

Joint area review

Nottingham Children's Services Authority Area

Review of services for children and young people

Adult Learning Inspectorate
Audit Commission
Commission for Social Care Inspection
Healthcare Commission
HM Crown Prosecution Service Inspectorate
HM Inspectorate of Constabulary
HM Inspectorate of Court Administration
HM Inspectorate of Prisons
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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), 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 Nottingham City area and evaluates the way local services, taken together, contribute to their well-being. Joint area reviews focus on the extent to which children and young people are healthy, safe, enjoy and achieve, make a positive contribution, and are well prepared to secure economic well-being.

4. The review evaluates the collective contribution made to each outcome for children and young people by relevant services in the area. It also judges the contributions made by the council's services overall and, specifically, its education and children's social care services. Particular attention is given to joint action by local services on behalf of those groups of children and young people who are vulnerable to poor outcomes. Two such groups are covered in detail: children and young people who are looked after by the council, and children and young people with learning difficulties and/or disabilities.

5. The review took place in two stages consisting in total of three weeks over a six-week period. The first stage reviewed all existing evidence including:

- self-assessment undertaken by local public service providers
- a survey of children and young people
- performance data
- the findings of the contemporaneous inspection of the Youth Offending Team (YOT)
- planning documents
- information from the inspection of local settings, such as schools and day care provision
- 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 the neighbourhood of Broxtowe and Bells Lane. It also included

gathering evidence on 10 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. Nottingham City is situated in the East Midlands. The council is a unitary authority, covering 75 square miles of urban conurbation with no suburban areas. It has a population of 278,700, with a higher than average proportion of young people. Over a quarter of the population are aged under 20. There is a high student population, primarily due to the two universities.

8. Nottingham is a city of contrast. In terms of gross domestic product it is the third richest city, yet it is ranked as the seventh most deprived district (2004 Index of Multiple Deprivation) in England. The average earnings of people living in the city are well below regional and national averages. At 20.4%, the proportion of the adult population in receipt of benefits, including disability benefit, is well above the national figure. Concentrations of deprivation, social exclusion, low skill levels, high unemployment, poor housing and poor environment continue to exist alongside the relative prosperity of the towns beyond the city boundaries.

9. The local council and its partners now have a clear programme to deliver economic and social regeneration. The recently reshaped Strategic Partnership for Children, Young People and Families has strategic responsibility for developing and leading Nottingham's response to the Every Child Matters agenda. A clear Children and Young People's Plan informs on-going improvements to outcomes for children and young people. The integration of developments for children within other key plans, such as the Local Strategic Partnership (One Nottingham) Plan, and the involvement of the voluntary and community sector are underpinning improvements. Three multi-agency working groups champion developments and outcomes for Black and minority ethnic groups, children who are looked after by the authority and those with learning difficulties and/or disability.

10. The number of pupils in the city is falling, with a further 5% reduction predicted by 2010. 30% of the school population are from Black and minority ethnic groups, with a significant and growing number of children with dual heritage. The proportion of children and young people entitled to free school meals is well above the national average, reflecting the overall level of deprivation in the city. Of children aged two to 19, 22.8% have identified learning difficulties and/or disabilities compared to 18.3% nationally.

11. Nottingham City Primary Care Trust (PCT) has the responsibility for primary care and community health services. Representation from the PCT is strong at every level in the Strategic Partnership for Children, Young People and Families, with an executive director from the PCT as chair of the Be-Healthy sub-partnership. Well-established partnerships provide a range of community-based, multi-agency services. Nottingham University Hospitals NHS Trust is the main provider of acute health services. Services are based at the Queen's Medical Centre, where there is a dedicated children's accident and emergency department, and at the City Hospital. Specialist Child and Adolescent Mental Health Services (CAMHS) are provided by Nottinghamshire Healthcare NHS Trust. The East Midlands Ambulance Service NHS Trust provides the ambulance service. The trusts providing health services for the children of Nottingham fall within the East Midlands Strategic Health Authority.

12. Nottingham comes under the jurisdiction of the Nottinghamshire police service. There is a growing programme of neighbourhood community policing. There are no young offender institutions in the area. Local services include a YOT and youth service.

13. Nottingham's children, young people and families service includes a range of multi-agency teams that provide local support targeted in areas of identified need, and locality based social work teams for assessment, child protection and children who are looked after. City-wide services include the fostering and adoption service and services for children leaving care and those with disabilities. Referrals to social care services are received by the three duty and assessment teams. At the time of the inspection, 474 children and young people were looked after by the local authority; of these 91 were placed in agency foster care and 65 in residential placements. Some 211 of them were placed outside the borough. There were 322 children and young people on the child protection register.

14. The city maintains 93 primary schools, 18 secondary schools, six special schools and four pupil referral units. Of the 18 secondary schools, there is one academy and nine have specialist status. A comprehensive building agenda, through the Building Schools for the Future programme and private finance initiatives, is designed to increase the number of academies to four and to transform the learning environment and educational experience for children and young people across the city.

15. Nottinghamshire Learning and Skills Council (LSC) works in partnership with the local authority, colleges, training providers, schools and the community and voluntary sector in addressing the 14–19 strategy. The Connexions service is a key player within the partnership. Post-16 education and training is provided by three further education colleges, one sixth-form college, four school sixth forms and a range of work-based learning providers. Entry to Employment is delivered by a range of learning providers including the local authority. Adult and Community Learning is managed and delivered through a

partnership between the three further education colleges. The local authority manages local family learning provision.

16. The contexts in which children and young people live and learn are amongst the most deprived in England. 51% of the school population live in the 10% most deprived wards in England. To promote responsive, flexible provision, Nottingham City is promoting the development of nine neighbourhood areas. There are nine fully functioning children's centres providing co-located multi-agency teams. Three Multi-Agency Locality Teams provide for children's emotional needs. Educational Improvement Partnerships provide multi-disciplinary support such as involving parents in improving attitudes to learning. As a core city, Nottingham City Council and its partners are striving to promote regeneration in line with regional and international standards, and in so doing promote the aspirations of young people through enhanced educational and recreational opportunities, including foreign exchanges and cultural activity.

Summary Report

Outcomes for children and young people

17. **Outcomes for children and young people in Nottingham are adequate.** They are improving in many areas.

18. Children and young people are generally healthy. Indicators for health are in line with national figures except for the high numbers of teenage pregnancies and the proportion of eleven year olds who are overweight. Breastfeeding rates are similar to the national average and the rate of smoking during pregnancy has reduced and is now in line with similar areas. More young children have child development checks than is found nationally, ensuring any health needs are identified early. The health needs of children who are looked after are met well, with the level of health assessments and dental checks in 2006 above national averages. Immunisation rates are in line with national figures and very few children suffer from childhood illnesses such as measles. Infant mortality and deaths for children under 15 continue to be above England figures, but are reducing rapidly. The availability of treatment for young people with substance abuse problems and mental health needs compares favourably with regional and national figures.

19. Children in Nottingham appear to be safe. Road traffic casualties, although high, have shown a 52% drop over the last five years. Most children report that they feel safe in their school and community, although a few, including those with learning difficulties and /or disabilities, say they feel less safe in their local community. Children at risk of harm are identified and actions are taken to ensure their safety and improve their circumstances, although for some children this improvement is not sustained in the longer term.

20. Education outcomes in national tests are too low to ensure improved life chances and future opportunities. However, improvements are being sustained over time and the gap with national figures is closing. Performance results at Key Stage 2 in 2006 illustrated significant improvement and among some of the greatest gains in the country, for example an increase of 7% of children reaching the expected Level 4 in writing. The progress young people make from Key Stage 3 to GCSE is in line with national averages. In 2006, 45% of young people achieved five or more A*–C grades at GCSE (compared with 58.1% nationally), a rise of 2.9% from 2005, with some groups, especially Black African Caribbean boys, achieving better grades as a direct result of effective intervention. More gifted and talented children and young people of all ages are attaining the higher levels in national tests and GCSEs each year.

Underperforming white boys and boys from Pakistani communities are making good progress following targeted support. Children appear to enjoy school; behaviour is good and attendance is improving. Key Stage 4 pupils excluded from school do well in alternative provision and their attendance improves. African Caribbean boys permanently excluded from school successfully re-engage with learning through individually designed accredited educational programmes. Children with learning disabilities and/or difficulties make good progress but the attainment levels of children who are looked after at age 16 are poor.

21. The numbers of young people continuing in education, training or employment post-16 has increased steadily and is now similar to elsewhere. Outcomes for young people in post-16 education or training are broadly similar to national figures. The proportion of 19 year olds who acquire the expected Level 2 qualifications is increasing, but remains below the national average. Increasingly, children and young people are participating in decision making about their own lives and the development of local services. Some have been involved in influencing appointments and the shape of services. The majority of children and young people report feeling involved in and well supported by their local communities. Outcomes for some young people are adversely affected by their involvement in anti-social behaviour and offending. Although the numbers involved are above national averages, their involvement in positive activities is reducing offending rates. A relatively low proportion of young people who have offended are in education, training or employment.

