



**Better  
education  
and care**

# Joint area review

Plymouth

Children's Services Authority Area

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## 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  
Ofsted

| Audience | Published        | Reference no. |
|----------|------------------|---------------|
| All      | 12 December 2006 | 879           |

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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 nine 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 Plymouth 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 ten 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; and
- 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 Stonehouse, Plymouth. It also included gathering evidence on ten 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. Plymouth City Council is a unitary authority located in south west England. It is a large city in an otherwise mainly rural setting, with a rich naval history. Historically, economic prosperity mainly relied on defence-related industries. Major job losses since the 1980s have led to a series of government interventions, including European funding, Education, Employment and Health Action Zones, and six rounds of Single Regeneration Budget funding. Plymouth continues to receive Neighbourhood Renewal funding. Major regeneration projects are underway across the city, with the long-term goal of Plymouth becoming a prestige waterfront city.

8. Plymouth is ranked 76th out of 354 local authority districts, according to the Office of the Deputy Prime Minister (now Department for Communities and Local Government) indices of deprivation. The city comprises areas of significant affluence, contrasted with areas of significant deprivation. Of the 43 neighbourhoods in Plymouth, 14 represent the most deprived, and 14 the least deprived, in the country. Many communities in Plymouth see themselves as 'villages within a city'.

9. Plymouth City has a population of 244,400, of whom 59,500 are children and young people aged 0-19 years. The population is projected to rise by 13.7% by 2021. The city is becoming more multi-cultural, with the current population including 3.2% of people of black and minority ethnic (BME) origin. The proportion of new starters in schools from BME groups is 4.4%, and in one primary school up to 20% of new admissions are pupils of BME origin. The percentage of children under five is decreasing, with an increase in the teenage population. Population projections predict a 5.8% fall in school age pupils between 2003 and 2008.

10. Wages are lower than the national average and the cost of housing in proportion to income is relatively high. Unemployment is above the regional and national averages and a high number of the working age population are in receipt of benefit. The number of workers in Plymouth with higher level qualifications (NVQ Level 4 and above) is significantly lower than the regional and national averages.

11. Devon and Cornwall Local Learning and Skills Council work closely with the local authority, two colleges, the Tamar Valley Consortium, local training providers, 17 secondary schools and eight special schools in addressing the 14-19 strategy. Post-16 education and training is provided by two colleges, one offering general further education and one specialising in art and design, 15 sixth forms and 12 local work-based training providers. Specialist post-16 provision for children and young people with learning difficulties and/or disabilities (LDD) is provided by the college of further education and one special school sixth form. Entry to Employment provision is managed by Plymouth College of Further Education, providing 345 places. Adult and Community Learning, including Family Learning, is provided by Plymouth City Council.

12. Health care for children in Plymouth is commissioned by Plymouth Teaching Primary Care Trust (tPCT) and services are provided by both Plymouth tPCT and Plymouth Hospitals NHS Trust, including Accident and Emergency (A&E) facilities and child and adolescent mental health services (CAMHS). These trusts fall within NHS South West.

13. Plymouth Children's Services combine education and children's social care services, under the leadership of the Director of Children's Services. Children's social care teams are responsible for advice and assessment (A&A) services, looked after children, children in need, children with disabilities, and fostering and adoption. There are 392 looked after children, 119 of whom are placed outside Plymouth. There are 121 children's names placed on the child protection register.

14. Within Plymouth there are 77 primary schools, 17 secondary schools with specialist college status, eight special schools, 12 support centres for special educational need, three pupil referral units (PRU), and two nursery schools. There are 111 non-maintained early years' settings and three family centres. Four SureStart programmes form part of the development plan for 16 children's centres by 2008. Seven children's centres are already in operation.

15. The Local Strategic Partnership (LSP) comprises a range of statutory, private and voluntary agencies, with active involvement of the business community. Although previously active individually, agencies now work together to support the council's Healthy, Wealthy, Safe and Wise priorities, with the result that the LSP is newly invigorated.

16. A Children and Young People's Strategic Partnership (CYPSP) Executive Group is now in place, which will report to the CYPSP Board. The CYPSP has identified priorities under each of the five Every Child Matters outcomes. The Local Safeguarding Children's Board, chaired by the council chief executive, is in place.

17. The council was identified as a failing authority with regard to social care in May 2003 due to concerns about adults' and children's services. The council was rated as a 'zero star' authority as a result. Significant concerns regarding safeguarding were identified in CSCI's children's services inspections in 2004

and 2005. An inspection of fostering services in November 2005 recorded poor progress, although progress in adoption services was demonstrated in a follow-up inspection in February 2006. The appointment of the Director of Children's Services, followed by a new Assistant Director, enabled some limited progress to address safeguarding issues in early 2006.

18. A contract with a Strategic Partner, Cambridge Education Limited and OLM Consulting Ltd, is now in place, with clear targets to improve services. Fourteen Strategic Partner managers are in place to work with the Director of Children's Services to develop quality children's social care services, and to mentor and provide training and development opportunities for children's services managers. The Strategic Partner arrived in Plymouth during May 2006.

## Summary Report

### Outcomes for children and young people

19. **Overall outcomes for children and young people in Plymouth are adequate, and most children and young people enjoy the opportunities they have and achieve well.** Children and young people are generally healthy, although there are some areas of health inequality and deprivation. Health outcomes, such as infant and child mortality, vary little from national averages. Immunisation rates are comparatively high but breastfeeding rates are significantly low. Children and young people with learning difficulties and/or disabilities wait too long for therapies and equipment. Children and young people appear generally safe. Thresholds for child protection are now appropriate, and children and young people at risk of abuse are benefiting from improved multi-agency responses to child protection issues. All children on the child protection register and looked after children are allocated to qualified social workers, and are regularly reviewed. However, some foster carers receive insufficient information about children prior to placement. Access to preventative services is increasing, but children and families wait too long for assessments to be completed. Care leavers are well supported. The arrangements to safeguard looked after children and children with learning difficulties and/or disabilities are adequate. The educational standards achieved by most children and young people, including looked after children and children with learning difficulties and/or disabilities, are good overall. The gap in attainment between the more deprived inner city areas and the city as a whole is closing. Children and young people have good opportunities to develop socially and emotionally, and many make an adequate contribution to their communities, although they are not yet systematically influencing decision-making. Youth service provision is inadequate overall. Young people are prepared adequately for working life. There are appropriate work experience opportunities available, but success rates at the ages of 16 and 19, and attainment levels of GCE/VCE, are below national average. Work-based learning achievement is above average, as are progression rates from entry to employment, although the number of young people entering employment without training is increasing. There is not enough suitable accommodation for young people who have offended.

