive good support to enjoy and achieve. They make good progress and their attainment is satisfactory. In 2007, the cohort of four exceeded the attainment of their peers at Key Stage 1. At Key Stage 2, where seven out of 15 children had statements of special educational need, and six of the seven attended special schools, all achieved at an appropriate level. Results continued to improve at Key Stage 3, where almost one-third of 22 young people had statements of special educational need, exceeding the average attainment for looked after children. At Key Stage 4, where again over one-third of 36 young people had statements, they made good progress and results were similar to the previous year. Over half the cohort sat at least one GCSE, showing a trend of improvement. Of these young people, 14% gained five or more A\* to C grades and 39% five or more A\* to G grades broadly in line with national figures for looked after children. The percentage of care leavers who left care with at least one GCSE A\* to G grade improved significantly from 38% in 2006-07, to 52% in 2007-08. Figures are now in line with the average for similar authorities.

37. Good attendance at school contributes to optimum progress. Effective action has improved school attendance which is monitored daily, leading to prompt and effective intervention. Absences of more than 25 days have fallen from a broadly average figure of 12% in 2006-07, to 8% so far this academic year. Currently, no looked after child is absent from school for more than 25 days. Robust action has resulted in a significant decrease in numbers of looked after children excluded from school.

38. A robust and detailed tracking system for looked after children, which records their progress and attainment as well as information from personal education plans, enables accurate targeting of support to individuals. School improvement advisers monitor this data closely and challenge schools when key elements of young people's entitlement are not in place. Every school has a designated teacher with responsibility for looked after children and children placed locally receive regular supplementary support in school and from homework clubs. However, the educational needs of children and young people placed outside the borough are not always met as well. This is recognised by the authority and triggers additional support.

39. Looked after children placed with foster carers have good access to a range of leisure activities and are well supported in developing their individual interests. Arrangements include concessions for sports and library facilities, free access to music workshops and additional resources for gifted and talented young people. This level of service does not extend to young people aged over 16 in semi-independent accommodation.

40. Children and young people are supported well to make a positive and responsible contribution. Those who offend are well supported by good joint working arrangements between the youth offending service and social care services. The proportion of looked after children with final warnings, reprimands and convictions was in line with the national average in 2006-07.

41. The council and its partners listen and respond very well to the views of children and young people who are looked after. Communication is very effective, formalised at a strategic level and embedded in practice. It results in an excellent contribution to service development, addressing an area for development in the 2007 APA. Young people participate in staff recruitment, provide training for staff and elected members, act as peer educators and inform decision-making. They benefit from a variety of opportunities to develop emotionally and socially as well as improving their life chance skills. Outstanding children's rights and advocacy services provide a highly effective service for children and young people in raising their profile in the council and ensuring their views are heard. Consultation events have successfully led to the greater involvement of young people at national level. Elected members and other council departments are engaged well in improving life chances for looked after children and young people and good corporate parenting arrangements are in place. The functioning of the corporate parenting panel is under review to further improve its effectiveness.

42. Effective quality assurance processes, including the established role of the independent reviewing officers, good management oversight and regular supervision of social workers, ensure good support for care leavers. Nearly all care leavers have an allocated social worker and a personal adviser and pathway plan. Plans are of good quality and accurately reflect young people's needs. Unaccompanied asylum-seeking young people receive good quality services which are well integrated within mainstream provision, but not all are



aware of their entitlement. The council has taken effective action to address this.

43. The number of care leavers engaged in EET is very high. Connexions workers attached to the leaving care team work closely with social workers, placements and resettlement workers and other professionals in advising young people on post-16 learning opportunities. However, for those with learning difficulties and/or disabilities, insufficient options at pre-entry or Level 1 in vocational areas curtail career choices. Partners are aware of shortcomings and action is in hand. The provision of suitable and affordable accommodation for care leavers is good. At 88% in 2006-07, the number of care leavers living in suitable accommodation is in line with similar authorities and national figures. Local data shows further improvement this year. Careful consideration is given to the quality of accommodation and regular spot-checks ensure standards are maintained. In the event of a failing placement, good safeguards prevent homelessness.

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



44. **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>Prompt and thorough review of educational provision.</p> <p>Good quality services, including provision from CAMHS.</p> <p>Good attainment and progress.</p> <p>Dramatic fall in the proportion of pupils with statements of special educational need excluded from schools.</p> <p>Particularly good outreach support from special schools.</p> <p>Very good support for parents in the statutory assessment process.</p>	<p>Long waiting times for some specialist services.</p> <p>Insufficient range of learning options post-16 to enable sufficient career choices.</p>

<p>Effective multi-agency support for young children.</p> <p>Wide range of respite care provision from national and local voluntary partners.</p>	
---	--

45. The council has recently resumed responsibility for the management of services for special educational needs (SEN), following the end of the outsourced contract with EduAction. Priorities and plans show a swift response to developing currently good educational provision further. This is based on a thorough audit of need and builds on best practice. Action is already underway and due for completion early in 2009. The review has been well received by schools as crucial to the continued improvement of services and other stakeholders are fully involved. Centrally managed provision for pupils with a hearing impairment is outside the scope of this review. The council recognises this anomaly, although plans for specialist provision are part of the Building Schools for the Future programme.