The impact of local services

22. **The impact of local services in improving outcomes for children and young people is adequate.** The capacity to improve further is good. The council has a good understanding of its difficult context, which is defined by tight geographical boundaries and high levels of deprivation. The area is overwhelmingly urban in character and has no very close statistical neighbours against which the impact of services on outcomes for children can be accurately compared. Within a context of high social deprivation, the city has a legacy of underperformance and very low educational attainment. Integrated services for children are developing well to meet Nottingham City's specific circumstances

and in line with the Every Child Matters agenda. The impact of all local services is reflected in improved outcomes in many areas.

23. All partners, including health services and voluntary groups, have a clear understanding of both what needs to be done and their contribution to improving the life chances of children and young people in Nottingham. The capacity to tackle weaknesses robustly and speedily is evidenced in the rapid improvement to aspects of children's social care identified as unsatisfactory in 2006. The capacity to improve further is illustrated by many innovative developments, such as the roll out of the successful children's centre programme, the Building Schools for the Future programme, the Educational Improvement Partnerships and Multi-Agency Locality Teams, all designed to address the impact of social deprivation whilst raising aspiration and achievement.

Being healthy

24. **The impact of all local services in securing the health of children and young people is adequate.** Multi-agency services provided through local children's centres in the most deprived areas of the city offer good health support to young children and their parents or carers. Schools provide a wide range of health education and good progress is being made to encourage healthy eating and exercise. There is good engagement with schools in developing cessation policies for drug-taking and smoking and in delivering health education programmes. Local services have successfully piloted a nutrition and exercise programme for children who are obese; this is to be extended across the city. Local services have been less effective in tackling the issue of under-age drinking and the purchase of alcohol. Sexual health services, which are available in a wide variety of settings, provide adequate access for young people. Where school nurses and schools work together in delivering sex and relationship education and provide sexual health services, provision is effective. However, not all schools are willing to host these services which is impeding progress in meeting the teenage pregnancy target. A good multi-agency strategy introduced in 2006 is targeting the very high teenage pregnancy rates in the hot-spot areas of the city. Significant reduction in teenage pregnancy is a long-term strategy, closely linked to regeneration and raising the aspirations of young girls. However, there are early signs of impact, with a slight fall in teenage conceptions.

25. The Oral Health Promotion Team effectively targets children with poor oral health but this has not yet had an impact on the dental health of five year olds. CAMHS are generally good, with comprehensive specialist services and accessible local multi-agency teams working well with schools and families. The location of specialist CAMHS makes access difficult for some families. The health care provision for children who are looked after is good. A comprehensive range of services, including respite care, is provided to support children and young people with learning difficulties and /or disabilities. Care is well coordinated and delivered by specialist teams working with children and

young people both with physical disabilities and mental health needs. Access to sexual health services for young people at risk of or involved in crime is good.

Staying safe

26. **The impact of all local services in keeping children and young people safe is adequate.** Effective strategies are reducing the incidence of road casualties, avoidable injury and infant mortality. Action taken to prevent bullying in schools has had a demonstrable impact on occurrences of bullying and racist incidents. Social care services are now adequate, with a good strategy in place for further improvement. Key weaknesses identified in the annual performance assessment in 2006 have been addressed: inspection reports demonstrate that all residential homes meet minimum standards, and timescales for completing initial assessments and core assessments have improved and are now good.

27. Agencies work well together and, increasingly, services are being provided locally. Early intervention and preventative actions improve children's welfare within their families. There is, however, insufficient support for families with teenagers who are in crisis. Children affected by domestic violence are identified and protected adequately, although not all cases receive an appropriate and timely response. Systems within social care duty teams are in the main satisfactory; children who are clearly at risk of harm are identified and appropriate action is taken to ensure their safety. Stringent criteria for accessing social care intervention can result in action being taken too late to be effective in the longer term. Insufficient use is made of children in need assessments when identifying support for families and too many children enter the child protection system as a means of accessing an appropriate level of support. Child protection procedures and practice are secure, although for some children decisive action is not taken soon enough and outcomes of child protection investigations are not consistently recorded and monitored. Robust multi-agency processes have been established to ensure the whereabouts of children missing from education and from care.

28. The Local Safeguarding Children Board (LSCB) is well established and carries out its role effectively but has given insufficient focus to children at risk of domestic violence. The development of multi-agency quality assurance processes is at an early stage.

Enjoying and achieving

29. **The impact of all local services in helping children and young people enjoy their education and recreation and to achieve well is adequate overall.** There are significant strengths across services and innovative developments are beginning to show improved education outcomes for many groups. The early year's partnership is highly effective, with a variety of good strategies now being implemented to improve outcomes for young children in the early stages of their development. Children's centres provide a good focus for multi-agency approaches to child care and provision is well

matched to needs. Partnership working between schools and the local authority is increasingly effective. School improvement initiatives have provided significant challenge and have been effective in targeting provision for those schools which are underperforming. Attainment across all key stages is well below both statistical and national levels but early intervention programmes have contributed to consistent and largely sustained improvement over the last five years. Evaluation is robust and high quality data are used effectively to track pupil progress and inform planning.

30. Commitment to social inclusion is well demonstrated and strategies appropriately address the needs of the most vulnerable groups. Children with learning difficulties and/or disabilities receive good support and usually do well. Children who are looked after attend well but educational support for them is inadequate. Educational provision in nearly all schools is at least satisfactory or better, although more work is required to ensure the consistently high leadership, management and teaching needed to address low standards.

31. Schools receive good support from the local authority to address behavioural issues and attendance. Partnership working, involving the education welfare service, neighbourhood services, housing and police, and targeted at hot-spot areas have had a positive impact on attendance, with a five-year improvement in both primary and secondary schools. Permanent exclusions have remained static at just above national figures. The use of fixed-term exclusions continues to be high. Provision for children excluded from school is generally good, although some involved with the Youth Offending Team (YOT) do not receive their full education entitlement. School reorganisation through the Building Schools for the Future programme is ambitious and well supported by schools across the city. Opportunities for play and recreation for early years and the 8 to 14 age group are varied and good. Involvement by 14 to 19 year olds in organised leisure activities is low.

Making a positive contribution

32. **The impact of all local services in helping children and young people contribute to society is adequate.** Services work together well in local communities to support the social and emotional development of most children and young people. Intervention programmes that focus on aspects of play and relationships are particularly effective. Transition from one phase of education to another is managed well. Services helping hard to reach groups respond to challenges in their lives are good. Academic mentors for Black pupils and children who are looked after have proved successful at key transition points and in improving academic performance. However, there is insufficient access to bereavement counselling services and some young carers experience a long wait for services.

33. Arrangements to involve children and young people, including those with learning difficulties and/or disabilities, in consultation and decision making are good. Their views are beginning to influence the shape of some services. Good

advocacy services support children and young people's participation in child protection conferences; however, not all children who are looked after are aware of the children's rights service or the city-wide forum for expressing their views.

34. A higher proportion of children and young people are involved in anti-social behaviour and crime than found elsewhere. Multi-agency work to target and provide positive activities and support for children and young people in local trouble spots is having a positive impact on their behaviour and a reduction in re-offending rates. Agencies, including the YOT, police and voluntary organisations, work effectively to identify children and young people at risk. Local action, including the work of the youth service and YOT, provides a range of opportunities offering young people positive choices. Increasingly, children and young people are choosing to engage in these positive activities and, against national trends, there has been a significant reduction in first time entrants to the youth justice system. Areas such as Broxtowe and Bilborough report a 22% reduction in crime and a 25% reduction in anti-social behaviour since April 2005. The approach is being rolled out across the city. Despite positive, targeted interventions from the YOT, the number of looked after children who are involved in crime is high.

Achieving economic well-being

35. **The impact of all local services in helping children and young people achieve economic well-being is adequate.** Families benefit from a good range of services and activities to help them improve their economic well-being. Good progress has been made in developing 14–19 provision in the city. Effective partnership working is contributing to an appropriate range of vocational courses and coherent progression routes, encouraging more young people to participate in education and training and improve their qualifications. There are some gaps in the range of foundation level provision in the city, such as the availability of pre-Entry to Employment programmes.

36. Recent alignment of regeneration plans with the Children and Young People's Plan appropriately increases the focus of activities on improving services and increasing choices for young people. These changes have not as yet had a significant impact on the economic well-being of children and young people. However, priority is given in local strategic plans to raising the aspirations for young people and there are clear plans to prioritise 14–19 achievement for those likely to become disengaged from school and/or not in education, training or employment. The Entry to Employment programme, offered in areas of greatest deprivation, offers a strong emphasis on accrediting skills and developing employability skills, including accreditation for literacy and numeracy, leading to good progression into further education or employment.