## The impact of local services

20. **The overall impact of local services is adequate.** Significant improvement has been achieved in safeguarding children and young people, with all agencies committed, individually and collectively, to safeguarding as a key priority. Improvements in social care have been achieved by strong leadership by the Director of Children's Services and Chief Executive, with all-party support by elected members. The intervention of the Strategic Partner has accelerated achievement. This progress is mirrored in health and other agencies, and strong strategic links have been forged, with a multi-agency focus starting to permeate through services. These achievements are relatively recent, and more time is required in order for them to be seen as sustained, but there are good foundations in place, and the capacity to improve is therefore adequate.

21. **The impact of all local services in securing the health of children and young people is adequate.** Agencies are beginning to work effectively to improve outcomes for children and address health inequalities and deprivation. Support for families is good, with good universal health screening by the health visitor service. Support and information provided for pregnant women, new mothers and families is good. Targeted projects, such as SureStart and the Latch On Group, work effectively to increase the low numbers of breastfeeding mothers. However, there is no city-wide strategy for increasing breastfeeding. There are no dedicated accident and emergency facilities for children and young people at Derriford Hospital and there are insufficient paediatric nurses. The national Healthy School programme is developing and effective, with an increasing number of young people taking part in regular exercise, although new initiatives to reduce obesity in primary school children have yet to be implemented. Sexual health services are good and rates of sexually transmitted diseases in young people are low. The different levels of service in CAMHS are not sufficiently well integrated and provision is inconsistent, but there are areas of good practice in primary care provision, such as the Excellence Cluster schools support. Recent appointments and improved strategic planning are extending the range and focus of the service. Children with emotional and behavioural difficulties, who do not have a statement of special educational need are insufficiently prioritised, resulting in delays in provision. Mental health provision for children who abuse substances and have mental illness is poor, but early intervention for psychoses is good.

22. Looked after children's health needs are addressed adequately but, in some cases, carers receive insufficient information on keeping their foster children healthy. Achievement of annual health assessments of looked after children reduced in the last year from 83% to 78%, and are now below national average. There is no designated doctor in post for looked after children, although interim arrangements for covering the work are in place. There is a good initiative to enable parents to learn communication techniques. However, there remain significant waiting lists for speech and language services, physiotherapy and occupational therapy, with demand far exceeding capacity.



## Staying safe

22. **The impact of all local services in keeping children and young people safe is adequate.** Statutory agencies, the Children and Young People's Strategic Partnership (CYPSP) and Local Safeguarding Children Board (LSCB) are explicit that children's safety and protection is a key priority. The LSCB business plan sets clear responsibilities for each member, who is accountable on behalf of their agency, for delivery of the plan. The plan is shared by all agencies, underpinned by multi-disciplinary training and single agency development opportunities. In response to previous inspection findings, all agencies involved in safeguarding children have worked together well to ensure that children's outcomes are improved through better individual and collective management and practice, and revised policies and procedures. There is improvement in children's services organisational structure, performance of managers, staff and systems and in the morale of staff involved in safeguarding and protecting children. Robust child protection processes are in place, and the quality of assessments has improved. However, some direct practice is of variable quality. There is some lack of consistency between agencies in applying the threshold criteria for the Child Concern Model, a cornerstone of the refocused preventative service. As a result, children's services are facing increased demand, with referral rates and numbers of initial and core assessments now significantly higher than those of comparators and national average.

23. Services for looked after children are adequate. Effective work has led to reductions in the number of looked after children and good use of fostering, adoption and special guardianship. However, some foster carers do not receive sufficient background information and support from their child's social worker. There is good support for care leavers. Some individual work with children with complex needs is of good quality but could be improved by a more coordinated multi-agency approach. There is a comprehensive Civil Emergency Plan, which requires updating to reflect the children's services management structure. Understanding of diversity issues, particularly in relation to the needs and aspirations of those of BME origin is underdeveloped.

## Enjoying and achieving

24. **The impact of all local services in helping children and young people to enjoy their education and recreation and to achieve well is good.** Parents living in the more deprived parts of the city are well supported and encouraged to participate in their children's education. Early years education is good with increasing emphasis on developing children's language and communication skills. Children progress well through the Foundation Stage. Support for school improvement is good and attainment is improving at all key stages. Children make good progress between Key Stage 1 and 2 and progress is satisfactory between Key Stage 2 and 4. Initiatives targeting the more deprived areas are effective and the gap in attainment between these areas and the rest of the city is narrowing. Well thought out initiatives in the inner

city areas, are improving behaviour, attendance and exclusion rates. Looked after children are supported well and achieve better than similar groups nationally. There is a well conceived strategy for identifying learning difficulties early and for promoting inclusion. Children with clearly diagnosed medical conditions are well supported but support is more variable for children with behavioural or emotional problems or with autistic spectrum disorders. Action is being taken to improve the consistency of provision for children who are unable to attend school. Children and young people are provided with a good range of sport and recreational opportunities but often find the cost of travelling and participating in sport outside school hours prohibitive.

### **Making a positive contribution**

**25. The impact of all local services in helping children and young people to contribute to society is adequate.** Effective and very good work by partners in schools, early years and community settings enables children and young people to develop socially and emotionally, make decisions and take responsibility. Youth service provision is unsatisfactory overall. Whilst provision managed by the council is developing self-esteem and personal qualities well, much work organised through community colleges is not adequately meeting needs. Children and young people are receiving good support in managing change and challenges in their lives, including transition between school phases. There are increasing opportunities for children and young people to give their views. However, participation is not yet sufficiently widespread nor systematic and is not yet making a significant difference to decision-making.

**26.** There is strong emphasis on early identification and prevention of problems likely to lead to exclusion and anti-social behaviour. Effective partnership working has reduced exclusions and the numbers entering the youth justice system. Children and families' participation in child protection conferences has improved. The support for looked after children to make a positive contribution is satisfactory, although not all contribute to their reviews, particularly children under eight. An advocacy service provides good services to children and young people, and is working to help young children contribute to their reviews. Care leavers receive good support from their personal advisers, but their experiences of the quality of foster care vary. There is some good support for children and young people with learning difficulties and/or disabilities to make a positive contribution. However, case files often do not record the views of all young children. Respite and extended care services for the families of disabled children and young people, and arrangements to support young carers, are not yet fully meeting needs. Children and young people with learning difficulties and/or disabilities do not have equitable access to youth service and other activities.

### **Achieving economic well-being**

**26. The impact of all local services in helping children and young people achieve economic well-being is adequate.** The accessibility of

childcare is good, and close partnership working provides good support to children and families. The provision of family learning by the council is good. Partners generally provide good support to children and young people to continue in education and training. The provision of work experience, personal development and enterprise for young people is very good. Work to reduce the levels of young people not in education, employment and training has been successful and these are low and reducing overall, with a few high levels in the most disadvantaged areas. A web-based prospectus for 14-19 provision, with the capacity for single application and effective tracking systems has been commissioned.