46. The partnership is making good progress in developing integrated services for children with learning difficulties and/or disabilities but recognises that there is more to do to fully embed integrated assessments. Multi-agency support for young children is a significant strength. Key workers support them well, contributing to better continuity of care than for older children as the role of a lead professional is not well established with this group. Co-location of health and social care staff contributes to effective information sharing between these services, SEN services, carers and others working with children and young people.

47. The health needs of children and young people with learning difficulties and/or disabilities are met effectively, leading to good outcomes. Those with complex needs access well-coordinated clinical services from the child development centre. Liaison between primary and secondary care professionals, and between health and other agencies, is strong. Good access to CAMHS includes a dedicated team for this group. Provision of, and access to, allied health services is good overall. Although waiting times for audiology, speech and language therapy (SALT), podiatry and clinical occupational therapy services vary from satisfactory to very good, there is a long delay for portage, physiotherapy and council occupational therapy services, the latter now fully integrated with health service occupational therapy.

48. A wide range of respite care provision is available to parents. This is currently subject to review to assure consistent quality. Although there is a waiting list of 42 for residential respite care, and a few parents report some problems with the sitting service, effective partnerships with national and local voluntary providers secure overall adequate sufficiency. Funding arrangements provide sufficiently high levels of support to enable many children with complex needs to remain at home. An effective care planning forum monitors provision

monthly, with a quarterly case-by-case review. Quality assurance arrangements for purchased care packages are good. The partnership has recognised that the LSCB should have an increased focus on safeguarding for children with disabilities, though effective training for staff on child protection includes specific guidance on recognising signs of abuse for children and young people who are disabled. Advocacy services to enable children and young people with learning difficulties and/or disabilities to report concerns about their care and treatment are adequate and improving with the appointment of a member of staff to develop this service. Information in general is comprehensive and accessible but parents and carers report little knowledge of direct payments, leading to reduced take-up. The council has recognised this and has made a recent appointment to improve uptake.

49. Children and young people at School Action, School Action Plus and with statements of SEN, enjoy learning and achieve well. Attainment has improved significantly at Key Stages 2 and 4 in the past three years. The gap with their peers has narrowed at Key Stages 2, 3 and 4, contributing to raising attainment as identified by the 2007 APA. Children and young people make good progress. The progress made by pupils in secondary schools is substantially better than in similar authorities, above comparators in special schools and in line with comparators in primary schools. Attainment and progress is closely monitored, guidance for schools on assessment and intervention is comprehensive, and in the cases tracked, provision is good overall. Outreach support from special schools is a particular strength and the work of the SEN team is valued by schools. Transitions between educational settings are managed well. SALT provides an enhanced support service to pupils with communication disorders before and after transition from primary to secondary schools, and over one-third of users report increased confidence to manage significant change as a result.

50. Attendance is good. At 3%, persistent absence among pupils with SEN is almost half the national figure. Inspection evidence shows that behaviour is at least good in almost all primary schools and most secondary schools. It is outstanding in special schools. The proportion of permanently excluded pupils who have a statement of special educational need has fallen dramatically from 56% in 2005-06 to 7% in 2006-07, due in part to effective work on managed moves by the fair access panel. However, schools report a paucity of behavioural support for pupils with complex emotional and behavioural needs and a review is under way.

51. Statements of SEN are of good quality and secure appropriate provision. Although the number remains constant overall, a good focus on early identification and good use of devolved budgets by schools has resulted in an increase for young children and fewer new statements for school age pupils. The percentage of new statements prepared in the required timescale has improved and is now above figures for similar authorities and nationally. Parents are offered very good support through this process. An effective parent partnership service has resulted in a reduction of appeals for statements of

special educational need by over half in the last three years. This service is involved well in planning for improved provision and delivers courses for parents based on surveys of parental views.

52. Strong partnerships, good networks and successful bids for grant and other funding enable children and young people with disabilities to participate in a good range of universal and targeted cultural, recreation and leisure activities. The council and its partners minimise the financial stress on families well, although some report difficulties with transport. An audit of premises used by the youth service identifies good accessibility for young people with restricted mobility, addressing a weakness identified in the inspection of the service in 2005.

53. There are increasingly good opportunities for children and young people with learning difficulties and/or disabilities to participate in consultation and to contribute to decision-making, addressing an area for development identified in the 2007 APA. Schools effectively include all pupils, adapting equipment in order to facilitate their direct involvement and young people shape aspects of provision for work-based learning. The council recognises the need to build on these strengths and to monitor involvement, including from young people at risk of disaffection. Planning for individuals takes full account of their education and well-being. Children and young people are usually present at statutory reviews and contribute well to decisions made about them.