37. The corporate approach to providing opportunities for work experience and post-16 apprenticeships through the 'local jobs for local people' initiative is proving effective, especially for young people who are looked after and those

with learning difficulties and/or disabilities. Good inter-agency planning ensures that a high proportion of children and young people with learning difficulties and/or disabilities enter education, training or employment on leaving school. The multi-agency Transition Team is improving further transition planning for young people with learning difficulties and/or disabilities to ensure the effective transfer to adult services.

38. The council prioritises accommodation for families and is working to improve the quality of the housing stock. However, a high proportion of homes within the city do not meet the national decency standard. Young people leaving care generally feel well supported by the Leaving Care Team and all care leavers are provided with suitable accommodation.

Service management

39. **The management of services for children and young people is adequate across the local area.** The self-assessment produced by partners provides a realistic and accurate evaluation of Nottingham's services. The council's 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, which is based on a thorough audit of need. The Children and Young People's Plan is underpinned by increasingly robust service plans, which are focused on delivery. Plans to transform secondary and special education using the Building Schools for the Future programme are far-sighted.

40. Children and young people have been consistently prioritised by the council, with significant financial investment above government guidelines over several years. Council services for children and young people merged later than most, but the now vigorous strategic partnership with other agencies is becoming more effective. The Director of Children's Services, Council Leader and Cabinet Member for children and young people provide powerful, trusted leadership, ensuring the continued drive for improvement.

41. Current capacity is adequate. Capacity to improve is good, as illustrated by improved strategic planning at corporate level, effective partnership working, sustained improvements to educational achievement, innovative local multi-agency working reflecting the assessed needs of local communities, and rapid improvements to identified weaknesses in children's social care. Good budget monitoring and control in the council provides a solid basis for realising ambitions. Value for money overall is adequate, as are procedures for consistently assuring this. There is some budget pooling and alignment, and although the commissioning strategy is underdeveloped overall, its effectiveness is beginning to be felt, particularly for services provided by the voluntary sector. There is significant investment in securing the building blocks to maximise the impact of current capacity. The key challenge for Nottingham is to translate this into improved outcomes for children.

42. A performance management framework is in place across children's services and it is increasingly demonstrating effectiveness, although further improvement is required in quality assurance of children's social care. Managers and councillors are using performance data more consistently and this ethos is permeating throughout the organisation. Scrutiny is effective and improving.

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	2		
Making a positive contribution	2		
Achieving economic well-being	2		
Service management	2		
Capacity to improve	3	3	
Children's services		2	
The education service		2	
The social care services for children		2	
The health service for children			2

Recommendations

For immediate action

The council and its partners should:

- ensure that children in need and their families have improved access to services without the need to enter the child protection system
- ensure there is a full record of the planning and implementation of child protection investigations to enable managers to track progress and outcomes.

For action over the next six month

The council and its partners should:

- improve the range of quality assurance activity in social care and increase the focus on standard setting, assessment, decision making and outcomes for children
- ensure that incidences of domestic violence involving children and young people receive an appropriate and timely response from all agencies; the LSCB should develop a robust system of multi-agency quality assurance and ensure a strategic overview of work to protect children at risk due to domestic violence
- increase the provision of specialist CAMHS in community facilities to improve access for families
- maintain the focus of improving educational attainment and promoting economic well-being and ensure challenging, measurable and explicit performance targets and actions to improve the attainment of all groups, including white boys and Pakistani boys and those who are looked after by the council
- increase participation in education, employment or training by young people who have offended
- ensure services for young carers are sufficient and sustained to meet the needs of all children and young people across the city.

For action in the longer term

The council and its partners should:

- address the high rates of teenage pregnancy by consistently promoting sex and relationship education of a high quality across all schools

- target health promotion activities to reduce the number of young people who are overweight
- improve availability of appropriate leisure and recreation provision for those young people aged 14 and above.

Main Report

Outcomes for children and young people

43. **Outcomes for children and young people in Nottingham are adequate.** They are improving in many areas. Despite significantly high levels of deprivation, many important indicators of young people's health and well-being are in line with national figures. Weaknesses in social care have been addressed. Educational attainment in national tests is well below average at all ages but when contextual data, including social deprivation and high numbers of children with learning difficulties, are considered, progress and achievement are adequate.

44. **Children and young people are generally healthy.** Most indicators for health are in line with or better than national averages except those for teenage pregnancy and the proportion of eleven year olds who are obese. At 23% the rate is above national averages. Babies are getting a better start in life; breastfeeding rates, at 65%, are similar to the national average, the level of smoking during pregnancy has reduced from 27.85% to 19% and is now in line with similar areas, and the percentage of babies with low birth weight has been falling and is now comparable to the national average. Infant mortality and deaths for children under 15 continue to be above England figures but are reducing rapidly and are now comparable to that of similar areas. Significantly more young children have child development checks than is found nationally, ensuring health needs are identified early.

45. Immunisation rates are in line with national figures and the proportion of children suffering from childhood illnesses such as measles is much lower than in similar authorities. The availability of treatment for young people with substance abuse problems and mental health needs compares favourably with regional and national figures. Teenage pregnancy rates are significantly higher than the England average but are beginning to fall at a faster rate than similar areas. The number of young people diagnosed with sexually transmitted diseases is rising, although this remains similar to national trends.

46. Almost all young people surveyed for this review felt healthy. They develop a good knowledge and understanding of what they have to do to adopt healthy lifestyles, especially in primary schools. They understand about the importance of exercise and physical health and most have two hours per week of physical education or sport at school. Holistic approaches to anti-social behaviour are offering vulnerable young people constructive opportunities that keep them from drinking and substance abuse. The health care for children

who are looked after has improved significantly and is now good, with almost all having annual medical assessments and dental checks.

47. **Children in Nottingham appear to be safe.** There has been a rapid and sustained reduction in the number of children killed or seriously injured on the roads in recent years. Children generally feel safe in school but some, including those with learning difficulties and/or disabilities do not feel safe in their community, particularly where levels of crime are high. Safe recruitment practices are established and contribute to protecting children from adults who pose a risk to them.

48. Outcomes for children at risk of harm are adequate, and effective multi-agency procedures and actions ensure the safety of those most at risk. There is a high level of child protection work, including child protection conferences. Child protection registrations are high. Relatively high levels of re-referrals and re-registrations indicate that improvements in children's safety following intervention are not always sustained. Whilst the vast majority of children on the child protection register are allocated to a suitably qualified social worker, in a small number of cases there have been delays in allocation. However, appropriate action is taken to ensure these children are safe.

49. Children and young people who are looked after do not always have a good choice of where they live due to a lack of a good range of foster carers to meet their needs. For some, their long-term stability is affected by having too many moves between placements. A good proportion of looked after children are adopted and the majority do not have to wait too long before being placed with adoptive parents. Effective inter-agency arrangements are in place to safeguard children with learning disabilities and/or disabilities. Young people leaving care are safeguarded well and generally live in safe environments.

50. **Children and young people achieve adequately.** In absolute terms, educational outcomes are inadequate. Attainment in national tests at each key stage is well below national averages and similar areas. However, when results are considered in the context of relative deprivation and high levels of assessed special educational needs, the rate of progress and achievement young people make in the secondary phase is better than average. The very low starting point with which children enter education contribute significantly to the low attainment levels in the primary phase, but data indicate an encouraging trend of steady and sustained progress over recent years. The youngest children make good progress. In the 2006 national tests, the rates of improvement in results across subjects and key stages were amongst the highest in the country. Good progress is being made between Key Stage 1 and 2, a considerable achievement given the poor communication, literacy and language skills of early years children. Inadequate progress is made between Key Stage 2 and Key Stage 3; however, progress between Key Stage 3 and 4 compares favourably with national rates. In 2006, 45% of young people achieved five or more A*–C grades at GCSE, with 27.9% of those achieving five or more A*–Cs at Key Stage 4 including English and mathematics, a rise of 2.9% from 2005, with

some groups, especially Black African Caribbean boys, achieving better grades as a direct result of effective intervention. Attainment results differ markedly by ethnic group and gender. Currently, it is white boys and boys from Pakistani communities who do less well than their peers. Outcomes for gifted and talented children are improving, with the proportion gaining the higher levels in Key Stage 2 and 3 tests increasing year on year. At GCSE, outcomes for talented young people have improved in terms of A*–C grades in subjects such as dance, Spanish and art.

51. Children and young people appear to enjoy school and attendance has improved overall, although unauthorised absence figures remain higher than those of similar areas and nationally. Behaviour is generally good. Permanent exclusions, although still above national and similar areas, have not increased for three years. The use of fixed-term exclusions is high. The attendance of children who are looked after is good but their attainment levels are poor. Children with learning difficulties and/or disabilities achieve well in special schools and mainstream provision. There are good opportunities for play, and recreational and cultural activities for children up to 14 years old but far fewer for older young people. Their level of involvement is generally low.