27. The 14-19 strategy is well considered, is being updated, and is encouraging greater partnership and collaboration across 14-19 provision. However, there is currently no coherent mechanism to develop the whole curriculum offer across Plymouth and performance management across post-16 provision in schools requires further development. Sharing and analysis of data is insufficient to track individuals' progress. Some aspects of post-16 provision are managed well. Work-based learning and entry to employment are good. The Tamar Valley Consortium provides effective links between schools and work based providers, and the development of the vocational curriculum is good.

28. Local communities, including young people, are appropriately involved in regeneration. The city regeneration programme is coherent and inclusive. The areas of most need have been suitably targeted within the overall city growth plan. Housing provision is a cause for concern. A high percentage of the housing stock is below the decent homes standard, and the 2010 target is unlikely to be met.

29. Improved communication between agencies has led to improved transition planning for looked after children and better access to suitable accommodation for care leavers. There is insufficient involvement of all partners with regard to transition for young people with learning difficulties and/or disabilities and the range of education and training opportunities for these young people post-16 is insufficient, although improving.

### **Service management**

30. **The management of services for children and young people is adequate across the local area.** The self-assessment produced by partners provides a realistic evaluation of Plymouth services. Ambition is good. The council and its partners have set out an ambitious, shared vision and strategy for improving outcomes for children and young people in the Children and Young People's Plan (CYPP), which is based on a thorough audit of need and links to higher level council plans. The CYPP is underpinned by increasingly robust service plans which are focused on delivery. Children and young people have been consistently prioritised by the council, with significant financial investment above government guidelines in children's social care. Council services for children and young people merged in May 2006, and more vigorous

strategic partnership with other agencies is becoming more effective. Trust arrangements are on track to be in place by 2008. The Director of Children's Services, the Chief Executive, Council Leader and Lead elected member for children and young people provide powerful, trusted leadership, ensuring the continued drive for improvement.

31. Current capacity is adequate. Capacity to improve is also adequate. Good budget monitoring and control in the council, in a very tight overall financial position, increasingly provides a solid basis for realising ambitions. Value for money is variable, as are procedures for consistently assuring this. Some budgets are pooled or aligned. However, the commissioning strategy is underdeveloped, particularly for services provided by the wide voluntary sector. This position is recognised, and steps to improve are being taken. There is significant investment in securing the building blocks to maximise the impact of current capacity, and in improving outcomes.

32. A performance management framework is in place across children's services, and it is increasingly demonstrating effectiveness. Managers and councillors are using performance data more consistently and this ethos is permeating throughout the organisation. Scrutiny is improving, but its degree of challenge to performance is underdeveloped.

## Grades

Grades awarded:

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

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

## Recommendations

For immediate action

The council and its partners should:

- increase the opportunities for children with learning difficulties and/or disabilities, who do not attend special schools, to access speech and language, physiotherapy and occupational therapy services
- improve youth service provision in line with the recommendations from the Enhanced Youth Service Inspection, to better meet the needs of children and young people, including those from vulnerable groups
- establish a suitable post-16 performance management system.

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

The council and its partners should:

- ensure that diversity training is accessible by all staff and that consideration of diversity issues is demonstrated in work with service users
- ensure consistent access to a designated doctor for looked after children
- ensure robust implementation of the CAMHS Strategy in order ensure integration of all CAMH services, and to increase accessibility to services
- implement multi-agency quality assurance processes in order to measure and ensure consistency of application of thresholds for Child Concern Model
- continue the development of a coherent approach to the development of the 14-19 curriculum
- improve the numbers of looked after children and young people, and those with learning difficulties and/or disabilities, who contribute to their reviews, including young children
- ensure that the views of children and young people and their families are utilised in the planning and development of services.

## For action in the longer term

The council and its partners should:

- increase the number of specialist paediatric nurses in the Accident and Emergency Department, Derriford Hospital, in order to match target provision
- conduct a full review of multi agency support provided for all children and young people with learning difficulties and/or disabilities, in consultation with children and young people, and their parents and carers. Such review should include consideration of the range and availability of respite and extended care, the range and accessibility of play and recreational facilities, and the implementation of multi-agency review processes
- extend the good services providing support for young carers, so that they are more widely available
- improve the post-16 provision available to children and young people with learning difficulties and disabilities
- improve the standard and availability of social housing for young people.

## Main Report

### Outcomes for children and young people

33. **Outcomes for children and young people in Plymouth are adequate.** Children and young people benefit from good universal health services, but they do not have sufficient or equitable access to more specialised help. Children and young people appear generally safe. Most children and young people achieve well, feel that life is enjoyable, and consider they are doing well at school. They have increasing opportunities to contribute to society and for their views to influence services. Most children and young people are able to achieve economic well-being and are prepared adequately for working life

34. **Children and young people are generally healthy.** Outcomes for children and young people are adequate and in line with national averages, and, in many areas of the city, outcomes are improving as a result of the support parents and carers receive to develop healthy lifestyles. The majority of young people surveyed considered themselves to be either quite or very healthy. The incidence of infant, perinatal and child deaths and of disease is low and the number of babies with low birth weights is reducing. However, the proportion of mothers who breastfeed their babies is low. The proportion of expectant mothers who smoke during pregnancy is reducing and lower than comparators, however the numbers remain high and there is a significant

variation across localities. Immunisation rates are high and the incidence of measles is lower than average. Work within schools towards healthy lifestyles for children and young people is good, with over half of schools achieving the National Healthy School Standard, above national average. The rate of teenage pregnancy and the number of sexually transmitted infections is low. However, teenage conceptions, having reduced, rose again in 2004. The proportion of children and young people with mental health needs who are seen within the recommended timescales is low but all young people needing hospital inpatient care are treated on the adolescent ward. The proportion of young people in the substance misuse treatment population is low.

**35. Children and young people appear generally safe.** Children and young people generally feel safe. Serious road accidents involving children and young people have reduced by 80%, a decline double the national average. Numbers of children on the child protection register have increased and are now in line with comparators. All children on the child protection register and children looked after are allocated to qualified social workers. Children at risk of abuse are benefiting from improved multi-agency responses to child protection issues. Reviews of looked after children and children and young people on the child protection register are conducted within timescales. Rates of referral, and numbers of initial and core assessments by social care services are high and children and young people wait too long for assessments to be completed. Thresholds for access to preventative services, through the Child Concern Model, are not always consistently applied.

**36.** Improvement in preventative services, and effective planning for rehabilitation and permanency has reduced the numbers of looked after children from 520 to 392 within the past year. However, some looked after children and their foster carers receive inconsistent support. Care leavers receive good quality services from the care leavers team. Accommodation for care leavers is adequate. The arrangements to identify vulnerable young people in the area is adequate with good arrangements between the police and council to track missing young people and children from traveller families. The arrangements to safeguard children with learning difficulties and/or disabilities are adequate. Some work with children with complex needs is of good quality but families experience a lack of multi-agency approach. There is not enough attention to the language and cultural needs and aspirations of some children of BME origin.

