Joint area review

London Borough of Haringey Children’s Services Authority Area

Better education and care

Review of services for children and young people

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

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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 10 inspectors from the Office for Standards in Education (Ofsted), the Commission for Social Care Inspection (CSCI), the Healthcare Commission (CHAI), the Adult Learning Inspectorate (ALI) and the Audit Commission. The review was undertaken according to the requirements of the Framework for the inspection of children’s services.

2. The review was linked to the contemporaneous corporate assessment of the local council by the Audit Commission and its findings are represented in the relevant part of the corporate assessment report. It also drew on the findings of the contemporaneous inspections of the youth service and the youth offending service (YOS).

3. This review describes the outcomes achieved by children and young people growing up in the Haringey area and evaluates the way local services, taken together, contribute to their well-being. Joint area reviews focus on the extent to which children and young people are healthy, safe, enjoy and achieve, make a positive contribution and are well prepared to secure economic well-being.

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

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

- self-assessment undertaken by local public service providers
- a survey of children and young people
- performance data
- the findings of the contemporaneous inspection of the youth service
- planning documents
- information from the inspection of local settings, such as schools and day care provision
- evidence gathered during the earlier youth offending service inspection; and
- briefings from staff within inspectorates, commissions and other public bodies in contact with local providers.
6. The second stage included inspection fieldwork. This included studies of how far local services have improved outcomes for a small sample of children and young people, some of whom have the most complex needs, and a study of provision in the West Green and Northumberland Park neighbourhoods in Haringey. 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. Haringey is an ethnically diverse outer-London borough situated to the north of central London. Of its population of 224,000 people, nearly half come from minority ethnic backgrounds and around one quarter are under the age of 20. The population has grown by 8.6% since 1991 and is projected to grow by a further 5.4% by 2016 to 233,125. The population has high turnover and includes a significant number of refugees and asylum seekers. Over 160 languages are spoken by children and young people in the borough.

8. Long-term unemployment is a serious issue for the borough; in October 2005, 7.8% of Haringey residents were claiming job seeker’s allowance, compared to 4.6% in London as a whole and 3.2% nationally. Northumberland Park ward has the highest unemployment rate out of all London wards at 18.8%. It is estimated that 31% of households in Haringey are living in unsuitable accommodation. The borough has high levels of crime, although this has reduced overall, in contrast to the London trend.

9. There are approximately 55,600 children and young people under the age of 20 living in the borough. Of these, 204 are on the child protection register, 723 are young carers and 335 are unaccompanied asylum seekers, of whom 87 are in the care of the council. 377 children and young people are registered with the youth offending service and 484 children and young people are looked after by the council, 61% of whom are placed outside the Haringey’s borders and 23% of whom are in placements that are more than 20 miles away.

10. The Haringey Strategic Partnership was set up formally in April 2002. The Children’s and Young People’s Partnership Board, established in 2004, is one of its five partnership theme boards. The director of the children’s service took up post in April 2005 when the executive member for children and young people was also appointed. The partnership includes the Metropolitan Police, the Haringey Primary Care Trust (PCT), the community and the voluntary sectors, the North London Learning and Skills Council (LSC), Connexions and the College of North East London (CONEL). The Children and Young People’s Plan ‘Changing Lives’ was published in April 2006, building on a comprehensive needs analysis document ‘Knowing our children and young people – planning
for their futures' and extensive consultation with young people, partners and stakeholders throughout 2005. The Partnership Board draws on the views of the wider community through the partnership forum which meets three times a year. Its main role is to monitor the progress of the CYPP. The Local Safeguarding Children Board (LSCB) was established in 2005. Haringey is in the process of setting up three area-based children's networks which will bring together a range of agencies working with children and young people to deliver better outcomes.

11. Primary care for children in Haringey is provided by the Haringey Primary Care Trust. North Middlesex University Hospital (NMUH) NHS Trust is the main provider of acute health services, Great Ormond Street at NMUH for paediatrics and the Whittington NHS Trust for acute and paediatrics. Children's mental health services are provided by the Barnet, Enfield and Haringey Mental Health NHS Trust. With the exception of the ambulance service, the trusts providing health services for the children of Haringey fall within the North Central London Strategic Health Authority.

12. Haringey has 63 primary (including infant and junior) schools, 10 secondary schools, one City Academy, four special schools and a pupil support centre. Ten children’s centres are established with a further eight planned for 2008. North London LSC works closely with the local authority, the college, training providers, and schools in addressing the 14-19 strategy. Post-16 education and training is provided by CONEL, and five work-based training providers. Education to Employment provision is managed by the North London consortium, which controls 32 places within Haringey and around 600 places with providers outside Haringey. Adult and community learning including family learning is provided by the local authority.

Summary Report

Outcomes for children and young people

13. Outcomes for children and young people in Haringey are adequate and improving. Children and young people are generally safe. Outcomes in Haringey have improved measurably in the last five years, in most cases in line with national trends, and in many cases at a faster rate than nationally and in similar authorities. This progress reflects the improving quality of services and the collective will across the council and its partners to raise standards in all areas. Many outcomes are now in line with those in comparator local authorities, although often remain below national outcomes. Health outcomes have improved overall; these include breastfeeding rates and the oral health of children and young people, and there has been a reduction in teenage conception rates. Most children report that they feel safe in school and in their local area, though less so in some parts of the borough. Effective multi-agency working reduces the risks for many children on the child protection register, though there are delays in addressing some children’s needs, including potential child protection concerns. Educational outcomes, previously unsatisfactory,
have improved across the board. Children make particularly good progress between the ages of 11 and 16, though that between the ages of 7 and 11 it is slower. Outcomes are now adequate with some notable successes, including the proportion of young people who gain five good GCSEs and advanced-level qualifications, where standards rose substantially between 2001 and 2005. Young people from Black and minority ethnic groups and those with English as an additional language make good progress; standards for Turkish and Caribbean students have improved significantly. Outcomes for looked after children have improved and a high proportion are in education, training or employment. However, when the five A*-C GCSEs include English and mathematics, the rate of improvement, while in line with that nationally, has not yet closed the gap; similarly, despite steady improvement, a high proportion of young people continue to leave school with no qualifications. The number of young people remaining in education, employment or training after the age of 16 has increased at a faster rate than nationally, though all partners acknowledge that this figure is still too low. Attendance in the majority of schools has improved rapidly overall in the last two years but the level of unauthorised absences remains too high. Although crime figures remain high, there has been a reduction in youth crime, in contrast to the trend across London, and also a significant drop in the number of young people who re-offend.

The impact of local services

Being healthy

14. The work of all local services in securing the health of children and young people is good.

15. The contribution of local services to keeping children and young people in Haringey healthy is good and partnership working between agencies working within and outside the borough is also good. A number of successful multi-agency initiatives on parenting, sexual health, healthy eating, physical activities and emotional well-being are improving health outcomes for children and young people. Specific health promotion activities successfully target hard-to-reach groups such as Travellers and minority ethnic groups. Although some health indicators are relatively poor compared with national averages, conception rates among teenagers and infant mortality rates have declined. Local health economy partners have plans in place to address these issues, with some interventions already making a positive impact. These include the '4YP' mobile sexual health advice and support service, which is improving access for hard-to-reach young people to sexual health services, and the programme in schools to monitor childhood obesity. The oral health of children and young people is good and is supported by the innovative Tiny Teeth programme. There is good access to child and adolescent mental health services (CAMHS) for initial assessment and specialist cases, and significant additional resources are being deployed to ensure good and responsive service provision for vulnerable children and young people. However, CAMHS for young people who offend are
unsatisfactory. The health needs of looked after children, including those placed out of borough, are well met. The health needs of children with learning difficulties and/or disabilities are addressed well; they receive coordinated multidisciplinary healthcare services and protocols are in place to ensure the smooth hand over of clinical care to adult health services for children and young people with complex medical needs. However, there is a long delay in accessing occupational therapy services.