52. **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.** Most children and young people, including those who have learning difficulties and/or disabilities, have the necessary skills and confidence to comment on and influence issues that matter to them. Most school children have been actively involved in the democratic process leading to the appointment of school council and Youth Council members and some have been involved in consultation informing the development of services. Many children and young people enjoy these experiences and are growing in confidence as a result. Those supervised by the YOT have limited opportunities to express their views on how services could improve.

53. Children are prepared well for school through effective early years services and extended schools provision. Children and young people describe good services to support them in school, and before and after school. Relationships between children and young people and adults are a strong feature. Children and young people are generally satisfied with school responses to address bullying. Those from Black and minority ethnic groups are well represented on and engaged in forums that promote their participation. Provision for young carers is less effective as they experience a long waiting list for services and many do not feel sufficiently empowered to deal positively with challenges in their lives.

54. Poverty and deprivation impact negatively on outcomes for a number of children and young people from the poorest communities. Some children and young people's behaviours have resulted in experiences of high exclusion, poor school attendance and high rates of involvement in anti-social behaviour and

youth offending. The targeting of services and good multi-agency work is beginning to improve outcomes in, for example, reducing anti-social behaviour and young people's attitude to drinking on the streets. Children and young people are using activity-based programmes to make positive choices leading to changed behaviour. Recent data shows children and young people are experiencing improved school attendance and reduced rates of anti-social behaviour and offending. Local data indicates that anti-social behaviour has reduced by 20 cases per month since July 2005, with the number entering the criminal justice system for the first-time reducing by 33% from April to December 2006. Offending by young people who are looked after remains higher than found elsewhere. Levels of secure and custodial remands remain high.

55. Most children and young people who are looked after participate in their reviews. They enjoy sport and recreational facilities in the city and there has been an increase in the number of 16 to 19 year olds who leave care and gain employment. However, there are limited opportunities for care leavers to make a positive contribution as peer mentors. Involvement of children and young people with learning difficulties and/or disability in consultation is good. They consider that their views are listened to and acted on by adults, and participation at their reviews is good.

56. **Children and young people are able to achieve economic well-being and are prepared adequately for working life.** Attainment at Key Stage 4 has improved over the last three years and the proportion of young people who continue into further education, although still below the national average, is increasing. However, lower than average attainment levels at 16 reduce the potential of young people to achieve economic well-being. The overall participation rates in post-16 education, training or employment have increased steadily since April 2006 and are now broadly similar to the national averages. A high proportion of young people progress from Entry to Employment programmes into further education or employment.

57. Participation rates have also increased for most priority groups, including African Caribbean boys, care leavers and young people with learning difficulties and/or disabilities. The gap between these groups and their peers is small and closing. A relatively low proportion of young people who have offended are in education, training or employment. Attainment in post-16 education and training is broadly similar to that seen nationally. The proportion of 19 year olds who acquire Level 2 qualifications is increasing, but remains below the national average. Relatively few young people progress to higher education, although this number is increasing.

58. The number of children and young people dependent on workless benefits is well above the national average but declining slowly. The take up of the education maintenance allowance has increased and is now above the national average. No families with children are placed in bed and breakfast accommodation and the length of stay in hostels is similar to that seen

nationally. The proportion of children who are looked after involved in education, training or employment has increased and is now above the national average. All care leavers are provided with suitable accommodation. A good proportion of children and young people with learning difficulties and/or disabilities enter education, training or employment on leaving school.

The impact of local services

59. **The impact of local services in improving outcomes for children and young people is adequate.** The capacity to improve further is good. The council has a good understanding of its difficult context, which is defined by tight geographical boundaries and high levels of deprivation. The area is overwhelmingly urban in character and has no very close statistical neighbours against which the impact of services on outcomes for children can be accurately compared. Within a context of high social deprivation, the city has a legacy of underperformance and very low attainment. Integrated services for children are developing to reflect Nottingham City's specific circumstances and in line with the Every Child Matters agenda. Increasingly, the capacity to impact on the lives of children and young people is enhanced by the productive working relationships with local partners, including voluntary and community services. Improvements to strategic planning, service management and partnership working have been introduced to ensure sustainability of improvements and improved accountability. Good multi-agency services are now located in the most deprived communities, ensuring ease of access for service users. They have been developed in consultation with local communities and targeted to those most in need.

60. The impact of services is demonstrating improved outcomes in many areas of children and young people's lives. Many health outcomes are in line with national figures. Significantly, there has been sustained improvement in educational outcomes for all those aged 0 to 19. Service effectiveness has improved as a result of the good use of local data to target resources to areas of greatest need, good working relationships between multi-agency front line staff in local communities, and the involvement of and support for parents and carers. However, educational attainment and the potential for improving young people's choices and future opportunities, continue to be well below that found nationally. All partners, including health services and voluntary groups, have a clear understanding of both what needs to be done and their contribution to improving the life chances of children and young people in Nottingham. Under the direction of the Director for Children's Services, improved links have been made between the council's corporate plans, its aspirations for children and young people and the Children and Young People's Plan. The capacity to tackle weaknesses robustly and speedily is evidenced in the rapid improvement to aspects of children's social care identified as unsatisfactory in 2006. The capacity to improve further is illustrated by many innovative developments, such as the roll out of the successful children's centre programme, the Building Schools for the Future programme, the Educational Improvement Partnerships

and Multi-Agency Locality Teams, all designed to address the impact of social deprivation whilst raising aspiration and achievement.

Being healthy

61. **The work of all local services in securing the health of children and young people is adequate.** Partnership working is effective and there is a clear strategy to target resources at the most deprived communities.

62. There is a comprehensive children's centre programme. Phase 1, incorporating nine children's centres in the most deprived areas of the city, is complete and is providing good advice and support to parents and carers on how to keep their children healthy. A further seven, providing city wide coverage, will be operational by 2008. The children's centres have involved the local community well in the planning of services and are providing good support programmes, including childcare, parenting skills, healthy eating, sexual health, emotional well-being and health and safety in the home. There is adequate help for parents and carers in understanding the emotional needs of children and young people, including advice and training in parenting skills and living with teenagers, although not all communities have access to the same level of service.

63. Parents and carers access to services has increased with the realignment of both the community midwifery and health visitor services to children's centres. Community midwives provide good antenatal and postnatal advice to parents. Adequate progress is being made in encouraging women to breastfeed and to stop smoking during pregnancy, which is reinforced through the promotion of smoke-free homes. There is a targeted midwifery service for substance misusers and homeless young families. A Home Start coordinator is linked to each children's centre, providing effective long-term support in cases of domestic violence and postnatal depression as well as offering general parenting support.

64. Healthy lifestyles are promoted effectively and the provision is well coordinated. Schools make a valuable contribution, with almost all engaged in the Healthy Schools programme. Healthy eating is promoted well in schools. Participation in sport at school is good, with 81% meeting the two hours a week standard. The Schools Sports Partnership works well and extensive use is made of sports and swimming facilities out of school time. Services have introduced a successful pilot education and exercise programme, Go4It, improving nutrition and exercise for 105 obese children. This programme is now being extended across the city. There is adequate provision within schools to discourage smoking and across the city there are a number of successful cessation programmes. There is good engagement of schools in developing their drug and alcohol policies and school nurses are effectively involved in the delivery of educational programmes. Efforts are being made to assess the impact of these programmes.

65. Effective sex and relationship education and the provision of school-based sexual health services is not consistently available to young people across the city. There is much good practice in some areas: the KISS project (Knowledge and Information about Sex and Sexuality) has been successful in one locality owing to the effective work of the school link nurse and the full engagement of the schools; emphasis has been given to making sexual health services accessible and youth friendly; young people have been effectively involved in reshaping the services and are used as mystery shoppers to evaluate the quality of services; there is a good level of provision in a variety of settings, including youth clubs and voluntary organisations across the city centre and in targeted local communities; there are a number of effective initiatives targeted at Black and minority ethnic communities.

66. The C Card condom scheme achieves wide coverage, operating from many locations including outreach clinics, some schools in targeted areas and the YOT. Chlamydia screening has been introduced and has good treatment success rates. The incidence of sexually transmitted disease is, however, increasing. There is now a good multi-agency strategy targeting the very high teenage pregnancy rates in the hot-spot areas of the city. Outreach workers based in the YOT ensure good access to sexual health services for young people at risk of or involved in crime.

67. The child health surveillance programme is comprehensive. Waiting times for assessment clinics are scored positively by young people and are within national standards. Health services are largely age appropriate, with good provision overall at the Queen's Medical Centre including a separate accident and emergency department for children and young people and adequate provision overall at the City Hospital. The Oral Health Promotion Team works across the city and is effective in targeting, through children's centres, those children with poor oral health. The impact of this and other initiatives has not, however, improved the oral health of children aged five.