**37. Most children and young people achieve well and most feel that life is enjoyable. Most children and young people consider they are doing well at school.** Attainment in 2005 was above that achieved by pupils in similar areas and was in line with national averages in the early years and at all key stages. Unvalidated results for 2006 indicate a similar pattern with significant improvement in the early years and in the proportion of young people gaining five GCSE grades A\* to C. The gap in attainment between the more deprived areas and the city as a whole is closing.



38. Most schools perform well. The overall progress made by children between the ages of seven and eleven is good although some pupils in a few primary schools do not make sufficient progress. Some pupils in two of the 17 secondary schools did not make sufficient progress between Key Stage 2 and 4. Attendance is well above national averages in both primary and secondary schools and both temporary and permanent exclusion rates are below the national average and have reduced significantly in inner city areas. The attendance of looked after children is good and their levels of attainment are above the average for similar children nationally, although still below national average for all pupils overall. The attainment of pupils with learning difficulties and/or disabilities is generally good.

39. **Children and young people have an adequate range of opportunities to make decisions and take personal responsibility and many make an adequate contribution to their communities.** Pupils benefit from developments in the curriculum to improve social and emotional understanding and behaviour. The best youth service practice is having a positive impact on developing self-esteem and responsibility. Examples include recent youth participation events and some outreach activities, such as the project for lesbian and gay young people. However, too few young people make sufficient progress in youth service provision and overall standards of achievement are inadequate. Young people of BME heritage and young people with learning difficulties and/or disabilities are not participating in youth service activities in sufficient numbers. Children and young people are participating effectively in school councils and in work with local communities. Some young people are making good contributions through local networks for youth opinion and acting as positive role models for younger children. However, participation of children and young people is not yet systematic enough to have an impact. Youth parliament members are using the internet effectively to raise awareness of young people about their activities. The council has taken action to subsidise bus fares following consideration of young people's views.

40. Young people at risk of exclusion are successfully re-engaging with education. Young carers with disabled siblings are benefiting from a voluntary sector club which gives them some respite from pressures at home. Most care leavers gain access to college and training places, and the achievements of looked after children are celebrated by an annual event. Young mothers who are care leavers benefit from the good support received from personal advisers and health visitors. However, not all looked after children, or those with learning difficulties and/or disabilities, are contributing to their reviews, particularly those aged four to eight years.

41. **Most children and young people are able to achieve economic well-being and are prepared adequately for working life.** Children and their parents and carers benefit from a good range of accessible childcare provision. Children and young people have access to a good range of support to minimise financial stress. The levels of take-up of education maintenance allowance are high. Young people have access to good quality support and

guidance from Connexions and other agencies. Appropriate work experience opportunities are available to all young people at Key stage 4. Qualification outcomes are below the national average for level 2 and level 3 by the age of 19. Attainment levels at GCE/VCE are now also lower than the national average. However, work-based learning achievement is above average as are progression rates from entry to employment. The proportion of young people staying on in full-time education at 16 has increased and is now at the national average. The number of young people who are homeless is reducing as is the length of stay of families and young people in temporary accommodation. The proportion of young people not in education, employment or training is reducing and is lower than the national average. However, the proportion of young people entering employment without training is rising. A high level of young offenders and looked after children are in employment education and training and the percentage of care leavers living in suitable accommodation in 2005-06 was at national average, having been below in previous years. However there is still not enough suitable accommodation for 16 and 17 year olds who have offended.

## **The impact of local services**

### **Being healthy**

42. **The combined work of all local services in securing the health of children and young people is adequate.** Services are beginning to work together to improve health outcomes in a city where there are some areas of health inequality and social deprivation. Universal health screening is good. The Health Visitor Service and primary care are provided within a common framework of health assessment at appropriate ages, and are well-targeted. Three community public health practitioners, employed through the Public Health Development Unit (PHDU), work with those communities with the most significant levels of health inequalities. The PHDU Children's Health Atlas identifies key health data and supports service planning and targeting of work to reduce inequalities.

43. Support and information provided for pregnant women, new mothers and families is good. Midwifery services, managed by the Acute Trust, have separate community and hospital teams, with some midwifery care assistants based in General Practitioner (GP) surgeries. There are some good local partnership initiatives to improve family health and parenting through responsive, tailored and appropriate provision particularly through children's centres. These provide a range of services about smoking, substance misuse and sexual health and relationship education. There are some excellent integrated GP models, such as Adelaide Street Surgery, Stonehouse. Immunisation rates are high and the incidence of childhood measles is well below national average.

44. The proportion of mothers who breastfeed their babies is very low and despite some local initiatives, such as Latch On Group, Chatterbox and SureStart, implementation of a city-wide strategy is not prioritised at local level.

45. There is a good focus on health issues in schools, with over half of schools having achieved the National Healthy School Standard, above national average. Take-up of exercise is increasing through out of school sport initiatives such as Park Rangers in Stonehouse. There has been detailed analysis of the increase in obesity amongst primary school children and new initiatives are planned.

46. There is a significant waiting list for speech and language services, with a backlog of referrals far exceeding capacity. The level of service provided is inadequate. Derriford Hospital does not have dedicated accident and emergency facilities for children and young people. The hospital provides good outreach care but has inadequate numbers of specialist paediatric nurses and high levels of locum staff.

47. A joint health and social care team provides emotional, behavioural and mental health services and includes the drug and alcohol action team (DAAT). However, there is a lack of coordinated multi-agency approach to addressing the needs of young people who misuse substances, including alcohol. There is insufficient provision of services for young people who have a mental illness and abuse substances.

48. Sexual health services are good, such as the Foyer and drop-in contraceptive services, and young people are increasingly making use of them. Rates of sexually transmitted diseases in young people are low. Teenage pregnancy rates have generally fallen over the past four years. The conception rates amongst looked after children are reducing.

49. Child and adolescent mental health services (CAMHS) are fragmented and inconsistent and there is insufficient integration of the different levels of service commissioned. There are, however, examples of good practice such as the attachment of locality-based primary mental health nurse posts to some schools and clinics. A community CAMHS manager post, jointly funded by the tPCT and council, has now been appointed. A joint CAMHS strategy has been agreed by all agencies and implementation of this is proceeding. There are good examples of mental health promotion and early intervention where health visitors, school nurses and psychologists are providing Tier 1 and 2 services, for example, Kew 5, which focuses on early years and children from BME origin and a project run by MIND which promotes mental health in schools. However, there are long waiting lists, of up to one year, for specialist, Tier 3, services. A new regional unit, serving the peninsula, provides acute inpatient, Tier 4, services. Access to some services is dependent on a statement of special educational need or medical diagnosis. This results in some children, with emotional or behavioural difficulties facing long delays in receiving support and treatment. Children with learning difficulties and/or disabilities, other than those with Downs Syndrome,

who are provided for by the Child Development Centre, have to wait too long for services.

50. There is limited access to secure accommodation for offenders with mental health needs, with the nearest units based in Bristol and Kent.