54. Children and young people with learning difficulties and/or disabilities receive good support to achieve independence in adulthood. Protocols for transition to adult services are clear, with regular tracking meetings to monitor progress. Multi-agency transition plans for young people at 14 years remain in the top category of performance, although there is some variation in quality. A readily accessible publication, 'Transition to Adulthood', provides a very comprehensive range of advice to disabled young people and a recent learning disability review involving stakeholders provides good quality data to inform service improvement.

55. Figures for May 2008 indicate that at 10.4%, the proportion of 16 to 18 year olds with learning difficulties and/or disabilities who are not in education, employment or training (NEET) has fallen to below the average for comparable authorities and nationally. However, an insufficient range of post-16 options at entry level and Level 1 curtail their career choices. Partners are aware of shortcomings and action is underway to develop provision. Work-based learning success rates for young people under 19 years are satisfactory. Procedures for collecting data on 19 year olds have improved following a recommendation from the 2007 APA, and the council is now in a better position to target provision for young people who are NEET.

## Other issues identified for further investigation

### Provision of services and outcomes achieved by children and young people using Child and Adolescent Mental Health services (CAMHS)

56. The quality of services provided, and the outcomes achieved by children and young people using CAMHS are good.

Major strengths	Important weaknesses
<p>Clear and effective leadership to deliver a comprehensive CAMHS.</p> <p>Strong multi-agency partnership improving access to CAMHS.</p> <p>A number of innovative and high quality services now central to CAMHS delivery.</p> <p>Good universal and targeted provision resulting in early diagnosis and targeted support.</p> <p>Good quality provision for looked after children and children and young people with learning difficulties and/or disabilities.</p> <p>Good mental health services for young people who offend.</p>	<p>A few inappropriate admissions of young people under the age of 18 to adult mental health environments.</p> <p>Targeting of hard-to-reach young people from Black and minority ethnic groups and refugee and asylum-seeking groups.</p>

57. Strengthened performance management of CAMHS, more recently through the creation of a new multi-agency commissioning group, is providing clear and effective leadership in delivering a comprehensive and well-resourced multi-agency strategy that is based on an up-to-date and accurate assessment of need.

58. The 2007 APA highlighted the good progress made towards comprehensive CAMHS provision and identified the need for further coordination of tier 2 services. This is now good. The multi-agency partnership achieved comprehensive CAMHS by April 2008 and there is now a single referral point. Professionals meet weekly to discuss referrals and to agree provision for timely and coordinated individualised care packages using the 'team around the child' approach.

59. Strong joined-up work across other health services, education, social care and the youth service is delivering effective and coordinated services. Provision has been strengthened significantly in recent years, with increases in staffing

and a subsequent increase in numbers of children and young people supported. Access to CAMHS is a standing item for multi-agency senior management meetings and waiting times have reduced. At 31%, the proportion of young people waiting less than four weeks is good and significantly above the national average of 40%. Waiting times to access both specialist and non-specialist CAMHS also continue to fall. There is no waiting list to access mother and child services, provision for complex cases and fast-track provision for looked after children. Those on the waiting list for mild forms of mental health problems access CAMHS within an adequate timescale of 13 weeks.

60. The coordination of tier 2 services continues to improve, addressing an area for development in the 2007 APA. Coordination has been strengthened further by the transfer of behaviour support services from EduAction to the council and from Face 2 Face counselling services from Waltham Forest PCT to North East Mental Health NHS Foundation Trust. Face 2 Face provides a good range of accessible and confidential support services for young people aged from 11 to 21 years. These include drug, alcohol and school counselling to which young people can self-refer without the knowledge of their parents, carers or teachers. The service operates from six secondary schools and plans are underway to promote the expansion of the service. Recruitment to new primary mental health worker posts is in hand to further strengthen the coordination of tier 2 services as well as liaison between tier 2 and 3 CAMHS.

61. The needs of children and young people from Black and minority ethnic groups, including refugees and asylum seekers are addressed well through mainstream CAMHS, but specific services designed to target hard-to-reach young people within these groups are at an early stage of development. The children and family consultation service, as well as the substance misuse team, are exploring relevant and targeted interventions.

62. A number of high quality and innovative services are now central to CAMHS delivery, including fast tracking for looked after children, services for children up to the age of three with autistic spectrum disorder (ASD) and parent-infant mental health services. CAMHS provision for looked after children is particularly strong. 'Fast-track' designated staff provide coordinated, individualised, flexible and responsive CAMHS to those looked after, those on the threshold of being looked after, those adopted and about to be adopted, children and young people in special guardianship, unaccompanied minors, care leavers and carers. The parent-infant mental health service offers a good range of interventions to develop early parent and child attachment.