68. Services providing support to children with emotional difficulties include learning mentors, school nurses, playground buddies and counselling services. The community-based Multi-Agency Locality Teams provide good, locally accessible, non-stigmatised services allowing early intervention. There has been a high uptake by families. Each school links to a designated Multi-Agency Locality Team worker who provides advice on dealing with problems and accessing more specialist services if required. Specialist CAMHS offer good, comprehensive provision, with a single referral route. There is effective liaison with the locality teams and community paediatricians but accessibility for some families is difficult due to the location of the service. Staff feel that the consequence of the restructuring of CAMHS has been some loss of multi-disciplinary working, with social workers only working in the localities and clinical psychologists only working in the specialist service. The Substance Misuse Team provides good and accessible services and has workers in the Multi-Agency Locality Teams and the YOT. Services are well targeted at children who are looked after, Black and minority ethnic communities and the homeless.

There is an excellent drug and alcohol assessment tool for use in schools and elsewhere, which involves children and young people in the assessment process and provides a non-judgemental means of allowing them to talk about related issues impacting on their lives.

69. The health services for children who are looked after have improved significantly and are now good. With a designated team of four nurses and a paediatrician, almost all children have an annual health assessment and dental check. The mental health team for children who are looked after is highly valued and provides this group and care leavers with good information and access to services.

70. A comprehensive range of services is provided to support children and young people with learning difficulties and/or disabilities. Care packages are well coordinated and a specialist team of nurses and therapists provides good support to children and young people at home, in mainstream and special schools. The community paediatric service is accessible and there is adequate provision of dental and eye checkups. Access to mental health services is good, with a specialist, consultant-led multi-disciplinary team working with the locality teams in providing early intervention and support to families. Transition to adult health services is adequate and is supported by good information for parents, carers and young people.

Staying safe

71. **The work of all local services in keeping children and young people safe is adequate.** Social care services are continuing to improve and the key weaknesses identified in 2006 were addressed vigorously. In particular, provision in children's residential homes has improved and now meets national standards.

72. There is a good range of leaflets and other publicity to inform children and young people and their carers about key risks to their safety and how to address them. Effective strategies to reduce the incidence of road casualties and avoidable injury for children and young people, including some creative work in schools, are having a positive impact. The fire service is a notable contributor to the good work in this area. Good partnership work has addressed the previously high level of infant mortality. Action to promote safe sleeping for babies has contributed to this improvement.

73. Effective action is taken to prevent bullying in schools, which has had a demonstrable impact on reducing the occurrences of bullying and racist incidents. The Anti-bullying Team promotes the use of restorative approaches in schools and this is valued by staff and children. Good attention is paid to safeguarding in children's centres and other community-based settings.

74. Arrangements to identify children affected by domestic violence are satisfactory overall, with some good examples of effective early identification, particularly in primary health care services. However, there is a lack of clarity

about referrals to children's social care and not all cases are subject to a secure risk assessment to ensure appropriate action is taken. Some good support services have been developed but these are not always well coordinated and some do not have sustainable funding. The LSCB does not have sufficient strategic overview of this work.

75. There is good multi-agency engagement in providing early intervention and prevention to support families in need. Some effective preventative services, for example through children's centres and Multi Agency Locality Teams, contribute to good coordination of local services for families. There is a clear multi-agency strategy for further development of preventative services based in localities, including arrangements to develop and roll out the Common Assessment Framework and to secure a lead professional for each family. However, this work is currently at a relatively early stage of implementation and existing arrangements for referrals to social care services are not consistent across agencies.

76. Against a background of high deprivation, services to support teenagers at risk due to poor parenting, offending and poor engagement in education have historically been ineffective. For many of these young people and their families, their problems have become very entrenched. This now presents a considerable challenge to agencies. The response of services to these young people when they present in crisis is not sufficiently based on an assessment of risk and in some cases has little impact on outcomes. Some new services have been developed recently and additional ones are planned, including a more clearly focused parenting strategy and a targeted intervention team. However, it is too early for these to have had an impact on outcomes.

77. Systems within social care duty teams are in the main satisfactory: children who are clearly at risk of harm are identified and appropriate action is taken to ensure their safety. Implementation of procedures for conducting child protection investigations is generally adequate but joint decisions about planning investigations are not clearly recorded. There are some weaknesses in management monitoring of work, for example ensuring parents and referrers are consistently informed of the outcome of referrals or assessments.

78. Timescales for completion of initial assessments and core assessments have improved significantly but some initial assessments are inappropriately classified as core assessments. Social work assessments are of variable quality: initial assessments are generally satisfactory or better but some core assessments are insufficiently detailed or not well coordinated with assessments in other agencies. Decisions to initiate core assessments are not always based on level of need or risk, nor are they taken in a timely manner for children in need with complex needs, for example for teenagers on the threshold of care. The authority has recognised that improving the quality of assessments will improve decision making for children.

79. Thresholds for social care assessment and intervention are high and sometimes triggered too late to be effective. In some cases, opportunities for support at an earlier stage have been missed, leading to frequent re-referrals. Insufficient use is made of children in need assessments so too many families are entering the child protection system. Effective children in need interventions are provided through Children's Resource Centres. Systems for monitoring and reviewing these cases appear satisfactory, although they are not conducted within a formal procedure. The need to review thresholds both for social care intervention and for conducting child protection investigations has been recognised and this work has started. Arrangements to identify and support children who are privately fostered are good. Adequate arrangements are in place to support unaccompanied asylum-seeking children.

80. For some children who are looked after and some children on the child protection register, practice shows a lack of focus and decisive action, with little impact on sustained change for children. Placement choice for children who are looked after is improving, for example through more focused use of residential homes, but remains limited. The newly developed placement protocol is at an early stage of implementation. Care plans are regularly reviewed and although performance is improving, an insufficient number of reviews are completed within the required timescales. There is insufficient analysis of the reason for the over-representation of dual heritage children in the looked after population and the significant under-representation of Asian children.

81. There is an adequate and developing range of short breaks and support services for children and young people with disabilities. The multi-agency Allocation Panel promotes good involvement of parents and young people. Progress towards integrated services is not yet clearly defined but joint work between agencies is developing well to ensure early intervention, assessments and coordination of services for children and young people with learning difficulties and/or disabilities.

82. The LSCB is established on a sound footing, with engagement from all partners and with developing authority to challenge practice within partner agencies. Plans are in place to recruit an independent chair. Multi-agency and single-agency child protection training is good, including good training for school staff. Multi-agency public protection arrangements are secure. Child protection practice within local health services is good, with effective arrangements for consultation, supervision and advice for staff. There is good liaison between different health partners, for example effective liaison between health visitor services and accident and emergency departments. The high level of engagement of adult drug and alcohol services in safeguarding children is a particular strength. Multi-agency processes for establishing the whereabouts of children missing from education and from care are good.

83. The development of multi-agency quality assurance processes is at an early stage and there have been delays in the completion of a few serious case reviews. Secure plans are in place to address this. Within social care, there is

generally satisfactory management oversight of work, although case files lack regular summaries. Quality assurance and audit processes are adequate but consistent audit of cases by managers is only just becoming embedded and independent team audits are underdeveloped.

Enjoying and achieving

84. The work of all services in helping children and young people to enjoy their education and recreation and to achieve well is adequate.

There are significant strengths, and innovative developments are beginning to show sustained improvements on outcomes for many groups. The council, local services and voluntary groups are firmly committed to raising educational standards, and improvements are being maintained. Good use of data ensures that services are targeted to areas of greatest need. There are good levels of service for parents and carers. The school improvement services provide a good level of challenge and support. A coherent and ambitious plan is being implemented to reorganise secondary education through the Building Schools for the Future programme. It is well supported and aligned to neighbourhood locality teams.

85. Parents and carers receive effective early years support from a range of providers. Educational standards on entry are low, with many children having poor communication, literacy and language skills. Services ensure that assessment at this stage is robust and actions focus on improving early learning outcomes. The number of childcare settings has increased and promotional activities are ensuring that the most vulnerable families are aware of and can benefit from services. A good range of information is available through the early years partnership and the Children's Information Service, which is of high quality and accessible to the diverse needs within communities.

86. Family learning opportunities are good and well used. Services have identified the link between parents' own language needs and their children's attainment as a key to driving up standards. Provision has been developed, for example the work of the locally based, multi-disciplinary Educational Improvement Partnerships, to increase parental involvement in family learning opportunities, including basic skills provision and English Speakers of Other Languages classes. There is a growing range of effective community activities promoting more positive attitudes to learning.

87. The School Improvement Team and the national strategy consultants provide effective challenge in the areas of raising standards and improving provision. Bearing in mind the very low base from which some children start education and the high numbers of children identified with learning difficulties, the progress children make from one key stage to another is at least satisfactory. Good progress in closing the gap with national attainment levels has been maintained over the last three years. Schools report that they value highly the level of support and challenge they receive, and most recent inspection findings show nearly all schools are providing satisfactory or better

educational provision. Schools falling below nationally set floor targets are making good progress and their number has reduced from nine to three in the last year. Although more work needs to be done to ensure consistently good leadership and management and teaching in schools, the service has the confidence of the schools. There is a strong 'provider culture' across the council. The children, young people and families' service has an effective commissioning strategy, but schools have yet to become discerning, independent purchasers of services.

