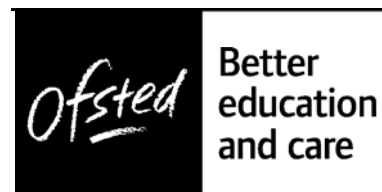


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Making Social Care
Better for People



Mr Chris Spencer
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1 November 2006

Dear Mr Spencer

2006 ANNUAL PERFORMANCE ASSESSMENT OF SERVICES FOR CHILDREN AND YOUNG PEOPLE IN LONDON BOROUGH OF HILLINGDON

This letter summarises the findings of the 2006 annual performance assessment process for your local authority. The judgements reflect the outcomes of the joint area review and the updated self-assessment provided by the council. We are grateful for the information that you provided to support this process and for the time that you and your colleagues have given to discussing relevant issues.

Summary

Areas for judgement	Grade awarded ¹
The contribution of <i>the local authority's children's services</i> in maintaining and improving outcomes for children and young people.	2
The council's overall <i>capacity to improve</i> its services for children and young people	2
The contribution of <i>the local authority's social care services</i> in maintaining and improving outcomes for children and young people	3

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Grade	Service descriptors	Capacity to improve descriptors
4	A service that delivers well above minimum requirements for users	Excellent / outstanding
3	A service that consistently delivers above minimum requirements for users	Good
2	A service that delivers only minimum requirements for users	Adequate
1	A service that does not deliver minimum requirements for users	Inadequate

The London Borough of Hillingdon's children's services make an adequate contribution to maintaining and improving outcomes for its children and young people. The joint area review (JAR) report of February 2006 made clear that there were aspects of the council's services which made a good contribution. There were also shortcomings in some areas and improvement, for example in educational outcomes was in the early stages. Data received since the JAR shows some slippage in performance.

Since the JAR, the council has published its Children and Young People's Plan (CYPP) and an action plan. The CYPP appropriately sets out the council's vision and priorities, but the action plan contains a number of weaknesses. The plan identifies generally suitable steps to tackle the recommendations from the JAR and other areas for improvement which the council identified in its self-assessment. However, the timescales and related milestones are not clearly defined and some of the criteria by which success will be judged are not quantified. Targets are contained within other plans published by the council, but the readers of the CYPP and its action plan may not have ready access to them. In addition, the planned action does not always show how the specific recommendations will be tackled. For example, there is nothing to say how mental health services for young people known to the youth offending team (YOT) and who are not at school will be improved.

As yet, many of the recommendations from the JAR are in the early stages of implementation and not all of them have been tackled within the time scales recommended in the JAR report, for example in providing a multi-agency transition plan for 14 year olds with learning difficulties and/or disabilities. There are signs of improvement, for example in national test results at Key Stage 3, but in other areas there is as yet limited evidence of impact. This may be because of the short time since the JAR report was published. The council's capacity to improve remains adequate.

Being healthy

The contribution that the council's services for children and young people make to improving outcomes in this area is adequate. The joint area review highlighted two actions to be taken immediately and one to be taken over the next six months:

Immediate:

- review and strengthen provision of appropriate primary healthcare services in the south of the borough and for traveller communities generally
- reduce the rate of teenage pregnancies by targeting all available resources more precisely.

Next six months:

- improve Child and Adolescent Mental Health Services (CAMHS) for young people known to the YOT who are not at school and for 16 to 18 year olds.

The council's updated self-assessment identifies plans to provide additional services in the south of the borough and to traveller communities. Discussion revealed that an immunisation nurse now works in that area and immunisation rates have increased by one third. A multi-agency conference held in March to review travellers' needs was attended by representatives from the traveller community and an action plan was agreed with them. Further information was given on weekly sessions that are now held at a site agreed with travellers. These have already provided information and support on health issues, for example first aid and dental treatment. Other classes requested by the community will be offered on non-health issues, for example, sewing.

Funding has been secured to renovate the travellers' site in the autumn. This demonstrates the council's commitment to improving services in the south of the borough.