63. The partnership has a good grasp of all mental health admissions of young people through the innovative work of the adolescent outreach team (AOT), the on-call services, fast track and multi-agency complex care group teams. The proactive working of AOT alongside the out-of-hours on-call assessment service within the acute sector has contributed to a reduction in the number of inpatient admissions. The complex case group offers a useful consultation forum for other agencies and ensures that children and young people with

complex needs receive early diagnosis and appropriate packages of treatment or support, including out-of-borough cases. However, there are a few clinically inappropriate admissions of young people under the age of 18 to adult mental health environments. The 18-bedded Brookside unit with four high dependency beds, currently under construction, will address this on completion in July 2008.

64. Universal provision for early years, including the redesigned child health promotion programme, and its impact, is good. Parents and carers receive good, individualised support to enable them to address the emotional and mental health needs of their children from an accessible range of locations across the borough, including children's centres, schools and child health clinics. Experienced midwives and health visitors screen all women for depression and other forms of emotional or mental health problems and parenting difficulties during the ante and postnatal family health needs assessment. An appropriate screening system and culturally-sensitive listening sessions support those with mild forms of depression, although the former is not used consistently across the borough.

65. Schools and other support services provide good mental health support for young people with emotional and behavioural problems. Provision for children and young people with behavioural and/or anxiety problems is excellent and those who are at risk of exclusion are supported well through a number of initiatives such as peer mentoring, 'life root' award and learning mentors. Anti-bullying work in schools, as part of the Healthy Schools programme now in all schools, is good.

66. Considerations for providing specialist CAMHS alongside other children's services in the community and acute sector, for example from the YOT and the substance misuse, adult mental health and pupil referral unit services, are underway. Young people who offend receive good CAMHS from a dedicated worker. Professionals working alongside CAMHS staff are very positive about the support and consultation available to them in promoting the psychological well-being of children and families and in identifying early indicators of behavioural problems. However, although most front-line staff take up CAMHS training, support and advice, this is variable for schools.

67. The involvement of children and young people in delivery of CAMHS services is developing with the employment of the dedicated participation worker who is exploring innovative ways of engagement, including the use of a social networking website. The 'Forest Flava' young people's newspaper page, which is delivered to every household in the borough, carries a prominent advertisement on consultation opportunities. Feedback from young people is currently informing service design.

68. A number of care pathways, including for young children up to three years with ASD, is resulting in early diagnosis and very good support to access mainstream services. Liaison between the children and family consultation service, the child development centre staff, acute sector paediatric services,

schools and social services in the early diagnosis and treatment of children with medical and emotional problems is very good. Good quality and well received training from early years programmes for parents and carers with children under five diagnosed with ASD, enables them to better manage their children's mental health needs. Well-resourced plans provide similar enhanced services for young people aged five to 19 with attention deficit hyperactive disorder.

### **The impact of the partnership in addressing the needs and well being of children and young people from Black and minority ethnic groups**

**69. The impact of the partnership in addressing the needs and well-being of children and young people from Black and minority ethnic groups is good.**

<b>Major strengths</b>	<b>Important weaknesses</b>
<p>Good action with partners to address inequalities that has improved participation in learning and raised attainment.</p> <p>Good range and high quality provision to meet needs for health, recreation and leisure.</p> <p>Effective collaboration between voluntary and community organisations and the council to promote broader well-being.</p> <p>Excellent initiatives to involve children and young people in decision-making.</p>	<p>Slow action to secure education places and other provision for a small number of vulnerable children and young people.</p>

70. Good work and strong partnerships address inequalities for children and young people from Black and minority ethnic groups well. Very good use is made of commissioned research, such as the impact of supplementary schooling on achievement, and data by ethnicity are used very effectively to target support.

71. Good partnerships within the 14-19 strategy have reduced inequalities in participation and attainment for vulnerable groups, including for young people from Black and minority ethnic groups. A range of creative solutions such as the gateway to employment initiative, engage young people in further education, training and work and successfully develop employability skills. Arrangements for robust monitoring of young people in EET are well underway.



72. At 90%, a clear analysis of Year 11 leavers shows improving numbers of young people from Black and minority ethnic groups remaining in full-time learning. Numbers of young people NEET, have reduced consistently - at 5.4% in January 2008, figures are below the national average. For young people aged 19 from Black and minority groups, most recent figures for NEET, at 8.8%, are below comparator authorities. In higher education, representation from Black and minority groups rose from 20% in 2002 to 28% in 2006, contributing to reducing figures and addressing an area identified by the 2007 APA.