**Staying safe**

16. **The work of all local services in keeping children and young people safe is adequate.**

17. There is much good activity designed to improve safety within the community, including a strong corporate strategy on tackling domestic violence and a good range of initiatives to reduce bullying. Although most children surveyed report that they feel safe at school and in the local area, some children and young people report feeling very unsafe in some parts of the borough, which is, in part, a perception and, in part, reflects the reality of the high number of young people who are victims of crime in Haringey. Child protection work is generally of an adequate standard. Effective multi-agency working has supported good and sustained improvements in practice and management since 2001 when it was poor. However, there are delays in addressing some children’s needs, including potential child protection concerns, and inconsistencies in applying national guidance on sharing information. High levels of staff turnover, caused by difficulties in recruiting permanent staff, have led to a lack of continuity in the management of some cases. The LSCB has established good ownership of the wider safeguarding agenda.

18. There is a good range of support services, including respite and leisure, for children with learning difficulties and/or disabilities. While arrangements for transition planning have improved, there remain delays in the handover of responsibility to adult services, and care packages to support young people when they leave school are not identified sufficiently early. Plans to develop integrated services for children with learning difficulties and/or disabilities are in the early stages. Services for looked after children are generally good and strategies to increase the proportion in local placements are having a positive impact.

**Enjoying and achieving**

19. **The work of all local services in helping children and young people to enjoy their education and recreation and to achieve well is good.**

20. Strong and focused leadership, together with effective partnership with local and national agencies and providers, has led to substantial and sustained improvements in the quality of educational and leisure provision for children and young people in Haringey. Support for parents and carers is good and that
for early years settings has improved and is having a positive impact on the quality of provision. Effective school improvement strategies are continuing to raise standards and achievement, including that of minority ethnic groups and looked after children. Although achievement overall is adequate, improvement between 2001 and 2005 has been at a faster rate than nationally at most key stages, and young people make particularly good progress between the ages of 11 and 16. In 75% of primary schools, children now make the progress that they should by age 11; high-quality performance data is used increasingly effectively to target resources and intensive support in those schools where achievement is less secure, for example through the Haringey Key Stage 2 targeted pupils initiative, introduced in April 2005.

21. Attendance is monitored closely by the local authority and the information collected is now being used more effectively to set targets and provide focused challenge; pupil attendance has improved rapidly overall in the last two years in almost all primary schools and in some secondary schools, although it is acknowledged that further improvements are necessary, including the attendance of looked after children and young people. Robust systems are in place to track the whereabouts of the mobile school population. While mid-year admissions to secondary schools are high, the number of pupils waiting for a place has reduced, though the time they wait remains long. Clear policies and procedures are in place to assess the quality of alternative education provision being undertaken by an increasing number of young people. Support for behaviour is effective. Permanent exclusion rates are low in both primary and secondary schools and fixed-term exclusions are being reduced. Support for looked after children’s education has improved and is now good.

22. Most children and young people can access an appropriate range of recreational and leisure activities within the borough, including music, creative and sports activities and cultural and language support through the supplementary schools. However, provision for primary-aged children and those with learning difficulties and/or disabilities is more limited, and the youth service is failing to provide a sufficient range of voluntary learning opportunities to enough young people.

Making a positive contribution

23. The work of all local services in helping children and young people to contribute to society is good.

24. Most children and young people are supported well in developing emotionally and socially; support for children and young people in managing change and responding to challenge in their lives is good and that for care leavers and young carers is often very good. There is a high commitment across the partnership to the involvement of children and young people from all communities in the decisions that affect them. Children and young people have contributed to high-profile consultation events, for example on the CYPP and community safety, to the LSCB, as well as to local consultation through school
councils and youth forums and their views have informed the development of services. However this strategic consultation with children and young people is not yet embedded across all aspects of the council’s work. This is recognised. The young people’s participation strategy, currently in draft, reflects the wide range of activities involving young people in Haringey and is central to the future work of the children’s service.

25. The recent establishment of the Haringey youth council supports representation on a central forum of the views of young people from all secondary schools, youth projects and a diverse range of youth and voluntary groups, though there is, as yet, no equivalent forum for primary-aged children. There are examples of good strategies to involve fully children and young people with learning difficulties and disabilities in contributing their views to key decisions that concern them, but this good practice is not applied across all settings. High numbers of looked after children contribute to their reviews but more creative ways could be found to encourage greater participation of those children who choose not to attend consultation meetings, including greater use of the advocacy service for younger children.

26. A highly effective partnership between the council, the Metropolitan Police, schools and other agencies has led to a number of well-structured and well-resourced projects to tackle anti-social behaviour and crime across the borough, including the Safer Schools project. A wide variety of prevention activities and strategies is available throughout the borough to address the needs of children and young people at risk of offending; these include the youth inclusion panel, antisocial behaviour teams and creative projects for young people at risk of offending. These interventions have contributed to a reduction in antisocial behaviour, few antisocial behaviour orders (ASBOs) and few cases of re-offending. The work of the YOS with children and young people in the community is adequate overall.

Achieving economic well-being

27. The work of all local services in helping children and young people achieve economic well-being is adequate.

28. The majority of parents and carers have adequate access to integrated childcare services although in some areas, particularly where there are high rates of worklessness, parents who want to participate in training find it hard to access flexible or subsidised day care. Strategies to help young people 11-19 to prepare for working life are adequate. Almost all Key Stage 4 pupils gain useful work-related experience. Partner organisations collaborate well to continue to reduce the number of young people who are not in education, employment or training and those whose whereabouts after leaving school is unknown. Careers advice and guidance for most young people, including those with learning difficulties and/or disabilities, is adequate overall. Partnership working between the council, schools, CONEL, Connexions and the LSC is increasingly effective in providing access to a full range of provision for 14-19 year olds. However, the
partnership with work-based providers remains underdeveloped and the 14-19 offer does not provide a sufficient range of work-based provision or courses below level 1 to improve the employment prospects of those young people who leave school without basic literacy and numeracy skills.

29. The support for the transition of looked after children and young people into adult life and learning or employment is good. Enhanced curriculum activities have made a significant impact on the motivation and social engagement of these young people and housing arrangements for care leavers are good. CONEL and schools have collaborated well to broaden the range of provision for young people with learning difficulties and/or disabilities, particularly those from special schools, though there is an insufficient range of post-16 courses available for those young people with personal care or nursing needs once they have reached the age of 19. This applies, too, to the small number of young people with profound and multiple learning needs who do not remain in school after the age of 16. Transition planning has improved, but only 75% of young people with disabilities who are aged over 14 have transition plans, and existing transition plans are not of a consistently high quality. The council has been successful in starting to improve the housing supply and internal decent homes targets have been met. Nevertheless, levels of homelessness remain high.

30. The management of services for children and young people is good. The capacity of council services and of local services overall to improve further is also good.