The need to reduce the rate of teenage pregnancy was highlighted in the 2004/05 annual performance assessment. The current dataset identifies a very small improvement since 2003 and the rates remain too high against comparative data. The CYPP action plan lacks any quantifiable targets for this area although they are included in sexual health plans. The council is now running sessions providing advice on sexual health for young girls in the south of the borough. It is too early to evaluate the impact.

The need to improve mental health services for young people known to the YOT who are not at school was also a recommendation from the 2004/05 annual performance assessment. The CYPP action plan does not show how this weakness will be addressed within the required timescale. However, discussions revealed that a dedicated primary mental health worker located in the YOT started work in January 2006. This post holder works closely with the primary adolescence care worker who is based in the CAMHS. The primary mental health worker provides a service for all young people known to the YOT including those who are not in school, and 16 to 18 year olds who no longer have a youth offending order. During 2005-06, all young people manifesting acute mental health concerns within YOT were seen within five working days for an assessment. Hillingdon completed 86% of health assessments for looked after children on time, in line with the outer London average.

Staying safe

The JAR judged that the contribution that the council's services for children and young people make to improving outcomes in this area was good and no recommendations for action were made. However, current data show that there has been slippage in some areas of performance; nevertheless, the contribution that the council's services make to improving outcomes in this area remains good. In 2005-06 the number of core assessments completed within 35 working days slipped and performance is now significantly below the outer London average. This was an area for improvement in the 2004/05 annual performance assessment. The number of referrals of children per 10,000 of the population is 22% higher than comparative neighbours. This area of weakness was discussed and the constraints of working with reduced funding were noted. Nevertheless, the issue needs to be addressed with some urgency. Just under half of all referrals led to an initial assessment, which is significantly lower than the outer London average. The council states that this is because of the high number of referrals received from Heathrow airport. In Hillingdon, the number of looked after children per

10,000 of the population is nearly double that of comparable neighbours and is expected to increase by a further 9% during 2006-07.

At the time of the JAR 3.6% of looked after children did not have an allocated social worker for a short period of time and these cases were managed by the duty system. Performance has slipped since then and 9% of children now do not have an allocated social worker. Approximately 39% of looked after children are placed outside the borough and during the year 24% of newly looked after children were placed more than 20 miles away from their home. This compares poorly with the outer London average. The council states that within the borough there is a shortage of placements which are appropriate for the needs of looked after children, especially unaccompanied asylum-seeking children. The percentage of looked after children who had a timely review was 69%. This is significantly below the outer London average and one of the worst in London. The percentage of looked after children placed for adoption, in foster care or kinship arrangements has also slipped and is below the outer London average. This is mainly because of the number of older, unaccompanied asylum-seeking children who do not have local family or friends. However, all looked after children were adopted within 12 months of the decision that this was in their best interest. The council has increased semi-independent living placements by 200% to appropriately accommodate these young people. The percentage of children looked after continuously for four years and in their current placement for at least two years is 45%. This is considerably below both the outer London average and the council's own plan for 2005-06. However, fewer looked after children have had three or more placements during the last year than the outer London average.

All children and young people placed on the Child Protection Register have an allocated social worker and all reviews took place at the appropriate time. The number of children who are on the Child Protection Register for less than two years is good, and only 17% are re-registrations. The work of the multi-agency support team, the community advice and support team and the intensive family support team has effectively prevented 45 children from being received into care.

Consultations carried out by the council revealed that some young people did not feel safe in parts of the borough. In response to this, Hillingdon has now provided over 5,000 children with training on road safety, safe routes to school and safe cycling. Anti-bullying and anti-harassment strategies have also been launched.

Enjoying and achieving

The contribution that the council's services for children and young people make to improving outcomes in this area is adequate. The JAR highlighted one action to be taken immediately:

- review and strengthen arrangements to ensure that necessary improvements are made in educational standards for all pupils and learners, including those looked after by the council, and ensure that the gap between the lowest achieving and highest performing schools is reduced.

Action over the next six months:

- reduce the rate of pupil exclusions.