73. Pupils from Black and minority groups in schools make good progress and attainment has shown good improvement at most key stages, addressing an area for development in the 2007 APA. For the last three years, Black Caribbean pupils have performed at or above the level of their peers nationally in literacy and numeracy at Key Stages 1 and 2 and in English and mathematics at Key Stage 3. The Minority Ethnic Achievement Programme for Somali, Turkish and Pakistani pupils has contributed well to improved science results at Key Stage 3. In the same period, figures for five or more A\* to C grades at GCSE for Black Caribbean groups on free school meals show an improving trend. Results improved to 43% in 2007, an improvement rate of three percentage points above the national rate of improvement for this group. For Black African pupils, results have improved by six percentage points to 37% in 2007, although figures are eight percentage points below national results for this group. The attainment of Turkish pupils at GCSE improved in 2007, and for those gaining five or more A\* to C grades, the gap with the borough average reduced by six percentage points.

74. Good action from the 'get it, get it right' plan has seen a significant drop in the number of Black and minority ethnic pupils permanently excluded from schools, from 66 in 2004-05 to 15 in 2006-07. This addresses an area for development in the 2007 APA. The alternative education programme that is well matched to learners' interests and aspirations is successfully engaging Year 11 learners at risk of becoming NEET.

75. Action to secure education places and access to other provision for a small number of vulnerable Black and minority ethnic groups are slow. Some unaccompanied asylum-seeking young people can wait six months to access education, including English language classes, limiting their educational opportunities. Access to school places for children attending the Asian women's refuge provision is often slow, with delays of up to six weeks. Places are sometimes at some distance from the refuge. Support and educational provision for Irish Traveller families is not as widespread as for other Gypsy, Roma and Traveller groups, although more recently, some very young children have successfully settled into early years provision. Access to play and youth provision for this small group has been poor.

76. The range and quality of provision for health, recreation and leisure is good. Strong partnerships, good networks and successful bids for grant and other funding underpin a good range of targeted health provision and cultural,

educational, recreation and leisure activities. The support group for young Somalian women run by the PCT is excellent in its focus on cultural sexual health issues. Action for young men includes good work on sexual health and relationships with effective links to the teenage pregnancy project and the designated youth worker. Plans are in hand to establish a young fathers group. Recreational activities are generally affordable, accessible and reflect the needs of socially excluded groups for example, 'Play to Fail' for 10 to 11 year old Black and minority ethnic boys in primary schools that combines sport with addressing anger management. The participation of Black and minority ethnic groups at borough-wide play days is good, with over 50% attendance from these groups.

77. Effective collaboration between voluntary and community organisations and the council promotes the broader well-being of Black and minority ethnic young people. Innovative work with children, young people and communities in addressing gangs, extremism and potential racist-based crime is good, for example, the prejudicial bullying pilot project operating in seven schools. Excellent work with faith communities to explore a single faith and values framework to inform sex and relationships work is contributing to community cohesion. Specialist innovative work with young women fleeing the threat of forced marriages has successfully helped 36 cases in the past year. Good provision for homeless young people aged 16 to 17, where young people from Black and minority ethnic groups are over-represented, is informed by effective commissioning and careful monitoring. Effective partnerships with a range of specialist housing providers include provision of a hostel for homeless refugees and support for English Gypsies.

78. Initiatives to involve children and young people in decision-making are excellent, successfully addressing an area for development in the 2007 APA. Young people are involved well in the promotion of community cohesion, for example through the innovative young Muslim leaders' project and a swapping cultures project to explore cultural identity and Islamic awareness. The very effective participation of young learners within a local work-based learning provider contributed to an outstanding grade for equal opportunities in its recent Ofsted inspection. Young people are actively involved in canvassing the views of others and scrutinise council documents for readability and appropriateness. Young women from the Somalian young women's group address a range of agencies and young people present their responses to current issues such as gang crime, the environment and the provision of youth activities very effectively. Their views are taken seriously and acted upon, for example in creating affordable sports and leisure activities. Many participation activities result in accredited outcomes, such as in the young advisors programme.

## Service management



## Capacity to improve



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

Major strengths	Important weaknesses
<p>Strong political and managerial leadership.</p> <p>Very good engagement with children and young people.</p> <p>Productive inter-agency partnerships.</p> <p>Good focus on equalities and diversity.</p> <p>Good strategic planning.</p> <p>Good financial and staff capability.</p> <p>Very good project management.</p> <p>Good performance management that has led to significant improvement over recent years.</p>	<p>Engagement with some smaller partners including private, voluntary and community organisations.</p> <p>Gaps in measurable outcomes in some strategic and service plans.</p> <p>Strategic workforce planning.</p>

80. Ambition is good. Strong commitment from councillors, effective leadership, drive and determination from senior officers and good inter-agency partnerships set a comprehensive and challenging strategic vision for local services. This reflects the views of communities and is widely understood and supported by partners and young people. Key members are highly regarded in the community for the way in which they champion the needs of children and young people, including those who are vulnerable. Information and data are shared effectively with partners and ambitious partnership plans such as the CYPP and the Local Area Agreement, are based on a comprehensive needs assessment. Strategic plans address priorities for children and young people

well, take good account of corporate priorities, such as the sustainable community strategy, and set clear and challenging targets.