51. The appointment of one looked after children's nurse has improved working arrangements for care planning between social care and health. There is no designated doctor for looked after children in post, although interim arrangements for covering the work are in place.

52. Working arrangements between placing social workers and foster carers are insufficiently focussed on the healthcare needs of looked after children.

53. There are good multi-agency services for children and young people with learning difficulties and/or disabilities in special schools. However, waiting times for physiotherapy and occupational therapy services are long for children attending mainstream schools and equipment, in some cases, is not provided quickly enough.

### **Staying safe**

54. **The work of all local services in keeping children and young people safe is adequate.** Good information is available to parents, children and young people regarding safety issues. Serious injuries and deaths of children and young people in road accidents have reduced by 80%, twice the national average. The Civil Emergency Plan addresses children and young people but requires updating. Regular health and safety checks are made on premises provided and contracted by the council, with all external providers accredited. Criminal record bureau checks are undertaken for children's services and health staff.

55. Work to minimise the incidence of child abuse and neglect is adequate and those children most at risk are protected. A range of preventative services provide support to children in need through children's services, the Child Assessment Support Team (CAST), children's centres, and by the private and voluntary sector. There has been significant progress in raising the understanding of all agencies regarding their responsibilities to protect and safeguard children and over 1200 staff have received multi-agency training. As a result, the Child Concern Model is further embedded, but the change process is not yet complete and there is some inconsistency of application of family support thresholds across agencies. Numbers of referrals to children's services, and initial and core assessments undertaken are rising significantly higher than those of comparators and completion of core assessments within timescales is low. Some work undertaken by social care staff could have been more appropriately effected by other agencies, and performance management processes related to the application of the Child Concern Model are not yet sufficiently robust to address this.

56. The work of agencies to collaborate to safeguard children is adequate. The LSCB has strengthened strategic planning process and responses to safeguarding issues. The business plan, underpinned by a comprehensive training plan, gives clear responsibilities to each board member. The LSCB has created a healthy culture of challenge within its membership and there is full commitment and accountability by members, on behalf of their individual agencies.

57. All agencies prioritise safeguarding and child protection. The involvement of the Strategic Partner in social care is enabling swifter improvement in quality of work and outcomes. Compliance with the Victoria Climbié enquiry recommendations has been achieved. Action plans have been completed and implemented with regard to seven of the eleven serious case reviews which were outstanding before the current children's services management team was in place. The remaining four are being brought to a conclusion. The police domestic violence team, child protection unit and dangerous offenders team are co-located, ensuring good communication, and a clear protocol is in place for multi-agency liaison regarding risk. Referral quality, and the response to domestic violence by all agencies, however, is not yet fully consistent.

58. Numbers of initial child protection conferences (ICPC) are in line with comparators. The rate of registration is rising, as a result of improved decision making. Measures taken to improve the response to child protection referrals have been effective, and identification of risk has improved. However, numbers of ICPCs held within timescales are low. Child protection review conferences are timely and child protection plans have measurable objectives and outcomes, with identified responsibilities for each agency.

59. Information sharing arrangements are in place between agencies. All children on the child protection register are allocated to qualified social workers. However, case records are not always consistently updated and some records omit key information. Whilst ethnicity is generally recorded, there is variation in understanding and the ability to address the aspirations and cultural needs of service users from BME groups. However, there is good access to interpreter and translation services.

60. Work to establish the identity and whereabouts of all children and young people aged 0-16 is good. Children at risk of being excluded from school or identified as missing are subject to clear processes. Pre-school children are increasingly identified by health visitors, and a good transition process exists for children moving from day care services to schools. The education welfare service effectively tracks children of school age who are not in school, including children who move into the area. National systems are used to report and trace missing children and young people who are looked after or whose names are on the child protection register. A dedicated police officer co-ordinates information about missing children and liaises regularly with children's services. Children from traveller families are identified by a dedicated service and are linked into key services. The leaving care service actively targets disaffected

young people and 91% of young people have a personal advisor from the Connexions Service.

61. A reduction of 25% in the numbers of looked after children has been achieved since September 2005 by systematic review of all looked after children, appropriate discharges of care orders, and rehabilitation. High numbers of looked after children have been adopted or are being considered for adoption or Special Guardianship. Seventy nine per cent of looked after children are placed in foster care, with only 22 children in residential accommodation. Appropriate use is made of therapeutic out-of-city resources. The drive to improve recruitment and retention of foster carers in order to ensure choice of placement is beginning to bring success. The foster carer handbook and newsletter provide good information and advice. However, the support and training available to foster carers following their approval is, in some cases, inadequate, and emergency placements are sometimes made with insufficient information, preparation and practical support being provided to the foster carers. The quality of children's social workers' partnership working with foster carers is variable, and, in some cases, decisions are made without the appropriate involvement of the carers.

62. All looked after children have allocated qualified social workers, and statutory visits are made within timescales. Reviews of looked after children are held on time, and are well attended by partner agencies. There is a private fostering policy and implementation plan. Plymouth Foster Care, an independent organisation, delivers effective information and training about private fostering. There is some evidence of inconsistency in identifying private fostering placements, however.

63. There is a comprehensive child protection training programme and service delivery plan for staff working with children with learning difficulties and/or disabilities. There is some good work with children with complex needs but, too often; this takes place within individual disciplines rather than within a multi-agency care process.

### **Enjoying and achieving**

64. **The work of all local services in helping children and young people to enjoy their education and recreation and to achieve well is good.** Well thought out initiatives, including collaboration with the voluntary sector, are successful in promoting parental involvement with early year's settings and primary schools, particularly in the more deprived parts of the city. Information is comprehensive, of high quality and includes web-based and printed materials. Initiatives to help parents and carers improve parenting skills and prepare children for school are good and are successful in engaging with more hard to reach parents.

65. There is sufficient early years provision and early years education is of good quality. Support provided by the council to promote self-evaluation by early years settings and improve outcomes is well-targeted. Actions to improve

language, communication and children's preparedness for school are having an impact. Children progress well through the Foundation Stage and the gap in attainment between the most and least deprived areas is closing. Primary schools and early years settings cooperate well to promote smooth transition.

66. Support for school improvement is good overall. There are no secondary schools and only three primary schools in Ofsted categories of concern, only one of which requires special measures. Performance data is used well to identify areas of underachievement and for targeting support. School improvement targets are challenging but achievable and the gaps in outcomes between the most and least deprived areas are closing. At both Key Stage 1 and 2 there has been good overall improvement and primary age pupils make good progress. Results at Key Stage 3 in mathematics and English have improved steadily over a three year period but unvalidated data for 2006 suggest that the trend in English overall has not been sustained despite an improving trend in schools serving the more deprived areas. Performance in GCSE examinations has been consistently above that of similar authorities and unvalidated data for 2006 shows further significant improvement. School admissions procedures are appropriate. Information is clear and accessible, and parents have a wide choice of schools across the city. Priority is given to looked after children.