31. The CYPP sets out an ambitious vision for improving outcomes for children and young people. Needs have been well analysed and gaps and underperformance in services identified across the five Every Child Matters outcomes. The council and its partners' assessment of their own performance is accurate in most areas. The youth service is, however, inadequate; weaknesses were identified by the council and actions to strengthen management and practice have recently been put in place. Ambition and priorities are shared and owned by partners and some resources have been appropriately redirected to support changing priorities. The director of the children's service and the lead member for children and young people provide good leadership, supported by many examples of effective management at all levels. The CYPPB is well established and is working well towards establishing Children's Trust arrangements. Joint commissioning, workforce planning and performance management by the partnership are developing. A good overarching business plan supports the delivery of the CYPP; service plans are in place but not all targets are sufficiently outcome-focused or specifically resourced. Performance management in the children's service is good; elected members are closely involved through scrutiny and the regular briefing meetings between the lead and opposition member and senior officers. Knowledge of performance and information from the analysis of complaints, including from young people, is used to improve services. The contribution of children and young people to the evaluation of services that concern them is developing in some areas.
32. The capacity of the council and its partners to improve further is good. This judgement is based on the partnership’s clarity about what needs to be done, the strong leadership and ambition, good performance management and the track record of improvement in key service areas.

**Grades**

Grades awarded:
4: excellent/outstanding; 3: good; 2: adequate; 1: inadequate

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Recommendations

For immediate action

- Take appropriate action to clear the backlog of cases within the referral and assessment services

For action over the next six months

- Ensure that the work of the referral and assessment services is consistent so that all children and young people are assessed in a timely way in order that their needs can be met.
- Ensure that young people who offend have prompt access to comprehensive CAMHS.
- Improve access to occupational therapy services.
- Improve the recruitment and retention of social workers in all teams.
- Secure the momentum of improvement in standards and achievement at Key Stage 2.
- Increase the number of primary and secondary schools in which attendance is in line with the national average and reduce further the rate of absences of looked after children from school.
- Promote more creative ways for children and young people looked after and those with learning difficulties and disabilities to contribute to their reviews and other key decisions, including promoting the use of the advocacy service by younger children.
- Ensure that children and young people are involved systematically in the strategic planning and evaluation of services that concern them.
- Improve the provision for young people post-19 with complex learning difficulties and/or disabilities.
- Ensure that all service and project plans contain outcome-focused targets and that lead responsibilities and resources are clearly identified.
- Improve the contribution of the youth service to voluntary learning provision for children and young people, particularly for those from vulnerable and hard to reach groups.
For action in the longer term

- Improve transition arrangements for children and young people with learning difficulties and/or disabilities, including the handover to adult care services.

- Support access to childcare provision for parents/carers with low incomes to improve their access to training and employment.

Main Report

Outcomes for children and young people

33. Outcomes for children and young people in Haringey are adequate and improving. Children and young people are generally safe. Outcomes in Haringey have improved measurably in the last five years, in most cases in line with national trends, and in many cases at a faster rate than nationally and in similar authorities. This progress reflects the improving quality of services and the collective will across the council and its partners to raise standards in all areas. Many outcomes are now in line with those in comparator local authorities although often remain below national outcomes.

34. Health outcomes have improved overall. These include breastfeeding rates and the oral health of children and young people, and there has been a reduction in teenage conception rates. Most children report that they feel safe in school and in their local area though less so in some parts of the borough; effective multi-agency working reduces the risks for many children on the child protection register, though there are delays in addressing some children’s needs, including potential child protection concerns. Educational outcomes, previously unsatisfactory, have improved across the board. Children make particularly good progress between the ages of 11 and 16, though that between the ages of 7 and 11 is slower. Outcomes are now adequate with some notable successes, including the proportion of young people who gain five good GCSEs and advanced-level qualifications, where standards rose substantially between 2001 and 2005. Young people from Black and minority ethnic groups and those with English as an additional language make good progress; standards for Turkish and Caribbean students have improved significantly. Outcomes for looked after children have improved and a high proportion are in education, training or employment. However, when the five A*-C GCSEs include English and mathematics the rate of improvement, while in line with that nationally, has not yet closed the gap; similarly, despite steady improvement, a high proportion of young people continue to leave school with no qualifications. The number of young people remaining in education, employment or training after the age of 16 has increased at a faster rate than nationally, though all partners acknowledge that this figure is still too low. Attendance in the majority of schools has improved rapidly overall in the last two years but the level of unauthorised absences remains too high. Although crime figures remain high, there has been a reduction in youth crime, in contrast to the trend across
London, and also a significant drop in the number of young people who re-offend.

35. **Children and young people are generally healthy.** Breast-feeding uptake rates are good and improving compared with national statistics but are below those in similar local authorities; the proportion of babies born in Haringey with low birth weight is in line with that nationally. The oral health of children and young people is good and improving. The uptake of immunisations is lower than the national average but improving, and access to primary care services is good. Teenage pregnancy has declined over the last two years but is still higher than the national average, and there is a high rate of chlamydia infections amongst the under-16s and those between 16 and 19 years old. Waiting times for assessment and treatment for CAMHS are generally low as is the number of children and young people admitted for substance misuse. Looked after children receive dedicated health service provision and support including a designated nurse and CAMHS. Early years settings offer well-coordinated and effective multi-agency services, resulting in positive outcomes for children with complex physical disabilities. Access to occupational therapy services is poor, but to other therapy services it is generally good.

36. **Children and young people are generally safe.** Most children surveyed report that they feel safe at school and in the local area. However, some children and young people report feeling very unsafe in some areas of the borough and there is a high percentage of young people who are victims of crime in Haringey. All children on the child protection register have an allocated social worker and are reviewed within timescales. However, there are delays in addressing some children's needs, including some child protection concerns. A higher proportion of the child population is looked after compared to similar authorities, although this is reducing steadily; a good proportion of looked after children and young people are in effective and stable placements. The number of children adopted from care is increasing, although remains below that in similar authorities. Strategies to increase the numbers of children placed locally are beginning to have an impact although the numbers of children in residential placements remains higher than in similar authorities. There has been a steady reduction in the rate of serious road accidents over the past five years, though this is at a slower rate than the national trend.

37. **Children and young people achieve adequately.** Education standards have improved significantly between 2001 and 2005 at all key stages, although they are well below the national average and below that of statistical neighbours in almost all key stages. The fastest rate of improvement has been in the percentage of pupils, including those from minority ethnic groups, aged 16 attaining five A*-C grades at GCSE. However, when the five A*-C GCSEs include English and mathematics, the rate of improvement is very much lower. Despite steady improvement, a high proportion of young people continue to leave school with no qualifications. The gap in achievement between those in the more prosperous parts of borough and those in more disadvantaged areas is closing. The achievement of most very young children is adequate. Standards
at Key Stage 1 have risen rapidly and are in line with those in similar authorities. The pace of improvement in Key Stages 2 and 3 has been more variable but has been better than in similar authorities or the national average. Pupils make satisfactory or better progress in most primary schools but progress is less than satisfactory in just over a quarter of schools at Key Stage 2. Pupils make good progress between Key Stages 2 and 4. The attainment of looked after children is improving; they make good progress at Key Stages 2 and 3 and they are gaining more qualifications when they are 16. There is a strong commitment to inclusion in Haringey and children and young people with learning difficulties and disabilities make satisfactory or better progress in almost all schools. Behaviour is good in most schools. Attendance has improved rapidly over the last two years in almost all primary schools and most secondary schools; however, unauthorised absence remains consistently high in both primary and secondary schools. Exclusions are satisfactory overall: the level of permanent exclusion is low and the high level of fixed-term exclusions is being reduced.