88. The use of data, particularly pupil tracking, has been effective in enabling schools to focus on areas of greatest weakness and to improve outcomes. The underperformance of white boys and boys from Pakistani communities is now the major focus for improvement programmes. Regular monitoring undertaken by national consultants and regional school improvement coordinators illustrates that the young people involved are making good progress. In addition, effective training has been implemented across all phases to enhance the quality of teaching and learning.

89. Most children enjoy school and attend regularly. Previously poor attendance levels in both primary and secondary phases have attracted focused interventions by the council and the DfES and significant progress has been made. The numbers of unauthorised absences are decreasing year on year as a result of the implementation of successful strategies, including penalty notices and home visiting. Behaviour observed in school inspections is generally good. Shared approaches to addressing poor behaviour and motivation within the classroom, through the Social and Emotional Aspects of Learning programme, and work within Educational Improvement Partnerships and the Multi-Agency Locality Teams are beginning to record positive influences on children's emotional well-being. Permanent exclusions continue to be above national figures but have remained static for three years, with a high level of cooperation between schools and the council in addressing the needs of the most challenging pupils. As part of the Hard to Place protocol, a Fair Access Panel has been established recently. At its most recent meeting, almost all of the 25 pupils facing permanent exclusion were successfully placed between schools.

90. Services providing alternative education provision are good overall and the new commissioning alternative provision service for Key Stage 4 pupils has recorded good attainment and attendance results. Plans to review this provision and to align it more coherently with pupil referral unit provision are in progress. Beckhampton pupil referral unit for teenage mothers and the Hospital and Home Education pupil referral unit for pupils who for medical reasons cannot attend mainstream school have recently been judged at inspection to be good. All young people out of school are known to local services and their educational provision is tracked and monitored. Although not all young people receive their full 25 hours entitlement to education, in nearly every case they receive a programme designed to meet their individual learning needs more productively.

Many children and young people under 16 known to the local YOT do not receive their full education entitlement.

91. The minority ethnic service provides good support to schools to help meet the needs of Black and minority ethnic pupils. Comprehensive data are used effectively to track individual and group progress. Recent targeted intervention with African Caribbean boys has secured improved attainment at Key Stage 4, almost doubling results at GCSE from 20% achieving A*–C grades in 2005 to 39% in 2006. Supplementary education is well supported by the council and contributes effectively to the cultural needs of many children. On-going support is also available to travelling families, and last year 120 traveller children attended a full week of education organised by the council on the site of the annual Goose Fair. Additional funding for gifted and talented children has enabled many to access enhanced curriculum support and attain higher levels at Key Stage 2 and 3 tests and GCSEs.

92. The attainment of children who are looked after is poor, although attendance is good. The work of the Looked After Achievement Team has been ineffective overall, but individual support and mentoring by staff for some pupils who are looked after helped 11 to achieve at least one A*–G grade at GCSE in 2006. In response to the poor attainment levels, the council is undertaking a full review of the educational support currently in place.

93. Support for children and young people with learning difficulties and/or disabilities is good. The council's highly inclusive education policy enables many pupils with special educational needs to stay in mainstream schools. Ellis Guilford Comprehensive School has successfully incorporated the needs of pupils with learning difficulties and/or disabilities. Pupils have expressed strong satisfaction with the schools' accessibility, inclusiveness and extra-curricula activities. Special schools generally ensure that pupils with more complex needs receive a supportive education, and parents are happy with the services they receive and the progress their children make. The percentage of those children with statements is well below that of similar areas and is reducing.

94. There is an inclusive range of play and recreational activities for very young children and for those up to 14 years. Voluntary and community projects also run activities in communities for vulnerable groups. Targeted campaigns have effectively increased participation of children in many sporting and cultural activities. More 13 to 19 year olds attend publicly funded youth service activities than is found nationally although the older age group say that there is not enough leisure and recreation provision that appeals to them.

Making a positive contribution

95. **The work of all local services in helping children and young people to contribute to society is adequate.** Support for children and young people's social and emotional development is adequate and improving. Early years and extended school provision support children's readiness for school. Schools promote most aspects of social, emotional and behavioural

development well. Targeted support through learning mentors, peer mentors and buddying is beginning to improve children and young people's behaviour in school and their school attendance. Children and young people generally express high satisfaction in the quality of relationships with the adults that work with them, for example youth workers and YOT case managers. Behaviour support services provided through the Multi-Agency Locality Teams offer some highly valued parenting programmes, targeting and engaging some of the most challenging children and young people to support their phased reintegration back into mainstream education services.

96. Support for young people, particularly vulnerable groups, in the management of change and in responding to challenges in their lives is adequate and improving. Partnership working is increasingly coherent and innovative, with clear remits for partner agencies, including the voluntary and private sector. School performance to combat discrimination and racism is good. Children and young people from Black and minority ethnic groups are well supported and integrated into their communities. There are some well-targeted initiatives in a number of areas, which are making a notable difference. For example, a voluntary sector youth inclusion programme is improving social, emotional and educational outcomes for Black and minority ethnic children and young people in the St Ann's area. There is insufficient bereavement counselling and the needs of some children and young people remain unmet. Young carers' access to support is variable and future funding of the service is unclear. Provision of advocacy services to support children and young people's participation in child protection conferences is a strength.

97. Arrangements for children and young people to participate in decision making and to support their communities are adequate and improving. Although arrangements were slow to develop, elected members, officers of the council and partner agencies are committed to improving aspects of participation for children and young people. A comprehensive participation strategy has recently been approved. Strategic planning is beginning to take account of children and young people's wishes and there are some good examples of their views beginning to influence the shape of services, for example through the Building Schools for the Future programme. However, some systems are new and links between the 'virtual school council' forum, school councils and the Youth Council are not clear.

98. The majority of children and young people report that consultation is effective. However, practice is variable across the city and engagement is limited. For example, some young people felt let down by the adults involved and others do not know about the range of participation opportunities that exist. Practice to promote the inclusion of children and young people with learning difficulties and/or disabilities is good, for example representation on the Youth Council and the availability of peer mediators in schools trained in listening, problem solving and befriending. The views of children and young people with learning difficulties and/or disabilities are increasingly helping to shape services. For example, there has been recent consultation on staffing as

part of the workforce strategy and children have played an active role in staff recruitment. Children and young people have a wide range of opportunities within schools and the wider community to learn to share, be tolerant, listen to others and communicate thoughts and feelings positively.

99. Action taken to reduce high rates of anti-social behaviour and offending committed by children and young people is adequate and improving with a reduction in first time entrants against a rising trend nationally. Young people who met with inspectors describe positive changes to their behaviour as a result of the YOT involvement and opportunities and choices they are given. Although inconsistent, there are a few good examples of young people improving their contribution to their community through the YOTs reparative justice initiatives. Strategies to address anti social behaviour are robust and collaboration and multi-agency working, including the voluntary sector and the police, is a strong feature. Services place a major emphasis on early intervention and prevention. Data are used well to inform strategy, and practice and interventions are based on assessment and targeted well, for example the youth service 'hot-spot tasking' to deal with local issues. Diversity issues are not given sufficient consideration in strategic planning and interventions provided by the YOT. Partner agencies are providing a wide range of effective activities to engage children and young people in positive activities, including sport, leisure and opportunities to become involved in the community. For example, positive activity youth programmes are reaching a high number of children and young people, and local initiatives, such as Mega Nite, provide opportunities for children and young people aged five to 14 on Friday nights when the risk of anti-social behaviour and offending is greatest. Effective arrangements are in place to encourage children and young people to take part in and to initiate voluntary activities, for example the Duke of Edinburgh Award scheme. The majority of children and young people report feeling involved in and well supported by their local communities.

100. Support for children and young people who are looked after by the local authority to make a positive contribution is adequate. Corporate parenting roles and responsibilities are well established, known and understood. Good arrangements are in place so elected members meet children and young people regularly to hear their views. Support for care leavers into employment is effective, leading to improved life opportunities. For example, there has been an increase in the number of 16 to 19 year olds who have gained employment, including some who have gained employment with the council.

101. Children and young people who are looked after are becoming increasingly involved in making decisions about their own lives and in influencing services. For example, children who are looked after have two representatives on the Youth Council. Some children and young people do not know how to access the children's rights service. The complaints system does not sufficiently engage children and young people and they report that complaints are not dealt with to their satisfaction. The YOT targets young people who are looked after who are most at risk of offending and re-offending and provides intensive contact and

support. However, action is not yet having an impact as the rates of offending remain high.

102. Support for children and young people with learning difficulties and/or disabilities to make a positive contribution is good. Transition planning in schools is well supported, for example a high proportion of young people contribute to their annual reviews. Communication is supported through the Makaton system and the provision of specialist communication aids. Parents spoke highly of the support services and education offered to their children at school.