67. Most children and young people enjoy school and attend regularly. Rates of unauthorised absence are well below national averages in both primary and secondary schools and authorised absences are in line with national averages and declining. There are well thought out initiatives to improve behaviour and reduce exclusions. Parental involvement is encouraged and there is an emphasis on preventative action through early support. The behaviour improvement programme developed in the Excellence Cluster of 26 schools has been particularly effective in reducing exclusions. There are clear protocols between schools to place pupils in appropriate settings to avoid exclusions.

68. There are many examples of children and young people with behavioural and motivational problems, who have been excluded from school, being supported well by the pupil referral units and the hospital school. However, not all excluded pupils have access to the nationally recommended amount of weekly support. The local authority has recently taken action to clarify the role of the Plymouth Tuition Service, improve the quality of the provision it offers and provide alternative options. There are well located support and learning opportunities for young mothers who are unable to attend school.

69. Overall, children and young people are provided with an adequate range of recreational activities. Work carried out in partnership with voluntary organisations and Connexions is broadening the curriculum and provides more inclusive opportunities for hard to reach groups of young people and those pupils at risk of disaffection. However, insufficient use is being made of the youth service to motivate and broaden the interests of young people. A good range of opportunities are available for children and young people to participate

in sports but young people often find the cost of travelling and participating in sport outside school hours prohibitive. As a result of feedback from young people, the council has worked with Plymouth City Bus to introduce concessionary fares for young people. There are good examples of work with voluntary organisations to improve the range of play opportunities for children and the quality of play in inner city areas. However, the council does not give sufficient consideration to the needs of disabled children when designing play areas.

70. Children and young people who are looked after are helped to enjoy and achieve well. Their attendance rates and outcomes at Key Stage 4 are above the average for similar groups nationally, although their levels of attainment are well below the average for all children. The Looked After Children's Service monitors their progress well in partnership with schools. There are good examples of multi-agency working through specific looked after children staff and good initiatives to raise these children and young people's aspirations, encourage them to achieve and celebrate their successes.

71. There is much good and improving provision to help children and young people with learning difficulties and/or disabilities enjoy and achieve. A well thought out intervention strategy to identify additional learning needs early and provide appropriate support has been developed and is promoting inclusion. Early identification of language and communication needs as well as emotional and behavioural difficulties is beginning to have an impact despite the limited capacity of speech and language therapy services. Numbers of statements of special educational needs issued are reducing. However, parents and carers of children with behavioural and/or emotional difficulties are concerned about their ability to access services, and appropriate schools, if their child has no statement of special educational need. Although the roles of special schools are clear, details of how they will be rationalised and developed to meet the changing demand for different types of provision, including provision for pupils with autistic spectrum disorders and emotional and behavioural disorders, has yet to be resolved. Well conceived and well structured protocols for supporting the transition of pupils with different levels of additional learning needs between schools are being implemented but are not yet ensuring that all children have the support they need.

### **Making a positive contribution**

72. **The work of all local services in helping children and young people to contribute to society is adequate.** There is effective and very good work in schools, early years and community settings to support children and young people in developing socially and emotionally, both directly and through work with parents. Youth service provision overall is, however, inadequate. It provides some good opportunities for children and young people to develop self-esteem and personal qualities, but much of the work organised through community colleges is not sufficiently well tailored to the needs of young people. There is unequal distribution of youth service activities across



the city and some groups, such as BME young people, are less likely to participate. Young people in schools visited in the Stonehouse area have good opportunities to take part in activities which build confidence and maturity, including school councils.

73. Partners provide much effective support for children and young people, including those from vulnerable groups, in managing change and challenges in their lives. Children are supported well in making the transition from early years to primary provision. A well-designed project is underway which has identified good practice in transition between phases and is supporting schools in improving transition further. Good initiatives to support young people include the Foyer residential charity, Connexions' work with those at risk of dropping out of education, employment or training, and projects which address drugs and substance misuse. There is some effective support for young carers but the local authority recognises that more is needed.

74. Opportunities for children and young people to give their views are increasing, particularly through the work of the Children's Fund participation team. However, participation is not yet sufficiently widespread nor systematic and not yet effectively influencing decision-making. Conferences and surveys of views have taken place, and a few services, such as Connexions, have enabled their young users to influence decisions such as staff appointments. There are 14 youth forums in place, although these are fairly new and not yet having a significant impact. The scale of voting for youth parliament candidates has been low, but the elected members are making good strides in increasing awareness of their role and in carrying forward local issues regionally and nationally. Young people are managing the Youth Opportunity Fund with good engagement of BME children and young people. The children's version of the Children's Fund Plan was produced by children with learning difficulties and/or disabilities.

75. There is effective partnership work in schools and the community to reduce anti-social behaviour, with a strong emphasis on early identification and prevention. Community play schemes, such as those in Stonehouse, have reduced low level antisocial behaviour during school holidays. The youth service worked successfully with police and a housing association to tackle racist anti-social behaviour in one area. Police officers are working effectively with schools to build relationships with children. However, bullying in the streets and parks is a worry for some children, particularly the youngest.

76. The Youth Offending Team works effectively with children and young people in the community to prevent offending behaviour, for example through youth inclusion projects such as Positive Futures, in collaboration with schools. There has been a reduction in first time entrants to the youth justice system. The YOT is also working well with young people subject to detention and training orders. In 2005-06 re-offending rates were in line with those of similar authorities, although above the national and regional average. While 85% of under-16s who have offended are in education, not all are receiving 25 hours a

week. The assessment of the health needs and basic skills of these young people are unsatisfactory. There has been progress in reducing offending behaviour by looked after children.

77. The support for looked after children to make a positive contribution is adequate. The majority have pathway plans for independence. The authority is seeking to increase the proportion of children and young people looked after participating in their reviews, particularly children younger than eight. An advocacy service is providing a good service to children and young people, and is developing ways of supporting young children in giving their views. Care leavers have been involved in the recruitment and selection of staff. Care leavers met by inspectors were receiving good support from their personal advisers in managing challenges and transitions in their lives. However their experiences of foster care varied and some felt let down by poor quality placements.

78. There is some good support for children and young people with learning difficulties and/or disabilities to make a positive contribution, but this aspect is a priority for improvement in partnership plans. There is innovative practice in special schools, for example in relation to review and planning processes, and good processes for transition between school phases. However, scrutiny of individual case files revealed that, often, the views of young children are not recorded. There are good forums to support parents and carers. The local authority has acknowledged the need to improve respite and extended care services for families and is taking steps to do so. The Connexions service has a priority focus on assisting children and young people with learning difficulties and/or disabilities into education, employment and training, although there is an acknowledged need to improve post-16 opportunities. Children and young people with learning difficulties and/or disabilities do not have equal opportunities to participate in youth service and other activities in the city. They are concerned about limited physical access to public buildings as well as the opportunity to join in.