38. **Children and young people have a good range of opportunities to make decisions and take personal responsibility and many make a good contribution to their communities.**

39. Many children and young people make a positive contribution locally through school councils and youth forums and are increasingly contributing through borough-wide events to decisions that affect them; secondary-aged young people from all these groups are now represented on the recently established Haringey youth council. Children and young people with learning difficulties and disabilities are encouraged to participate in decisions that affect them and also to contribute to wider consultations across the borough. Children and young people in the care of the local authority are making an increasing contribution to decisions that affect them. In a significant majority of schools, provision for personal and social development is good and in some schools initiatives to support young people have led to improved behaviour. Although youth crime overall has fallen, 20% of crimes in Haringey are committed by young people; this represents one of the highest numbers of young people accused of crime in London and 55% of victims of crime in Haringey are children and young people. However, there has been a steady fall in final warnings and convictions of looked after children and young people. Offending rates for all young people are now comparable to those in similar local authorities; re-offending rates in 2005/6 were low.

40. **Children and young people are able to achieve economic well-being and are prepared adequately for working life.**

41. Outcomes for 16-18 year olds have improved over the last few years. The proportion of young people who gain five good GCSEs and advanced level qualifications has risen. Significantly more young people from Black and minority ethnic groups now achieve successfully at age 16. Overall success rates for young people on level 1 and level 3 courses have risen and are now in
line with the national average. Success rates on level 2 courses and full framework achievement of work-based provision remain significantly below the national averages. Almost all Key Stage 4 pupils gain work-related experience and the participation rates of 16-18 year olds in education and training has increased, catching up with those in similar boroughs. Since 2004, the number of young people who are not in education, employment or training and the number of 16-18 year olds whose whereabouts after leaving school is unknown has reduced, but remains too high. The participation rate into higher education has increased and is adequate.

42. Many looked after young people are engaged in education or training with a good proportion progressing to higher education. Their achievement rates at GCSE are also improving. The percentage of pupils with learning difficulties and/or disabilities gaining qualifications or achieving their personal targets has increased and is adequate. The proportion of care leavers judged to be living in suitable accommodation is very good.

The impact of local services

Being healthy

43. The work of all local services in securing the health of children and young people is good.

44. The combined effort of local services in Haringey in supporting parents and carers in keeping their children healthy is good. This is reflected in, for example, very good access to maternity and health promotion services, including health visiting services, from a range of settings before and during antenatal periods. Well-received services and programmes include the Mellow Parenting programme, which helps to improve mother and child interaction, child behavioural problems, mother’s well-being, effectiveness and confidence in parenting and the child’s language and non-verbal abilities. Breastfeeding rates are good and improving. The overall smoking service targets are in line with national average in 2006, an improvement from the 2004/05 position when a high proportion of expectant mothers were smoking. These improvements have been supported by coordinated multi-agency partnership working, including health visitors’ and midwives’ work with expectant and postnatal mothers. The number of babies born with a low birth weight is low. Specific health promotion programmes target hard-to-reach groups, including Travellers and minority ethnic groups through a range of activities, including healthy cooking for Somalian women and programmes for Turkish and Albanian groups in different settings, including children centres. Immunisation uptake rates have improved slightly, with 87% for primary and 72% for MMR but still falls far short of that required (95%) to protect children from outbreaks of infectious diseases.
45. Healthy lifestyles for children and young people are actively promoted through a range of coordinated and effective multi-agency services provided in different settings; for example, early years settings provide drop-in services, healthy breakfasts, meals and day care on site. The youth service promotes active lifestyles that are sensitive to culture, gender and ability although it does not extend fully young people’s understanding of healthy lifestyles. The rollout of the healthy schools programme in schools across Haringey is very good. Healthy lifestyles through healthy eating and physical activities are promoted in almost all schools inspected by Ofsted in the last three years. Although conception rates among teenagers in Haringey have declined over the last two years, teenage pregnancy rates are still higher than national and comparator group averages. Sexual health advice and support provision in schools and different community settings is good. The 4YP, a targeted mobile sexual health advice and support service for young people, is very successful in improving access to sexual health services for young people who are traditionally hard to reach. Chlamydia diagnosis among 16-19 year olds is high; community-based chlamydia screening service is being developed but this has yet to make a positive impact. The Health Survey for England 2002 suggests that 3,280 boys and 3,215 girls are overweight in Haringey, two thirds of whom are likely to be obese. Obesity data is being collected and analysed in primary schools in order to develop strategies to reduce obesity in children and young people.

46. Primary and secondary care service provision is good, with families and their children having good access to, and contact with, nursing and medical professionals. Through the partnership with Great Ormond Street Hospital Children NHS Trust, an integrated model of care is being developed across community and health services. This promotes uptake of universal and targeted health services and continuity of care for children and young people who are ill, particularly the vulnerable and those with complex medical needs. Acute inpatient provision for children in North Middlesex University Hospital NHS Trust is good and 12.6% of nursing staff have a paediatric nursing qualification, a higher proportion than the England average of 5.6%. The oral health of children and young people across the borough is good and improving at a faster rate through, for example, the Tiny Teeth Programme in West Green and Chestnuts. This innovative programme has led to a 67% increase in dental registrations for young children, better clinical environments, more child-friendly practice and improved knowledge and greater enthusiasm for prevention among practice staff and dentists. The council is working very well with partners in identifying and minimising environmental health risks to children and young people, including traffic calming measures on roads, involvement in the national traffic club project in road safety for children and in raising awareness; the number of road traffic accidents has reduced overall, with identified peaks in the summer when children are not at school. Although the infant mortality rate has decreased it is still higher than London and England averages; the council and its partners have established a plan to target year-on-year reduction.
47. CAMHS are generally good. CAMHS needs assessments to identify unmet mental health needs of children and young people have now been completed and additional resources have been deployed to improve access further and bring down waiting times. In the last year the waiting list for non-specialist cases reduced from 18 months to 3 months and families with children under five are being fast tracked and seen within a month following referral from a health visitor, GP or social worker. However, a few stakeholders report delays in accessing treatment following referral. The adolescent outreach service has been very successful in reducing the length of inpatient (tier 4) stay from 72 to 29 days. Front-line staff have been trained to appropriately identify, refer and support those with mild mental health problems, including emotional distress and postnatal depression. Primary care staff, including GPs receive support and advice from primary care mental health workers, which has led to improved access and clarity on referrals. Access to specialist CAMHS for children and young people who offend was good in 2004/05 but inconsistent in relation to the timeliness of assessments following referrals from the youth offending service; clinical psychology service provision for young offenders is unsatisfactory.

48. Healthcare service provision for looked after children is well coordinated and performance on immunisations, health screening and dental checks is good. Health assessments are supported by a strong focus on health improvement and there is good interagency work to support the health of looked after children, including those placed out of borough. Looked after children are supported to access mainstream and specialist services and care leavers are encouraged to adopt healthy lifestyles. Looked after children, their carers and care leavers are well supported by a flexible and responsive CAMHS service, though in a few cases there is a delay in referring looked after children to CAMHS. More focus is needed on how looked after children healthcare plans are reviewed.

49. The health needs of children and young people with learning difficulties and/or disabilities are addressed well. They receive coordinated multi-disciplinary healthcare services from the child development centre in the early years. Clinical provision is well coordinated to support children with more complex needs in special schools and there is good multi-agency working; however, plans to integrate services with the local authority are at an early stage. The community nursing team provides good support for inclusion in mainstream schools, community and respite provision. Children and young people with learning difficulties and disabilities can access mainstream CAMHS provision but there is insufficient provision to meet more specialist needs. There are protocols in place to ensure the smooth handover of clinical care to adult health services. The provision of and access to occupational therapy services is poor.
Staying safe

50. **The work of all local services in keeping children and young people safe is adequate.**

51. Children and their families are provided with a good range of information, support and guidance on key risks to children’s safety through the school curriculum, the universal health visitor programme and the multi-agency work on road safety training. Leaflets published recently by the LSCB are informative and are widely distributed across Haringey.