Achieving economic well-being

103. **The work of all local services in helping children and young people achieve economic well-being is adequate.** Families are supported well to improve their economic well-being. Parents and carers benefit from a good range of services and activities, including advice about housing and opportunities for family learning. Good information is provided by the children and families' information service about the range of childcare provision in the city. Recent marketing and publicity events are increasing the number of families aware of the service. The provision of childcare places has increased and there is an established programme to develop children's centres. Currently, access to play schemes does not meet the needs of some parents who work. Children's centres, located in areas of high unemployment, are working effectively with JobCentrePlus to promote training and employment opportunities.

104. Most young people receive good careers advice and guidance from schools and from the Connexions service. Specialist personal advisors from Connexions work with priority groups, such as young people of Black and minority ethnic heritage and those with learning difficulties and/or disabilities. The council is increasingly working more effectively and closely with voluntary and community organisations to further reduce the number of young people who are not in education, training or employment. School inspections identify that the extent to which schools enable learners to achieve economic well-being is satisfactory.

105. There is clear strategic planning for 14–19 education and training. Good progress has been made on developing 14–19 provision in the city, and effective partnership and joint working is contributing to a greater range of curriculum options for children and young people. The development of provision has been informed by local labour market priorities and skills shortages. There is increasing engagement of employers in planning and coordinating 14–19 provision. Work-based learning is increasing as part of these developments. Much work is taking place with providers of education and training to improve the literacy skills of children and young people in order that they can access the full curriculum and increase their chances of success.

106. Schools are offering an increasingly wide range of vocational courses and local data illustrate improvement in both attendance and achievement. The

range of work experience opportunities is also increasing. A new service commissioning alternative provision at Key Stage 4 is successfully increasing the number of young people engaged and is extending the range of provision. Appropriate arrangements for quality assuring this alternative provision have been introduced, ensuring young people's access to worthwhile placements. There are currently some gaps in the range of foundation level provision in the city, such as the availability of pre- Entry to Employment programmes. These are to be addressed as part of the 14–19 strategy.

107. Entry to Employment provision is predominantly located in the most deprived communities and is targeted at the most vulnerable groups. The Entry to Employment programme offers a strong emphasis on accrediting and developing employability skills and offers subjects such as sport and healthy eating, first aid, food hygiene, team building and voluntary work. Young people are actively involved in regular target setting to support positive outcomes and progression. Local services provide good support, ensuring young people progress from Entry to Employment into further education or employment.

108. Retention in post-16 education and training is improving. Young people are increasingly well supported in their transition to post-16 provision by schools, colleges and training providers. The progression rate of young people into further education has increased in recent years but remains below the national average. Relatively few young people progress to higher education, although this number increased by 4% in the last two years. The local authority has increased the number of opportunities for young people to gain work experience and take up apprenticeships within the work of the council, with priority being given to care leavers and young people with learning difficulties and/or disabilities. Through the 'local jobs for local people' initiative, 15 young people were employed by the council in 2006.

109. The number of children and young people living in families dependent on workless benefits is well above the national average but declining slowly. Targeted work with the welfare rights advice service in Sure Start areas has improved the take up of benefits. The take up of the education maintenance allowance has increased and is now above the national average.

110. The city has a range of community regeneration activities targeted at the most deprived wards. Many pilot projects were successful but historically the use of grant funding did not lead to sustained improvement and consequently have not had a significant impact on the economic well-being of children and young people. Local action plans now prioritise 14–19 achievement for those young people likely to become disengaged from school and not participating in education, employment or training. Neighbourhood renewal funds are being used to commission projects to support these young people and there is evidence that many of these projects are now contributing to improved economic well-being.

111. The council works closely with a range of partners to try to ensure that young people have decent housing. A significant proportion of homes within Nottingham City do not meet the set standard of decency. The council is working to address this issue and is prioritising accommodation for families. A good range of supported accommodation is provided for vulnerable young people and families requiring additional support. Good systems are in place for brokering accommodation for homeless young people. The prevention of homelessness is a key priority for the council and a mediation service for young people aged 16 to 25 and their families is proving effective in reducing the number of young people leaving home and seeking alternative accommodation.

112. Young people leaving care generally feel well supported by the Leaving Care Team. The team works effectively in partnership with other parts of the local authority and with external agencies such as CAMHS and Connexions. Care leavers make good use of the drop-in centre in Nottingham City centre. Good planning and support from Connexions and the Leaving Care Team ensure a higher proportion of care leavers progress to higher education than seen nationally. All care leavers are provided with suitable accommodation.

113. From the time of the 14-plus statutory reviews of statements of educational need, local services work well together to identify education, training or employment routes for young people with learning difficulties and/or disabilities on leaving school. Good partnership working with the local LSC and providers of education and training has identified the future development needs of post-16 provision for young people with learning difficulties and/or disabilities. There has been a steady increase in the take-up of direct payments by young people with disabilities. Although inter-agency working is generally sound, the local authority has recognised the need to improve transition planning for young people with learning difficulties and/or disabilities. A multi-agency Transition Team is being established to improve transition planning and ensure the effective transfer to adult services.

Service management

114. **Service management in Nottingham City is adequate. There is good capacity for improvement.** The self-assessment produced by partners provides a realistic and accurate evaluation of Nottingham's services.

115. The level of ambition for children and young people is good. Improving children's life chances continues to be a long-standing high priority for Nottingham City Council. Ambitions are stretching but realistic, based on a good evidence base, and they are shared with and by partners, who acknowledge the council's thorough understanding of what needs to be done. Some of the ambitions are necessarily groundbreaking. For example, the Building Schools for the Future programme goes far beyond the physical construction of new buildings towards a vehicle for a transformational change in teaching and learning. It is also an integral part of the regeneration programme in key

deprived areas. Incorporating three new academies into this scheme further sets it apart from its contemporaries.

116. Key partners share a common vision for improving the well-being of children and young people. Partners show great commitment and work well together, with a shared appreciation that significant change can only be achieved through strong collaborative working. This is a significant and powerful driver for change in the city. Councillors have shown their commitment by taking politically difficult decisions, such as closing special schools in order to create centres of excellence for children with special needs.

117. The Local Strategic Partnership in Nottingham is improving significantly after a shaky start. Its central themes, as expressed within the One Nottingham One Plan (ONOP) document, are becoming established, along with its focus on early intervention. The Children and Young People's Plan has been thoroughly mapped against other strategic plans, linking actions and targets to ensure improved outcomes for children and young people within the context of community regeneration. The philosophy of early intervention and multi-agency intervention is becoming established in practice through centres of integrated service provision such as the children's centres and Multi-Agency Locality Teams.

118. The Children and Young People's Plan gives a high level exposition of what the area is trying to achieve. It is based on a thorough audit of need and demonstrates adequate input from a range of user groups. Resource requirements are sufficiently detailed to enable councillors to judge the affordability of the plan. Most targets are sufficiently stretching to make a real difference. Some are incorporated into the new local area agreement, on which theme groups will focus. There is increasing evidence of young people shaping planning on such issues as school meals, staff recruitment and safety in open spaces.

119. 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 sharpening up the ways in which partners will be more accountable. The partner-led theme groups are also supplemented by 'shadow groups' which have a clear focus on cross-cutting issues such as equalities and parental views.

120. Weaknesses in strategy are relatively minor and acknowledged by the partners. For example, improved governance arrangements in the Local Strategic Partnership, and sharper alignment of targets between the ONOP and other key plans have been identified and steps put in place to rectify them.

121. Prioritisation is adequate. The Children and Young People's Plan helpfully sets out its priorities for each of the Every Child Matters outcomes and indicates how success will be identified. Although currently labelled as 'emerging', these priorities are owned by partners, whose own priorities are in close alignment with the plan. Integrated working directed at prevention is becoming

established in priority city areas, and is directed at vulnerable groups. Sound plans for city-wide roll-out are in place. There has been useful input from stakeholders to ensure that plans fit the identified need within Nottingham to 'narrow the gaps' between the most and least affluent areas.

122. The council's service plans link well to the Children and Young People's Plan and are now produced to a consistent format. They are largely fit for purpose, although individual targets, accountabilities or resources are occasionally absent. There is a good mix of local and national priorities, and the floor target action plans are well crafted. Case study work demonstrated some joint planning for the provision for individual children's needs, but this is accepted by the partners as not yet universally the case.

123. The council has traditionally prioritised children's services financially, with funding above government guidelines. Resources are targeted at priority areas on a general level, but there is no robust link between resources and performance, although the recent improvement in children's social care provides a sound model upon which to develop this aspect. Decisions surrounding the possible 'mainstreaming' of grant-funded projects are providing a clear programme of sustainable action, which is being included in the Children and Young People's Plan.

124. Financial prioritisation within education services is good. Productive interactions with the schools' forum ensure resource distribution is agreed; for example, the move to distribute some SEN funding at local level. Importantly, there are no signs that the necessary focus on improving children's social care has resulted in any slippage in the performance of education services, as these continue to deliver continuous improvements in outcomes for children. Recently, setting priorities in children's social care has of necessity been reactive, primarily responding to shortcomings identified by regulators. There is now a growing understanding and confidence of what needs to be done to build on the improvements already achieved.