81. The involvement of children and young people, including from Black and minority ethnic groups and those who are vulnerable, is sought avidly. Their views are taken very seriously and inform policy, the design and delivery of services and projects very well, all of which address an area for development in the 2007 APA. Examples include the innovative 2012 Olympic youth ambassadors scheme and the involvement of young people in interventions to address anti-social behaviour and knife crime. Young people engage widely with councillors, officers, partners and communities, run numerous high profile events and publish their views and achievements regularly in the local press.

82. Prioritisation is good. Strong and productive partnerships are built on well and partners understand their roles and responsibilities, although the service recognises that some smaller partnership organisations are less involved in formulating strategy. Thorough auditing of need, such as through commissioned reviews and research into youth gang activity are effective in shaping priorities that are widely shared by partners. Equality, diversity and inclusion have a high profile and local partners are promoting good cultural, faith and community relations. Young people, including those from Black and minority ethnic and vulnerable groups are involved well in initiatives to promote community cohesion, such as through the innovative Young Muslim Leaders project and other initiatives to explore cultural and religious identity.

83. Strategic planning is good. The CYPP and related plans are comprehensive, well targeted, link explicitly to other key strategies, realistically resourced and owned by staff. Weaknesses for some vulnerable groups in the original plan, such as for those with learning difficulties and/or disabilities, are addressed well in subsequent action plans. Annual reviews of the CYPP are systematic, thorough and secure continuous improvement. Although more recent planning shows much improvement, there are gaps in measurable outcomes leading to targets in some strategic and service plans.

84. A good focus on prevention is strengthened considerably by commissioned services. Although there is no current overall preventative strategy, the CYPP clearly articulates the council's approach. Preventative services and overall good attention to prevention through, for example, early identification and intervention from multi-agency teams in children's centres, addresses needs at a sufficiently early stage.

85. Capacity is good. Strong political and managerial leadership has enabled the council to manage its children's services well and it has established strong and productive partnerships to do so. Corporate parenting is good and the corporate parenting panel is under review to further increase its effectiveness. Inter-agency arrangements for the children and young people's strategic partnership establish clear roles and responsibilities and show good governance. The LSCB and other corporate and regional partnerships are

robust, challenging and strengthen planning and practice, such as through a recent serious case review. Action from a recommendation in the 2007 APA to improve communications with schools is starting to pay notable dividends in the secondary sector. Here, the relentless drive to raise standards and to narrow the gap in educational attainment for the most vulnerable has resulted in significantly better progress than nationally in 2007.

86. Financial planning and management are secure and effective. Budgets are balanced and closely aligned to priorities. Value for money is prioritised and efficiency savings are clear and achieved. Commissioning is widespread, secures provision of good quality and improves outcomes, for example with the YMCA on accommodation for homeless young people. Young people are involved very well in commissioning decisions and ensure arrangements are implemented well. Processes for procurement are clear and monitoring is thorough. The decision to outsource education and other services from April 2008, demonstrates good evaluation of capacity and robust contract management. The capacity of the directorate to deliver its priorities is increased well through active engagement with private, voluntary and community organisations, significantly so in children's centres. A good start has been made to involve providers in new ways of working, but some smaller groups report concerns about their part in decision-making.

87. Project management is very good and change is managed well, including action following reviews of early years and youth services and in ensuring compliance in alternative educational provisions. The delivery of a new secondary school through the council's first major private initiative under Building Schools for the Future is a key driver for further educational improvement and community cohesion. Strategies for taking outsourced functions for vulnerable children in-house are well-defined, with clear steps to secure budget efficiencies and accomplish greater integration of services.

88. The authority has the people and skills in place to deliver its current priorities, although it is working to capacity. Training is comprehensive, well targeted and of high quality. Strategies for recruitment and retention are good although pressures remain in the first response team. However, workforce planning across the partnership is insufficient to fully address the future needs of services.

89. Strong partnerships improve outcomes in health, education and social care and are securing key priorities such as the prevention of anti-social behaviour and youth crime through some innovative and creative solutions to challenges. Information on services for children, young people and families is accessible, comprehensive and available in community languages and in a range of formats for disabled people on request, although young people report some shortcomings in signposting and linkage.

90. Good progress in the roll-out of children's centres includes highly successful outreach work with vulnerable families. Good and developing support for parents enhances their economic potential and very good progress has been made in improving outcomes for childcare by childminders, addressing areas for development in the 2007 APA. Good progress has been made in the provision of extended services. Implementation is well considered, well executed and informed by users. Area and school partnerships are working well and well-targeted commissioning is addressing local needs. Good multi-agency work such as through extended services, from the hospital based multi-agency psycho-social team and in safeguarding, is setting firm foundations for integrated working. Use of the CAF is developing well. Good actions have addressed recommendations from the inspection of the youth service in 2005.