52. The national target for the reduction of road accidents has been met ahead of schedule. There is much good activity designed to improve safety within the community. This includes a strong corporate strategy on tackling domestic violence, a good range of initiatives to reduce bullying including the Safer Schools initiative, and a new development, through the LSCB, of focusing on hotspots and tackling crime within those areas. Although most children surveyed report that they feel safe at school and in the local area, some children and young people report feeling very unsafe in some areas of the borough, which is, in part, a perception and, in part, reflects the reality of the high number of young people who are victims of crime in Haringey.

53. Child protection work is generally of a satisfactory standard; most performance indicators are now in line with those in comparator authorities. This reflects good and sustained improvements in practice and management since 2001 when practice was poor. All children on the child protection register have an allocated social worker and cases are reviewed within timescales. Effective multi-agency working has supported a managed reduction in numbers on the child protection register. Staff are well managed and supported to carry out their roles, and improvement in the quality of social work practice in care proceedings has been recognised by local courts. General and specialist child protection training for all relevant staff, including voluntary sector partners is very good, is valued by staff and improves the quality of child protection work.

54. The majority of assessments of need are undertaken in a timely way. In recent years, a high proportion of initial assessments have been made in response to referrals, reflecting an understandably cautious approach to protecting children. However, cases are not always prioritised sufficiently well or consistently by the referral and assessment services; there is variation in practice between the two geographically-based teams, including the application of national guidance on sharing information. There are delays in addressing some children’s needs, including potential child protection concerns; in some of the individual cases sampled during the review, standard assessments had not been carried out, making planning difficult and resulting in delays for children and young people. The turnover of social work staff is high, resulting in lack of continuity in managing cases. The electronic recording system, Framework I, has the potential to provide a good overview of practice but there continue to
be problems in embedding the system and there is as yet insufficient management scrutiny of electronic files.

55. The LSCB, which was established well in advance of the national deadline, works to the pan-London child protection procedures. It has established an ambitious programme and good ownership of the wider safeguarding agenda with procedures in place to review serious incidents. A newly integrated child protection unit, composed of child protection advisers from social care and education, supports the LSCB and multi-agency working. Links between the LSCB and the voluntary sector are good and developing further. The LSCB has begun to take forward the ‘Staying Safe’ priorities within the Children and Young People’s Strategic Plan and to make an impact on the wider safeguarding agenda, for example in relation to Project Violet, a Metropolitan Police-led operation to tackle faith-based abuse. Initiatives, including some undertaken through the LSCB, are not always designed so that progress towards targets can be measured and actions amended to achieve maximum impact.

56. All services comply with the requirement to detect and deter people who are unsuitable to work with children. The LSCB has recently completed an audit of the recruitment practices within Haringey to ensure a consistent approach to safeguarding in recruitment and encourage best practice among agencies. The multi-agency public protection panel takes appropriate action to keep children safe from adults who may present a risk to them.

57. The range of family support services is adequate, including some good targeted services to avoid children being looked after. Plans to improve the coordination of services through the development of a family support strategy and more early intervention services as a key component of the children’s networks will strengthen provision. Individual agency procedures to locate children missing from care, home and school are good and there needs to be a continued concentration on the coordination of work to track children and young people within a highly transient population.

58. Services for looked after children are good overall. There are good systems in place for managing the use of out-of-borough placements and for monitoring their effectiveness. This, combined with a creative fostering recruitment strategy, has resulted in an increase in children placed locally. There are examples of effective social work practice with looked after children in planning for their futures and in improving outcomes for them, but high levels of staff turnover have led to a lack of continuity for some. Most of the placements for children seen during the review were good. Most looked after children’s care plans are reviewed in line with regulations, but there is insufficient focus on reviewing healthcare plans as part of this process.

59. There are effective strategies for promoting adoption and kinship placements. Delays in the court process have resulted in a significant fall in the numbers of children currently placed for adoption, which may lead to fewer
adoption orders this year; this is not due to a lack of impetus from the local authority.

60. Parents of children with learning difficulties and/or disabilities receive good support in the early years and they find the home intervention service (HINTS) team very helpful. There is a good range of respite, leisure and out-of-school activities, and joint work with health services promotes inclusion of children with health needs in this provision. Take-up of direct payments is adequate. However, there is insufficient funding to meet individual assessed needs and there are concerns about the sustainability of funding for voluntary sector provision.

61. There are ambitious plans to develop services for disabled children and to integrate these services by 2008, but current arrangements for integrated assessments and care planning are not consistent, particularly after the early years; as a result parents have to repeat their story to different agencies. Arrangements for transition planning including person-centred planning have improved but there remain delays in the hand over of responsibility to adult services. Care packages to support young people when they leave school are not identified early enough.

**Enjoying and achieving**

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

63. Parents and carers receive good support from Haringey borough council and its statutory and voluntary partners to help children and young people of all ages enjoy and achieve. Good partnership work between Sure Start, the early years service, the library service and adult learning service enables parents of very young children, including those with learning difficulties and/or disabilities to access a wide range of support which they value. This includes structured learning activities for children and parents, regular drop-in sessions and access to free advice. In one children's centre, parents and their children are taken to local amenities such as the library where further activities to promote family learning are on offer, including focused activities for minority ethnic families. In addition the adult learning service works in partnership with the children's centre to deliver a one-year course targeted at parents from two local primary schools, which enables parents to support their children with their homework as well as developing their own literacy and numeracy skills.

64. Weaknesses in partnership with, and support for, early years education have been addressed successfully. A comprehensive early years strategy is in place, and support to improve the quality of early years provision has been effective. Provision is satisfactory overall and is improving. Standards at the Foundation Stage have been consistently below the national average but recent
inspection reports show they are good in most primary schools and satisfactory in nearly all other settings.

65. Focused leadership and effective school improvement strategies have had a positive effect on the rate of improvement in standards at all key stages and particularly at Key Stages 1 and 4. However, the authority and its partners have been slower in securing the momentum of improvement in standards and achievement at Key Stage 2 and in ensuring that young people aged 16 leave school suitably qualified and with appropriate literacy and numeracy skills. Children are making the progress they should in 75% of primary schools; the local authority has focused its support and challenge more sharply in those schools where achievement is less secure, including through the Haringey targeted pupils initiative (TPI), introduced in April 2005 in nine primary schools. Processes for monitoring the performance of schools are informed by a comprehensive analysis of data and regular reviews involving the partners who are supporting the school to improve. Support to improve the performance of schools identified with weaknesses is good overall; no schools have been identified by Ofsted as requiring special measures although three are in a category of concern.

66. An appropriate range of advice about admission to schools is available to parents. Planning for school places is a high priority as school rolls are rising in both phases. Good consultation has been undertaken with headteachers on the Building Schools for the Future programme and on the planned changes to secondary school rolls linked to the opening of a new secondary school in September 2010. The high mobility of pupils in the borough results in a significant number of mid-year admissions to secondary schools. Good materials have been developed to help children and their parents who have recently arrived in this country understand the education system. Successful programmes have been devised with the CONEL for young people from abroad aged 15 and 16, which have resulted in a high level of progression into further education and training. Improved communication with schools about vacancy levels has significantly reduced the number of children and young people who are waiting for a school place. Even so, the average time they wait, though reduced, is still long, during which time they receive a limited amount of structured educational provision. The admission of some unaccompanied asylum seeker children to school has been delayed because of a lack of understanding of the correct admission procedures.