125. The council demonstrates a high degree of pragmatism in being prepared to take politically difficult decisions if these serve to fulfil priorities. Closing schools and embracing both private finance initiatives and academies illustrate this. The council can also demonstrate its ability to focus on high priority areas and see them through, although the variable record of performance shows that this is not always consistent. Recent high level commitment to improving children's social care has been successful and the drive to transform secondary education is developing well.

126. Current capacity is adequate, with good prospects for improvement. Capacity to improve is good, as illustrated by improved strategic planning at corporate level, effective partnership working, sustained improvements to educational achievement, innovative local multi-agency working reflecting the assessed needs of local communities, and rapid improvements to identified weaknesses in children's social care. The Children and Young People's Strategic

Partnership is established and now has the right people in place at a sufficiently strategic level. However, plans to identify how the partnership will exercise its 'trust arrangements' are underdeveloped. Partnership and engagement with local voluntary and community groups enhance local capacity, especially in relation to Black and minority ethnic groups and vulnerable groups.

127. The Director of Children's Services (previously Nottingham's Director for Education) has a proven track record in driving improvement and has robustly promoted the integrated children's service. The Director of Children's Services, Leader of the Council and Cabinet Member have established a productive working relationship. Their strong leadership is both effective and acknowledged by stakeholders. Representatives from partner organisations are also well regarded. Importantly, staff at all levels show great determination and enthusiasm, despite both the scale of the task and the blow to self-confidence from the poor annual performance assessment in 2006.

128. Corporate and directorate strategies in human resources, procurement, training, workforce development, asset management and ICT are at various stages of effectiveness in matching capacity to need. Recruitment and retention of some key groups, such as headteachers and social workers, is a concern, as is the high case load of health visitors and level of sickness generally across the council. Recent moves to address these are encouraging.

129. Pooling of budgets, joint commissioning and integrated service delivery, particularly with the health and voluntary sectors are emerging and encouraging signs of improvement are evident. All partners contributed to an effective consultation process. An agreed strategy for commissioning, monitoring and evaluating provision provides a shared and agreed approach to ensuring value for money and sustainability of agreed initiatives.

130. Within children's services, budget management is good and is underpinned by a sound medium-term financial plan. Value for money overall is adequate and improving, with the Serving Children and Young People Better programme offering an appropriate way forward in ensuring a more systematic approach in this regard. It is, however, relatively new and has had limited impact.

131. Performance management systems are adequate. Appropriate systems and processes are now in place across the council's services and are spreading to some partners, but the degree to which they are embedded and demonstrating impact is variable. The partnership is data rich, supported by the common Performance Plus system which is becoming established. The conversion of data to intelligence upon which to monitor and tackle performance where needed is variable, resulting in a failure to recognise the slide in the performance of children's social care during 2005–06. This is now being tackled effectively as the more integrated processes of managing performance seen in education services spread across the new directorate. The

Strategic Partnership Board has only recently started to explore performance data.

132. Within children's services there is now a clear determination, supported by managers and councillors, to rigorously apply the available systems and data to better effect. The value of managing performance is now accepted at all levels, and the self-assessment, endorsed by partners, showed good self-awareness. A developing positive track record in improved achievement in children's services is a good sign that this is having an impact. Much focus has of necessity been on national performance indicators, but local indicators are relatively underdeveloped. For example, there is insufficient focus on the measurement of quality of practice in aspects of children's care.

133. Reporting is becoming clearer and more consistent, and councillors are becoming sharper in their use of performance data. Scrutiny mechanisms are improving, with the Health Scrutiny Panel in particular helping to improve service provision for users including children and young people.

134. The views of children and young people are listened to, although this is not always systematic, and real engagement is variable. Some groups such as care leavers are sceptical, and consider that their views are listened to but not acted on, whereas there is good evidence of children's views being used to develop the Building Schools for the Future project. Although there is no corporate mechanism for analysing complaints, at directorate level these are acted on adequately and fed into the service review process.

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

1. The council's contribution to delivering outcomes for children and young people is adequate. Improving children's life chances continues to be a long-standing high priority for Nottingham City Council. Ambitions are stretching but realistic and based on a thorough understanding of the local context. Partnership working is a significant and powerful driver for change in the city. Key partners work well together and share a common vision for improving the well-being of children and young people. The council has traditionally prioritised children's services financially. Resources are targeted at priority areas but the link between resources and performance is not robust.

2. The children, young people and families' strategic partnership provides an effective multi-agency forum involving all key services and partners in planning and increasingly in delivery. The Children and Young People's Plan provides a high level exposition of what the area is trying to achieve. It is aligned closely, but not completely, to other local strategic plans. The Children and Young People's Plan is based on a thorough audit of need and most targets are sufficiently stretching to make a real difference. Increasingly, young people are involved in shaping planning. The council's service plans link well to the Children and Young People's Plan, although individual targets, accountabilities or resources are occasionally absent.

3. The integration of services for children is being managed effectively. The Director of Children's Services, Leader of the Council and Cabinet Member are well established. Their productive working relationship and strong leadership is both effective and acknowledged by stakeholders. Robust action has been taken to address weaknesses identified in children's social care whilst maintaining the performance of education services and the evolution of integrated services delivery. Within children's services, budget management is good and performance management adequate.

4. The combined work of all local services in securing the health of children and young people is adequate. Young children and their parents or carers receive good health support in areas covered by children's centres. Schools provide a wide range of health education, and good progress is being made to encourage healthy eating and exercise. The delivery of effective sex and relationship education and the provision of school-based sexual health services is variable across the city. Oral health promotion targets priority areas but the dental health of five year olds continues to be poor. Services to support children and young people with mental health needs are generally good. The health care provision for children who are looked after is good. A comprehensive range of services, including respite care, are provided to support children and young people with learning difficulties and/or disabilities.

5. The impact of all local services in keeping children and young people safe is adequate. Social care services are improving and the key weaknesses identified in 2006 have been addressed. Timescales for completion of initial assessments and core assessments have improved significantly. Systems within social care duty teams are, in the main, secure. The implementation of procedures for looked after children and for conducting child protection investigations is generally adequate, although the recording of decisions and central monitoring of the progress of investigations is inconsistent and decisive actions are not always taken. Agencies work well together to identify and support families in need. Increasingly, early interventions and preventative actions improve children's welfare within their family situation, but there is a lack of services to support families with teenagers who are in crisis. Arrangements to identify and protect children affected by domestic violence are satisfactory overall, although not all cases are subject to a secure risk assessment. Child protection practice within local health services is good and there are robust multi-agency processes for establishing the whereabouts of children missing from education and from care. Placement choice for children who are looked after is improving but remains limited. Action taken to prevent bullying in schools has had a demonstrable impact on occurrences of bullying and racist incidents. Within social care management, oversight of work, quality assurance and audit processes are adequate overall but not sufficiently focused on improving quality and outcomes for children.

6. The impact of all local services in helping children and young people enjoy their education and recreation and to achieve well is adequate overall. There are many strengths. Partnership working between schools and the local authority is increasingly effective. School improvement initiatives have provided significant challenge and have been effective in targeting provision for those schools which are underperforming. Attainment across all key stages is well below both statistical and national levels but early intervention programmes have contributed to consistent improvement over the last five years. Evaluation is robust and high quality data are used effectively to track pupil progress and to inform planning. Strategies appropriately address the needs of the most vulnerable groups. Schools receive good support to address behavioural issues and attendance. School reorganisation through the Building Schools for the Future programme is ambitious and well supported by schools across the city. Opportunities for play and recreation for early years and the 8 to 14 age group are varied and good. Involvement by 14 to 19 year olds in organised leisure activities is low.

7. Good progress has been made on developing 14–19 provision in the city, and effective partnership working is contributing to increases in participation and attainment. The overall participation rates in post-16 education, training or employment have increased steadily and are broadly similar to the national averages. However, a relatively low proportion of young people who have offended are in education, training or employment.

8. The impact of all local services in helping children and young people contribute to society is adequate. Good arrangements are in place to encourage young people, including those with learning difficulties and disabilities, to engage in consultation and influence the shape of services. Services support the social and emotional development of young people well. There are insufficient services for children and young people who are bereaved and those who are young carers. Multi-agency work to target and provide positive activities for those with anti-social behaviour or at risk of offending is having a positive impact. Services for children and young people who are looked after by the council are variable. Recent improvements have resulted in some better outcomes for care leavers, although offending rates remain high.

9. The city has a range of community regeneration activities targeted at the most deprived wards but these have not yet had a significant impact on the economic well-being of children and young people. Good systems are in place for brokering accommodation for homeless young people. However, a significant proportion of children and young people live in homes within Nottingham City that do not meet the set standard of decency.