### **Achieving economic well-being**

79. **The work of all local services in helping children and young people achieve economic well-being is adequate.** Children and their parents benefit from a good range of accessible childcare provision, and close working between partners provides early intervention and generally good support to children and families. The provision of family learning by the council is good. Growth in registered childcare provision exceeds the national average with a particularly strong increase in childminding. Children and young people are generally well supported in continuing in education and training, both financially and with good advice. The advice and assessment service provides good information about benefits and childcare. Job Centre Plus and Job Brokers work effectively within children's centres. The proportion of young people feeling they receive a good service from Connexions is higher than the national average. The support from the Tamar Education Business Partnership in the

provision of work experience, personal development and enterprise for young people is very good and young people benefit from a wide range of appropriate opportunities.

80. Participation rates in education and training post-16 are improving and levels of young people not in education, employment and training is low and reducing, although they remain high in a few parts of the most disadvantaged areas. There has been a significant improvement in 'tracking' of young people not in education, employment or training over the last three years. The council recognises that the proportion of teenage parents in employment, education or training is low and needs to improve. There is a rising number of young people in employment without training and partners also have concerns over the high drop out rate of 17 year olds, although too little analysis has been carried out in this area.

81. The strategy to improve 14-19 education and training is well considered and is now being updated. Partnership and collaboration across 14-19 education and training is improving, especially within the four geographically-focused school consortia. However partnership effectiveness varies. For example, one consortium has joint timetabling, transport, administration, assessment and review arrangements post-16, and is planning 14-16 curriculum developments, whereas, in another, partners have only recently committed to having common timetables. Partners are addressing the need to work more consistently across the city. There is currently no coherent mechanism to develop the whole curriculum offer across Plymouth, and performance management of post-16 provision in schools needs further development. Some data is not robust enough to accurately measure performance and data sharing and analysis is insufficient. This is recognised and action is now being taken to address these weaknesses. The 14-19 electronic prospectus and application procedure is due to be in place by September 2007 and much store is placed on this being the catalyst to better partnership work across the city. Some good collaboration has started through the development of the new diploma lines, which is being enhanced through the appointment of five new posts to champion diploma development.

82. Work-based learning provision and entry to employment programmes are good and improving, with achievement levels now above the national average. The Tamar Valley Consortium provides effective links between schools and work based providers and the development of the vocational curriculum is good. However achievement at GCE/VCE is not increasing in line with either statistical neighbours or national rates and this, and attainment at level 2 and 3 at age 19 are now lower than average. The proportion of young people progressing to higher education is increasing. However, aspirations among some groups of young people are still too low.

83. There has been good involvement of communities and young people in local community regeneration and the city regeneration programme is coherent and inclusive. A new economic strategy is to be published imminently. The

areas of most need have been suitably targeted within the overall city growth plan. Employer involvement is good and some appropriate links have been established between development initiatives and education. Good analysis of potential employment sectors has led to targeted skills development for young people to sustain growth in the longer term. Local regeneration is starting to raise local aspiration. Employer involvement is good and some appropriate links have been established between development initiatives and education.

84. Housing in the city has been identified as a cause for concern, particularly social housing which impacts on young people. There has been a reduction in length of stay in bed and breakfast accommodation for families and children, which is now better than the national average. Homelessness for families and young people is decreasing. However, a significant proportion of council homes do not meet the decent homes standard and the 2010 target is unlikely to be achieved.

85. Improved communication between social workers, Connexions and other agencies has led to good transition planning for looked after children. Development of independent living skills and the personal development of this group are also good. The rate of care leavers at age 19 staying in employment education and training is good and significantly above the national average. Improved communication between agencies has led to improved transition planning for looked after children and better access to suitable accommodation for care leavers. The percentage of care leavers living in suitable accommodation in 2005-06 matched the national average, having been below in previous years. However there is still not enough suitable accommodation for 16 and 17 year olds who have offended.

86. Provision of educational opportunities for young people post-16 with learning difficulties and/or disabilities is inadequate. Significant revision is required, in order to improve the range, level and thresholds of services. This is recognised as a priority in the Children and Young Peoples' Plan. Schools rate the effectiveness of planning of provision, support, information, progress monitoring and timely intervention for young people with learning difficulties and/or disabilities as poor and the transition planning process is not well informed by all partners. However, this issue is being addressed through a multi-agency working group which was set up in July 2006.

### **Service management**

**87. The management of services for children and young people is adequate. The capacity to improve further is also adequate.**

88. The level of ambition in Plymouth is good. All political parties and key partners share a common vision for improving the well-being of their children and young people. Partners at a strategic level work well together, with a shared appreciation that significant change can only be achieved through strong partnership working. The executive group of the Children's and Young People's Strategic Partnership is a powerful driver for change and delivery of

the Children's Trust. A further significant driver is the tangible enthusiasm and understanding by all stakeholders that improving children's services is one of three top priorities for the council. Councillors have shown their commitment by taking politically difficult decisions such as reducing the scope of the major schools Private Finance Initiative in order to make it affordable.

89. The Local Strategic Partnership (LSP) in Plymouth is now improving rapidly. Its four community strategy themes have already become firmly embedded, and service plans demonstrate how each service contributes to these themes, thereby ensuring that efforts are consistently focused. The Children and Young Peoples Plan (CYPP) brings the themes together and sets out a clear vision for the future. Targets, timelines, and accountabilities are set out against which success can be measured. Currently these are clearer for council responsibilities, but theme groups are in the process of establishing how partners will be accountable for their input. Resource requirements are sufficiently detailed to enable councillors to judge the affordability of the plan. Most targets are sufficiently stretching, and some are incorporated into the new local area agreement, on which theme groups will focus. Partners' commitment, and the council's stabilising budgetary position, provide promising indications of realistic ambition.

90. Weaknesses in strategy are acknowledged by the partners, and are being addressed. For example, although there is a great deal of leisure and cultural activity taking place in Plymouth, it is difficult to target efforts due to the absence of a leisure and culture strategy. The comprehensive audit of need provides the partners with a good platform for targeting their efforts. Partners have been effective in their efforts to consult with the community, including some difficult to reach groups, in shaping the vision for the future.

91. Prioritisation within the local area overall is adequate and improving. Children's services are funded significantly higher than guidelines and similar councils, although this has not brought success. However, the education service has been successful with funding well below such guidelines. Improvement in children's social care is now one of the council's three top priorities.

92. The CYPP sets out key priorities, with a small number of other 'areas of focus'. These have been shaped by partners to help 'narrow the gaps' between the most and least affluent areas of Plymouth. Service plans are produced to a consistent format, capture what needs to be done and by whom, and adhere well to the council's strict financial control measures. The floor target action plans are particularly well crafted.