Information about pupils' attainment and rates of progress is now used more effectively to set improved targets for performance for each school. Members of the school improvement services work more closely and more rigorously with schools and make sure that targets are appropriately challenging; many have been revised upwards. The impact of this work is beginning to be seen. Early indications from unvalidated test results at Key Stage 3 show that most schools have improved their results in mathematics and science, which indicates that the pupils are making better progress. Suitable strategies are being implemented to improve teachers' skills in selected groups of primary and secondary schools. This is a necessary step and will underpin the more rigorous target setting.

There are appropriate plans to establish personal education plans for children who are looked after by the council and to increase the number who are entered for national tests and examinations. Current data show that the percentages of looked after children who sit at least one GCSE equivalent examination and who achieve five or more good GCSE passes are above the national average. The attendance rate of looked after children is good, and is better than that of Hillingdon's other pupils. It is too soon to discern the impact of personal education plans and the more rigorous target setting on the educational outcomes for looked after children.

A weekly 'clinic' for secondary schools has successfully resulted in the increase in permanent exclusions being halted, although the overall figure for the year is similar to last year's figure and still therefore too high. This work has the potential to have a positive impact in the next academic year. The steps taken are appropriate but there is not as yet a confirmed downward trend in exclusions.

Making a positive contribution

The JAR made no recommendations in relation to this outcome and found that the contribution that the council's services for children and young people make to improving outcomes in this area is good. However, subsequent data now show that 21% of looked after children did not participate in their statutory review. Continuous monitoring and remedial action will be necessary to change this outcome. The JAR report noted that in the immediate period

following permanent exclusion, vulnerable young people and their parents/carers are given too little support to allay anxieties and to understand how their needs may be met.

Achieving economic well-being

The contribution that the council's services for children and young people make to improving outcomes in this area is good. The JAR highlighted one action to be taken over the next six months:

- provide additional support for those with learning difficulties and/or disabilities as they move from children's to adult services.

The council is taking appropriate steps to review and revise the current transition protocol between adult and children's services and intends all children who have learning difficulties and/or disabilities to have a multi-agency transition plan at the age of 14. It will form the basis of a person-centred plan from the age of 16 years. It is encouraging that the Head of Adult Services is the lead officer, demonstrating that the council is committed to providing a well planned transition from children's to adult services. At present all 14 year olds have a transition plan but the focus is educational and does not yet include the whole range of the child's needs. The sharing of information between children and adult services has improved. Council members have agreed that additional resources will be made available to adult services so that the needs identified in person-centred plans can be met. The council is talking with parents and carers to establish what information would help them make decisions, and an open day is planned for parents and young people. The action the council is taking in response to the JAR recommendation is suitable; however, it is unlikely that all 14 year olds will have a multi-agency transition plan within the required timescale.

Service management

The JAR highlighted two actions to be taken over the next six months:

- formalise the governance arrangements for the Children and Young People's Strategic Partnership Board (CYPSPB) and its subgroups, and ensure that all plans and strategies for children identify clearly the contributions, roles and responsibilities of all partners
- ensure that information about services for children and young people is accessible to those who do not have English as their first language.

Membership of the CYPSPB has been reviewed and representation has been increased to include mental health providers, health promotion and a lead elected member. Responsibilities have been clarified. This is an appropriate response to the JAR recommendation.

Work to improve the accessibility of information in different languages is in the early stages of development. The self-assessment states that the council is now considering the options for improving the service. This does not reflect the urgency of the timescale set out in the JAR report.

Data shows that there has been a substantial increase in the rate of vacancies which now stands at 28%; agency staff fill 20% of posts and 8% are unfilled. The impact of this high vacancy rate was discussed and budget limitations were stated as the cause. The JAR report noted that workloads are high and some lower priority work related to children in need is not always carried out promptly. This will need management attention to avoid further negative impact on outcomes for children and young people.

Overall, the council has demonstrated adequate progress in the time available in addressing the joint area review recommendations. While some areas are showing promising signs of improvement, for example, in pupils' achievements, in others progress has been too slow. In addition, much of the action is in the early stages of implementation and it is too soon since the JAR to see the impact on the outcomes for children and young people. There have also been some areas, for example core assessments, which were not subject to JAR recommendations where performance has deteriorated significantly. Hillingdon's capacity to further improve its services for children and young people is adequate.

Yours sincerely



FLO HADLEY

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JONATHAN PHILLIPS

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