67. Pupils' attendance has improved but remains below the national average. The monitoring of attendance is thorough and primary schools are receiving a more consistent range of provision from the education welfare service. Targeted actions to promote good behaviour and attendance have had a positive impact, particularly in those schools which are part of the behaviour improvement programme (BIP). Robust systems are in place to track the whereabouts of the mobile school population. Nevertheless, attendance remains an area for improvement as recent inspections have judged it to be inadequate in a high proportion of schools. Effective multi-agency preventative action is
resulting in a low level of permanent exclusions from Haringey schools. The level of fixed-term exclusions is high but preliminary figures for 2005/06 indicate that it is falling in both primary and secondary schools. Pupils who are permanently excluded, and those who have fixed-term exclusions from BIP schools, are able to access full-time educational provision in the pupil support centres. The level of re-integration of excluded pupils has improved but partnership work between the youth service and schools to meet the needs of more vulnerable young people is underdeveloped. There are clear processes for monitoring the provision for children and young people who are educated at home. The number of young people undertaking alternative education provision has increased and the quality assurance of this provision has been strengthened through the production of clear policies and procedures for schools and the introduction of systems to monitor the effectiveness of their implementation.

68. The majority of Haringey schools provide a good quality of education. Almost all provide some opportunities for children and young people to take part in out-of-hours learning which includes access to arts, sports and recreational activities. Extended schools and supplementary schools support wider enrichment opportunities and cultural activities. Access to such provision for children and young people with learning difficulties and/or disabilities is only adequate. In addition, children and young people can access a wide range of sports facilities in the borough and there has been an investment in play facilities in the borough’s parks. However, the distribution of play provision is uneven and the play strategy is at an early stage of development and implementation. The opportunities for young people to extend their development through the youth service are limited because too few young people can take advantage of the most exciting projects on offer or gain recognition of their achievement, and the service provides insufficient support for their personal development.

69. Looked after children are well supported in their education. The effective tracking and monitoring of their attainment, progress and attendance has led to creative interventions to support their learning and to provide support for carers. Events to promote their education and celebrate success are organised in partnership with Tottenham Hotspurs Football Club, which was described during the review as the ‘corporate aunt and uncle’ to looked after children. Absences from school, though reducing, remain higher than in comparator authorities. Increasing numbers of looked after children have personal education plans but those seen during the review were of variable quality.

70. There is a strong commitment to inclusion in Haringey and a high proportion of children and young people with learning difficulties and or disabilities attend mainstream schools where they make satisfactory progress. Children and young people with speech and language difficulties have good access to integrated specialist services which help them reach their potential. There is some innovative work with young people with autistic spectrum disorders to support their social skills and understanding of autism.
Making a positive contribution

71. **The work of all local services in helping children and young people to contribute to society is good.**

72. Most children and young people are supported well in developing emotionally and socially, with early years settings and most schools providing good or very good support. Young children and their families receive relevant information through widely available information leaflets and the Haringey website, and early years settings form good relationships with children and their families. Arrangements to support children’s transition between different phases of education are good overall, including information to families on entry to primary school. Support for parents and carers of children with special educational needs is good and children and young people looked after by the borough receive high-quality support as well as opportunities to meet and socialise with other looked after children and to celebrate their achievements.

73. Support for children and young people in managing change and responding to challenge in their lives is good. Support for young children is strong, including the transition from early years settings to primary school. Many schools have set up mentoring and buddying schemes to support younger and newly-arrived children in settling into their new school; some schools run peer mentoring projects and there are good examples of effective leadership of projects by children and young people, for example in the Connexions service. Children and young people looked after by the council are supported well and young carers are empowered through the young carers project to understand the issues they face and to ensure that the professionals across services and agencies listen to them, understand their needs and provide them with appropriate support.

74. There is strong commitment across the partnership to the involvement of children and young people in the decisions that affect them; the development and implementation of the children and young people’s participation strategy, currently in draft, is central to the work of the children’s service. There are many examples of involvement of and consultation with children and young people from all communities in making key decisions and celebrating achievement, for example the Community Languages Academic Excellence awards and African and African Caribbean Achievement Awards held in January 2006 and neighbourhood youth groups developing activities for children and young people in their area. Many of these activities reflect the good partnerships with voluntary and community organisations and reflect the diversity of the population of the borough.

75. Young people in both primary and secondary schools describe the positive impact of the work of their school council, for example on school resources such as interactive whiteboards, on facilities such as the playground or school toilets and on provision such as school meals. In some schools, students also contribute to staff appointments and to fundraising activities. The recent
establishment of the Haringey youth council ensures representation at a central forum of the views of young people from all secondary schools and youth groups, though there is as yet no equivalent forum for primary-aged children. Three high-profile events in the last year have involved children and young people in discussing and shaping plans relating to safer communities and the Children and Young People Plan. In one community, consultation with children and their parents about the future of their playground led to the decision not to close it. The views of children and young people are given a high profile within the council’s strategy, but the longer-term impact of their contribution is not always evident and the involvement of children and young people in strategic consultation is not yet embedded across all aspects of the council’s work. There are examples of good strategies to involve fully children and young people with learning difficulties and/or disabilities in contributing their views to key decisions concerning them using tools tailored to their needs, including electronic voting systems. However this good practice is not applied across all settings.

76. Care leavers and children and young people looked after by the council are generally consulted well about decisions that affect them. High numbers of looked after children contribute in some way to their reviews, but more creative ways could be found to ensure that the views of children who choose not to attend review meetings are represented and responded to. Council members fulfil their corporate parenting role conscientiously through monitoring outcomes for looked after children, visiting children’s homes and attending celebratory events. It is planned to develop further the corporate parenting role of the council through the introduction of a more formal strategy, which includes establishing a forum to meet with looked after children and care leavers, promoting work experience and job opportunities within the council, and involving young people systematically in decisions that affect them. There has been a good range of consultation and participation activities for looked after children and particularly care leavers; this included a well-attended participation event for care leavers. Care leavers have warmly welcomed the recent introduction of the Total Respect project, which will enable senior officers and council members to gain a better understanding of what it feels like to be a looked after child or young person in Haringey. An independent advocacy service is available although recently this has been used predominantly by young people between 16 and 18 years old.

77. Effective partnership across the council, the Metropolitan Police, schools and other agencies has led to a number of well-structured and well-resourced projects to tackle crime, including the Safer Schools programme and project. This programme places one uniformed officer in each secondary school, supports additional interventions in four schools and the pupil referral centre and also facilitates a range of creative projects for young people at risk of offending. It has resulted in improved behaviour in schools, better relationships and communication with the police, and more in-depth local knowledge about young people at risk of offending. Well-targeted support for hotspots, including school buses through Operation Butler has resulted in a
reduction in robberies. Multi-agency antisocial behaviour teams are effective, dealing well with most incidents informally or through the youth inclusion and support panels and well-targeted youth inclusion project, led by the youth service. These interventions have contributed to a reduction in antisocial behaviour, few ASBOs and few cases of re-offending. The YOS is well integrated into the Safer Communities Directorate and provides an increasingly effective service for children and young people and their parents and carers. A wide variety of prevention activities is available throughout the borough to address the needs of children and young people at risk of offending; although youth crime in Haringey remains high, it is falling and good liaison between relevant agencies and services ensures that young people and their families are well supported to prevent them re-offending. However, support for victims of crime within the YOS is underdeveloped.