91. Performance management is good and supports corporate systems well. A clear and sustained focus on managing performance has led to significant improvement over recent years. The partnership is highly evaluative and self-critical, service performance is regularly monitored and reviewed, there is good knowledge of strengths and weaknesses and any slippage in performance is addressed quickly. Good use is made of internal and external evaluation and provision has improved as a result. For example, robust action to tackle poor performance by some chairs of child protection conferences has led to much excellent practice. Outsourced services are subject to comprehensive monitoring by councillors and officers and performance on Every Child Matters outcomes is regularly monitored across agencies. Good use of complaints and comments informs learning.

92. Performance monitoring by the LSCB includes multi-agency audits and effective use of data that improves performance across agencies, and good performance management informs the development of children's centres. Education data is now focused more sharply on driving improvement, addressing the recommendation from the 2007 APA. In children's social care effective self-evaluation, performance management and use of data have led to sustained improvement in most areas. Good use is made of national and regional data to benchmark performance for children and young people with learning difficulties and/or disabilities and for Black and minority ethnic groups to measure the impact of strategies. The well-structured managers' forum ensures a good and consistent focus on learning and continuous improvement.

93. As service users, young people are involved very well in performance management, for example, in the annual review and evaluation of the CYPP and in the monitoring of business plans. Scrutiny by leading members and young people is effective in challenging performance and improving outcomes, for example in educational attainment, and meetings are held in accessible venues such as schools. Individual performance is managed well.

94. The capacity of council services to improve is good. From one of the most poorly rated councils in the country six years ago, service performance has improved through effective political and managerial leadership and strong partnerships. Good progress has been made in addressing areas for development from the 2007 APA. A good track record of improvement overall has brought clear benefits to vulnerable groups in particular. Good action to address gaps in provision has resulted in a number of new service configurations, and outcomes from some recent and innovative initiatives are not yet fully apparent. Good multi-agency working is establishing firm foundations for fully integrated working and good monitoring of services is informing coherence in strategic evaluation such as provision from extended services, children's centres and recreation, leisure and culture. The people and skills are in place to maintain good provision, although strategic workforce planning is not fully comprehensive.

## Annex A

### **MOST RECENTLY PUBLISHED ANNUAL PERFORMANCE ASSESSMENT OF SERVICES FOR CHILDREN AND YOUNG PEOPLE IN WALTHAM FOREST**

#### **Summary**

Waltham Forest delivers a good level of children's services overall that have a good impact on each of the five Every Child Matters outcomes. The capacity for improvement is good.

For being healthy, action plans address priority issues well, partnership working is strong and good integrated services promote effective coordination of support. For staying safe, child protection services are secure and well managed and a culture of safeguarding is embedded well across agencies. In enjoying and achieving, pupils at all key stages make above average progress. Most attainment has improved at a faster rate than nationally and for similar authorities. Attainment is still an area for development as it remains generally below national figures although much of it is slightly better than in similar authorities. In making a positive contribution, young people have an increasing variety of ways to participate in decision-making and consultation. In economic well-being, the authority has successfully increased participation in education, employment and training, which is substantially above average and rising.

The local authority manages its children's services well. Good leadership sets a strong strategic vision, which is supported by clear action plans linked to careful financial planning.

The full annual performance assessment can be found at:

[http://www.ofsted.gov.uk/reports/pdf/?inspectionNumber=3070&providerCategoryID=0&fileName=\\APA\\apa\\_2007\\_320.pdf](http://www.ofsted.gov.uk/reports/pdf/?inspectionNumber=3070&providerCategoryID=0&fileName=\\APA\\apa_2007_320.pdf)



## Annex B

### CORPORATE ASSESSMENT ACHIEVEMENT - CHILDREN AND YOUNG PEOPLE

1. Outcomes for children and young people in Waltham Forest are good. A culture of safeguarding is embedded well across agencies and health priorities are addressed well. Health and safeguarding outcomes show good improvement overall and are mostly in line with or above comparators. Educational outcomes show good improvement and pupils make above average progress. Attainment overall is slightly better than in similar authorities although remaining generally below national figures. Other educational indicators are mostly above those of comparators and nationally. Outcomes enabling young people to contribute to society show significant improvement and are either good or very good overall in comparison to similar authorities and nationally. Outcomes for economic well-being are good. Participation in education, employment or training, including for vulnerable groups, has increased substantially and is above national averages. Some achievement rates have risen faster than in similar authorities. Extended services are improving outcomes for vulnerable families well.

2. This inspection concurs with the 2007 annual performance assessment (APA) judgements that service management is good and that the authority delivers a good level of children's services overall that has good impact across all outcome areas. Strong political and managerial leadership and productive inter-agency partnerships drive improvement. Ambitions are high, needs are known well and good prioritisation, including for prevention, equality and diversity, underpin good strategic planning that takes full account of corporate priorities. Very good engagement with children and young people, very good project management, good financial and staff capability and good performance management strengthen the delivery of services. Value for money is prioritised and efficiency savings are clear and achieved. Corporate parenting is good. Good multi-agency work is setting firm foundations for integrated working. As yet, strategic workforce planning does not fully address the future needs of services, there are gaps in measurable outcomes in some strategic and service plans and some smaller partners are not involved sufficiently well in decision-making.