93. Prioritisation within education services is good, with a clear, agreed shift of resources to school level overall, and specifically for children with special needs where appropriate. Importantly there are no signs that the necessary focus on improving social care has resulted in any slippage in the performance of education services, as these continue to deliver continuously good improvements in outcomes for children. However, central capacity in education

is limited and has, understandably, been focused on mainstream issues. As a result, there has been insufficient focus on improving some developmental areas such as the youth service, integrated service delivery and on delivering the equalities and diversity agenda.

94. Setting priorities in children's social care has, of necessity, been reactive, primarily to shortcomings identified by regulators. There is now a growing understanding and confidence, supported by the work of a strategic partner, of what needs to be done to build on the improvements already achieved. The experience of securing improvements in service delivery, with significant cuts in expenditure, is proving to be a very positive driver for improvement.

95. Although partners are fully committed to the CYPP, their accountabilities for the detailed delivery are less clear. Theme groups are addressing this. While health services are signed up to the agenda, their competing priorities at local and national levels limit the role they can play.

96. The local area's capacity to deliver its agenda is adequate. The CYPSP is established, and has already reviewed its board membership. This is now sufficiently strategic and on track to achieve children's trust arrangements by 2008.

97. The recently appointed Director of Children's Services, the council Chief Executive, Lead Member and Cabinet member have good working relationships and their leadership is both effective and acknowledged by stakeholders. Representatives from partner organisations are also suitably high profile and well regarded. Staff at all levels are fully aware of the safeguarding priorities, and show enthusiasm and confidence in the recent improvements. Sickness and vacancy rates are still too high, but these are being tackled effectively through comprehensive recruitment, retention and absence monitoring processes.

98. Capacity and improvement in social care is currently enhanced by a significant number of experienced managers brought in by the strategic partner, at no cost to the council. The managers have become quickly established, and their work to mentor, alongside their specific management roles, is showing signs of promoting sustainability. The partnership is strictly time limited, and action is being taken to build some posts into the permanent structure of the council. This is securely built into the financial projections within a sound medium term financial plan.

99. Corporate strategies in human resources, procurement, training, workforce development, transformational change, asset management and information and communications technology are at various stages of effectiveness in matching capacity to need. Pooling of budgets, joint commissioning and integrated service delivery, particularly with the health and voluntary sectors are relatively underdeveloped, but encouraging signs of improvement were seen during the neighbourhood study.

100. As reported elsewhere, projections suggest that the council will have sufficient resources to deliver its programme, although the ability of the health service to do so is less clear at this stage. Within children's services, budget monitoring, reporting and control is now good. Value for money is variable but improving, and mechanisms for ensuring value for money are not yet well embedded.

101. Performance management systems are adequate. The corporate system is becoming embedded across the council, but its effectiveness is variable, as demonstrated by the historically wide range in outcomes. Within children's services there is now a clear determination, supported by managers and councillors, to rigorously apply the system, and to use the available good quality data to better effect. Councillors are becoming more focussed on use of performance data, and scrutiny mechanisms are improving, although the level of challenge is still under-developed. Reporting is clear and consistent, but tends towards demonstrating improvements rather than actual performance, particularly in key areas. However, the performance management and monitoring process for the strategic partner identifies key issues very well. There has also been an over-emphasis on national numerical indicators, although local indicators and some measurements of quality are now being developed, for example around auditing case files. The tPCT has invested in information systems which link with the council, and negotiations about the detail are advanced. Theme groups are less advanced in knowing their data requirements, although these are emerging as the details of the LAA become clear.

102. Increasingly effective performance management is evident in the continuing improvements in priority areas. After a third inadequate inspection verdict in 2005, an important priority is to have adequate systems in place to keep children safe. There are signs that the CYPSP is benefiting from improved performance management, although there is still some way to go. However, the accurate self assessment suggests partners are very clear about what needs to be done.

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

1. Outcomes for children and young people are adequate. The Council and its partners have set out an ambitious, shared vision and strategy for improving outcomes for children and young people. Children and young people have consistently been prioritised by the Council, with significant financial investment above government guidelines. Council services for children and young people merged in 2005, and more vigorous strategic partnership with other agencies is becoming more effective. Trust arrangements are on track to be in place by 2008.
2. The Council and its partners are beginning to work together to address significant health inequalities and deprivation. The National Healthy School programme is developing and effective. Looked after children's health needs are addressed well, although the percentage of annual health assessments which have been completed have reduced in the last year. Children with learning difficulties and/or disabilities who attend mainstream schools have long waits for therapies, and equipment.
3. Significant concerns regarding safeguarding were identified in CSCI's children's services inspections in 2003, 2004 and 2005. A contract with a Strategic Partner identifies clear targets for working with the Director of Children's Services to develop quality children's social care services. The arrival of the Strategic Partner in May 2006 is enabling good progress across the range of children's services.
4. The work to safeguard children is now adequate. Child protection processes are appropriate, but numbers of referrals for family support have increased, leading to poor completion of assessments within timescales. Work to further embed the Child Concern Model, and review thresholds for intervention by agencies other than social care is required in order to sustain the improvement already achieved. Services for looked after children and care leavers give good support. Some work with children with complex needs is of good quality but lacks a multi-disciplinary approach.
5. Most children and young people enjoy their education and attend school regularly. Attainment is improving at all key stages, the gap in attainment between the most and least deprived areas narrowing. There are good initiatives to improve behaviour and attendance and for reducing exclusions. Looked after children are supported well, and achieve better than similar groups nationally. There is a well conceived strategy for identifying learning difficulties early and promoting inclusion. Children with diagnosed medical conditions are well supported but support is more variable for children with behavioural or emotional problems. Provision for children who are unable to attend school is of variable quality. There is an adequate range of sport and recreational opportunities but a lack of suitable play facilities for children with disabilities.



6. There is effective work to enable children and young people to develop socially and emotionally. Children and young people are receiving much good support in managing change and challenges in their lives. Numbers of young people entering the youth justice system and numbers of school exclusions have reduced. However, opportunities for children and young people to give their views are not sufficiently widespread and are not yet making sufficient difference to decision-making. Whilst there is some good practice in youth services provided directly by the council, the overall service is inadequate. Most looked after children contribute to their reviews, although the council is seeking to improve this, especially for children aged 4 to 8 years. There is a good advocacy service. There is some good support for children and young people with learning difficulties and/or disabilities to make a positive contribution, and this is a stated priority for improvement. Respite and extended care services for the families of disabled children and young people, and arrangements to support young carers are insufficient.

7. The Council's work in helping children and young people achieve economic well-being is adequate. Partners provide good support to children and young people in continuing in education and training. The provision of work experience, personal development and enterprise for young people is very good. The levels of young people not in education, employment and training are reducing, although remain high in some of the most disadvantaged areas. The 14-19 strategy is well considered and is being updated. Partnership and collaboration across 14-19 provision is improving. However, mechanisms to develop the curriculum across Plymouth are currently ineffective and performance management in schools across post-16 provision is inadequate. Sharing and analysis of data is insufficient. Work based learning and entry to employment are good. Local communities, including young people, are appropriately involved in regeneration.