Achieving economic well-being

78. The work of all local services in helping children and young people achieve economic well-being is adequate.

79. Parents and carers have convenient access to childcare information services, which have expanded significantly in the east of the borough to support the economic well-being of the more deprived communities. There are good examples of well-integrated services including family support, health, legal and financial advice and education courses through the newly established children’s centres. A good range of daycare supports parents and carers who are working or studying, although in some areas, particularly where there are high rates of worklessness, parents who want to participate in training find it harder to access flexible day care and receive financial support. A number of children’s centres have established good links with Jobcentre Plus, though in other areas these links are less well developed.

80. Improved collaboration between CONEL and schools, particularly in the east of the borough, means that an increasing number of young people, including many from special schools benefit from the increased flexibility option or vocational courses in schools and at the college. Most Key Stage 4 pupils gain work-related experience through Haringey Education Business Partnership services or vocational courses in the college such as Young Apprenticeship programmes. Over the last two years the local authority, the Connexions service and other partners have used well the detailed information they collect about young people to reduce significantly the numbers whose whereabouts after leaving school are unknown and the number of those who are not in education, employment or training. They acknowledge that further improvement is needed. The progression rates to higher education have increased to adequate levels.

81. The vision for 14-19 education in Haringey is encapsulated in the 11-19 strategy ‘Bright Futures’. This strategy is supported by the improved partnership between CONEL, Haringey schools, the North London LSC and the local
authority, which has increased the options for 14-19 year olds by improving collaboration between providers and providing access to a broader range of provision. This is already making a difference, and the new sixth form centre, due to open in September 2007, has been designed to provide improved and inclusive post 16 education for young people in the east of the borough. Since 2002, the number of 16-18 year olds in education and training has increased and is now 5% below national averages. Although considerable progress has been made, the curriculum does not yet meet fully the education and training needs of the many young people in the borough who leave school without any qualifications. The partnership with work-based providers is underdeveloped, and the 14-19 offer does not provide a sufficient range of work-based provision or of courses below level 1 to improve the employment prospects of those young people who leave school without basic literacy and numeracy skills.

82. Overall the provision for young people with learning difficulties and/or disabilities is adequate with some good features and is continuing to improve. Well developed links between the special schools and the college are effective in preparing young people with learning difficulties and/or disabilities to progress to full time courses at the college at age 19. However, there is an insufficient range of post 19 courses locally for young people with learning difficulties and/or disabilities, particularly for young people with personal care and/or nursing needs. This applies, too, to the small number of young people with profound and multiple learning needs who do not remain in school after the age of 16. Although multi-agency planning for transition is improving with better interagency working and regular monitoring meetings, only 75% of young people with disabilities who are aged over 14 have transition plans and existing transition plans are not of a consistently high quality.

83. Regeneration projects concentrate on some of the Haringey’s most deprived communities in the east of the borough. Although arrangements are in place to seek the views of the local community and young people in the development strategies and activities, the level of involvement of young people is not consistently high or adequately monitored.

84. The council has been successful in starting to increase the supply of decent housing through securing funding for new units, bringing empty properties back into use and partnership with private and social housing providers; internal decent homes targets have been met. However, while the use of bed and breakfast accommodation for families has reduced, the length of stay in hostels is significantly above the council’s own target. Housing arrangements for care leavers have improved, particularly the quality of supported accommodation. The proportion of care leavers judged by the local authority to be living in suitable accommodation is very good.

85. The council supports well the transition of looked after children and young people into adult life and learning or employment. Well-considered curriculum activities, including the organisation of events and participation in training programmes such as Total Respect, have made a significant impact on the
motivation and social engagement of these young people. These activities contribute effectively to the social and the emotional development of care leavers. The looked after young people remain in education or training at age 16 in similar proportions as Haringey young people in general, with a good proportion progressing to higher education. A structured work-based learning programme provides valuable work-related experience for many of these young people. Multi-agency working is very effective in supporting young people who have substance dependencies, involvement with the justice system, or face social or economical challenges. A dedicated team supports unaccompanied asylum seekers who leave care.

Service management

86. The management of services for children and young people is good. The capacity to improve further is good.

87. The ambitions established by the council and its partners for children and young people in Haringey are good. The CYPP ‘Changing Lives’ links clearly to the Every Child Matters outcomes and is ambitious and challenging. The plan is based on an extensive analysis of shared needs founded on well-presented data and evidence from a range of sources, including a health equity audit. The needs of vulnerable groups are highlighted well and the actions needed to address gaps in service provision reflect the diversity of the community. The council and its partners undertook consultation on the priorities emerging from the needs analysis with a wide range of stakeholders, including specific events for children and young people. This contributed to the development of the priorities contained in the CYPP.

88. Prioritisation to improve outcomes for children and young people is good. The CYPP sets out clearly the 20 priorities for action over the next three years, with expected outcomes. The priorities are understood well by partner and community organisations. The council and its partners demonstrate a well-developed and mature approach to diversity and a specific set of outcomes has been developed in the CYPP to reflect the complex and particular challenges for vulnerable children and young people in Haringey.

89. A good overarching medium-term business plan that takes account of comparative and benchmarking data supports the delivery of the CYPP. Service plans are in place but not all targets are sufficiently outcome-focused or specifically resourced. The CYPP considers the costs and investment required to deliver the plan and gives details of some planned capital investment. There is evidence of some resources targeted at specific priorities, for example the development of the area-based children’s networks and the empowerment of children and young people. Difficult decisions are taken by elected members and officers where necessary and focus is sustained, for example the development of the new sixth form centre and the distribution of primary school places.
90. The overall capacity of the council and its partners is adequate. The CYPSPB is well established, with appropriate membership. The roles and responsibilities of partners are clear and understood and partners challenge one another where appropriate. Partners are working effectively towards Children’s Trust arrangements with a strong shared will to improve services. Wider participation is being developed through the partnership forum which has an evaluation and monitoring function and clear mechanisms for reporting to and from the Children and Young People’s Partnership.

91. The CYPSPB is addressing key capacity issues. The joint commissioning strategy and action plan are in draft form and a joint workforce plan has been agreed. Recruitment and retention initiatives are in place with some evidence of impact, for example in the recruitment of team managers in children’s social care services. However, there remains a high use of agency social workers. There are good examples of work being undertaken to improve information and communication technology capacity, however there is no overarching strategic approach. An information-sharing protocol has recently been agreed but this is in the early stages of implementation.

92. The children’s service delivered a balanced council budget for 2005/06 which shows a marked improvement from the significant overspend in children’s social care in 2003-04. Financial management and budget monitoring have been strengthened and there are now clear gatekeeping procedures in place. However, significant in-year fluctuations remained against the Children and Families’ business unit budget during 2005-06 and the council recognises that this is an area for further improvement. Overall, school deficits remain high and, although progress has been made in licensing deficits, financial monitoring procedures failed to forecast the overspend by some schools which incurred deficits for 2005-6. The council has now enhanced the capacity of financial staff to monitor and support the management of individual school budgets. Additional training has been provided for schools, and recovery plans are in place for those schools in deficit.

93. The Haringey PCT is experiencing financial constraints and is currently consulting on a series of service changes to be able to deliver a balanced budget. Partnership arrangements and relationships have remained sound during this process and the PCT has committed to protecting services for children with disabilities. Budgets have not as yet been aligned across the council and the PCT but plans are in place to achieve this.