3. Children and young people appear safe and arrangements to ensure this are good. Strong corporate commitment, an effective Local Safeguarding Children's Board and innovative work, safeguard children and young people well. A good focus on community safety includes good participation of young people and addresses their concerns about safety in the community. Child protection practice is subject to good quality assurance. Prompt and effective action protects children who are identified as being at risk from significant harm and multi-agency child protection case planning and reviewing is robust. Social care assessments are of variable quality and there are delays in the completion of Initial and Core Assessments. Early support and intervention are good.

Strong emphasis on targeted prevention contributes to reducing numbers of young people having to be looked after and effective strategies secure stable placements.

4. The combined work of all local services in securing the health of children and young people is good. Multi-agency partnerships are strong and effective and there is mainly good access to high quality integrated services. Very good multi-agency work, including with schools, promotes healthy lifestyles. Child and Adolescent Mental Health services (CAMHS), are good and a number of innovative provisions deliver a fully comprehensive service. The partnership has a good grasp of mental health admissions but there are a few inappropriate admissions of young people under the age of 18 to adult mental health environments. Good and focused attention is given to the mental health needs of most vulnerable groups although access is less good for a few that are particularly hard-to-reach. Young people with complex needs access well-coordinated clinical services and have good access to CAHMS, although there are long delays for some specialist health services.

5. The impact of all local services in helping children and young people to enjoy their education and to achieve well is good. Children get a good start to their education. Attainment overall is improving at a faster rate than similar authorities and nationally, although higher grade GCSE results remain below national figures. Attendance in secondary schools has improved above that of similar authorities and behaviour is good or better in almost all schools. Looked after children receive good additional support, attend well, make good progress and show satisfactory attainment. For children and young people with learning difficulties and/or disabilities, attainment, achievement and progress are good, due in part to a dramatic fall in exclusions of pupils with statements of special educational need. Good action with partners has improved participation in learning for nearly all Black and minority ethnic groups, raising their attainment and closing the gap with their peers. Vulnerable and disabled children and young people have good access to recreation and leisure activities.

6. The impact of all local services in helping children and young people to contribute to society is good. Consultation with young people, including those who are vulnerable, is very good at strategic level and with individuals. Some excellent initiatives involve children and young people from Black and minority groups and children's rights and advocacy services are outstanding. Good preventative action reduces anti-social behaviour and prevents re-offending and much good and innovative work promotes community cohesion. For children and young people from minority ethnic groups, effective collaboration between voluntary and community organisations and the council promotes broader well-being, notably around prejudicial bullying, faith and values.

7. The impact of all local services in helping children and young people achieve economic well-being is good. Childcare provision is matched overall to the needs of families and strengthened support for parents from children's centres enhances their economic potential. Good partnerships within the 14-19

strategy have reduced inequalities and improved success rates for vulnerable groups in particular. High numbers remain in learning post-16, and action is underway to address a limited range of learning options for some groups. Effective partnerships with a range of specialist housing providers secure suitable, safe and affordable accommodation for vulnerable groups, including care leavers. Children and young people with learning difficulties and/or disabilities receive good support to achieve independence in adulthood and transitions are managed well.

8. The capacity of council services to improve is good. Service performance has improved significantly from one of the most poorly rated councils in the country six years ago. Good progress has been made in addressing areas for development from the 2007 APA and good actions have addressed recommendations from the inspection of the youth service in 2005. There have been clear benefits to vulnerable groups in particular. Good multi-agency working is establishing firm foundations for fully integrated working and good monitoring of services is informing coherence in strategic evaluation. The people and skills are in place to maintain good provision, although strategic workforce planning is not fully comprehensive.

## Annex C

### SUMMARY OF JOINT AREA REVIEW AND ANNUAL PERFORMANCE ASSESSMENT ARRANGEMENTS

1. This joint area review was conducted using the arrangements required under Section 20 of the Children Act 2004. It was carried out by a multi-disciplinary team of inspectors from Ofsted, the Healthcare Commission and the Audit Commission. The review was undertaken according to the requirements of the *Framework for the Inspection of Children's Services*.

2. The review was linked to the contemporaneous corporate assessment of the local council by the Audit Commission and these findings plus aspects of the most recent Annual Performance Assessment are represented in the relevant part of the corporate assessment report.

3. This review describes the outcomes achieved by children and young people growing up in Waltham Forest 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, children at risk or requiring safeguarding and children from Black and minority ethnic groups. An additional investigation explored provision from Child and Adolescent Mental Health services. The review 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).