94. Value for money is adequate. The council has now refocused its approach to value for money and the children’s service is able to demonstrate a good understanding of areas of relative high cost. However, value for money is not yet embedded within the children’s service business planning and in-service plans. School surpluses remain high in some schools. Clawback is being considered and the council is using its additional financial capacity to work with schools to reduce this figure. The council has successfully reduced its high unit cost for looked after children by increasing the number and usage of in-house
foster placements, maximising the use of the block contracts in place and occupancy of the in-house residential unit. As a member of the pan-London commissioning group, the council plans to use benchmarking information and block contracts to further reduce the unit costs.

95. Performance management is good. There is a clear commitment to, and focus on, improving performance by both councillors and officers; scrutiny arrangements are secure. The performance management framework is good and is used consistently across the children’s service, except in the youth service. Performance management reports are good and used widely in the children’s service and with partners. Performance reports are produced monthly for managers and these are shared with frontline staff. Local performance indicators have been developed and are used well to track performance on local priorities. As a result, the council and its partners have a good understanding of performance against their ambitions and priorities. Staff appraisals reflect the golden thread from individual targets to the priorities for the children’s service and ultimately the community strategy. Frontline staff view performance positively as a tool for service improvement. Performance management of the partnership is continuing to develop; a draft performance monitoring document is being refined by the CYPSPB.

96. Knowledge about performance is used to drive service improvement, for example analysis of local data on school places has led to 120 additional primary school places being provided and planned for in the west of the borough where primary schools are oversubscribed. Complaints are also used to improve services, for example Student Finance Direct, which previously accounted for 50% of the children’s service complaints. Complaints leaflets directly targeted at children have encouraged more young people to use the system. The contribution of children and young people to performance management is developing in some areas but there is no consistent approach.

97. The capacity of the council and its partners to improve further services for children is good. The director of the children's service provides strong and dynamic leadership and is supported by many examples of good leadership and management at all levels. The lead member has a clear understanding of her role and responsibilities, building well on the previous involvement and commitment of the leader of the council. Partners share a strong vision for the development of the children's service and in recent years have demonstrated success in achieving improvement in key service areas such as the attainment of students at Key Stage 4, the quality and range of early years provision, the quality of children’s social care and effective performance management systems. Although the youth service has been judged inadequate, weaknesses had recently been identified and actions to strengthen management and practice and improve resources put in place.
Annex: The children and young people’s section of the corporate assessment report

1. Services provided by the council and its partners for children and young people in Haringey are good. Children and young people are generally safe and those most at risk are well protected. Outcomes for children and young people are adequate and have improved significantly over the last five years, in most cases in line with national trends, and in many cases faster than nationally and than in similar local authorities. This progress reflects the improving quality of services and the collective will across the council and its partners to raise standards. Their capacity to build on these achievements and improve services further is good.

2. Services for children and young people are managed well. The CYPP “Changing Lives” sets out an ambitious vision for improving outcomes for children and young people. Needs have been thoroughly analysed and gaps and underperformance in services identified. The director of the children’s service and the lead member for children and young people provide good leadership, supported by strong relationships with local partners and many examples of effective management at all levels. The CYPSPB is well established and is now working towards Children’s Trust arrangements; joint protocols for workforce planning and performance management are in place. Financial management and budget monitoring within the children’s service have been strengthened and value for money is adequate. Performance management in the children’s service is good overall but the involvement of children in the evaluation of services that concern them is still in development.

3. Services are good overall and have had very substantial impact on improving outcomes for most children and young people. Service managers generally have a good understanding of strengths and weaknesses in service delivery, supported by rigorous monitoring of information and data in education and social care services. Good provision is made for looked after children. The youth service, however, is inadequate, though actions to strengthen management and practice and improve resources have recently been put in place.

4. The work of all local services in securing the health of children and young people is good. A number of successful multi-agency initiatives on parenting, sexual health, healthy eating, physical activities and emotional well being are improving outcomes for children and young people although some health indicators remain below national averages. However, local health economy partners have plans in place to address these issues with some interventions already making a positive impact. There is good access to CAMHS for initial assessment and specialist cases, and significant additional resources are being deployed to ensure good and responsive service provision for vulnerable children and young people. However, CAMHS for young people who offend are unsatisfactory. The health needs of looked after children are prioritised and
adequately addressed. Children with learning difficulties and/or disabilities receive coordinated multidisciplinary health care services, and protocols are in place to ensure the smooth hand over of clinical care to adult health services for children and young people with complex medical needs. However, there is a long delay in accessing occupational therapy services.

5. Children and young people are generally safe. Although most children surveyed report that they feel safe at school and in the local area, some children and young people report feeling very unsafe in some areas of the borough, which is in part a perception and in part reflects the reality of the high number of young people who are victims of crime in Haringey. Effective multi-agency working has supported good and sustained improvement in social care practice and management since 2001. However, there are delays in addressing some children’s needs, including potential child protection concerns. High levels of staff turnover, caused by difficulties in recruiting permanent staff, have led to a lack of continuity in the management of some cases. The LSCB has established good ownership of the wider safeguarding agenda. There is a good range of support services for children with learning difficulties and/or disabilities; plans to develop integrated services are in the early stages. Services for looked after children are generally good and strategies to increase the proportion in local placements are having an impact.

6. Strong and focussed leadership, together with effective partnership between the Council and local and national agencies and providers, have led to substantial and sustained improvements in the quality of educational and leisure provision for children and young people in Haringey. Support for parents and carers is good and that to early years settings has improved. Effective school improvement strategies are continuing to raise standards of achievement, including for those from Black and minority ethnic groups and looked after children. Achievement overall is adequate, but improvement between 2001 and 2005 has been at a faster rate than nationally at most key stages, and young people make particularly good progress between the ages of 11 and 16. However, progress between the ages of 7 and 11 is slower and too many young people still leave school without any qualification. Performance data is used effectively to target resources and intensive support in those schools where achievement is less secure. Pupil attendance has improved rapidly in the last two years though it is acknowledged that further improvements are necessary. Robust systems are in place to track the whereabouts of the mobile school population and there is good support for looked after children’s education. Children and young people can access an appropriate range of recreational and leisure activities within the borough.

7. Children and young people, including those looked after by the council, are supported well to contribute to society and in managing changes in their lives. There is high commitment across the partnership to the involvement of children and young people in the decisions that affect them, including through the recently established youth council. However, strategic consultation with children and young people is not yet embedded across all aspects of the
council’s work. A highly effective partnership between the council, the Metropolitan Police, schools and other agencies has led to a number of well structured and well resourced projects to tackle crime, including the Safer Schools project. A wide variety of prevention activities successfully support children and young people at risk of offending. Although rates of youth crime in Haringey remain high, they are beginning to fall, and rates of re-offending are low.

8. Opportunities for children and young people to achieve economic wellbeing and prepare for working life are adequate. There is a good range of daycare to support parents and carers who are working or studying, although in some areas, particularly where there are high rates of worklessness, parents who want to participate in training find it harder to access flexible or subsidised day care. Partnership working between the council, schools, the College of North East London, Connexions and the Learning and Skills Council is increasingly effective in providing better access to vocational education for 14-19 year olds, although the range of work-based provision is insufficient. Partner organisations collaborate well to reduce the number of young people who are not in education, employment or training and whose whereabouts after leaving school is unknown. Careers advice and guidance for most young people including young people with learning difficulties and/or disabilities is adequate overall. Support for the transition of looked after children and young people into adult life and learning or employment is good and housing arrangements for care leavers are good. Transition planning for young people with disabilities who are over the age of 14 has improved, but is not yet of a consistently high quality.