

Joint area review

Gloucestershire Children's Services Authority Area

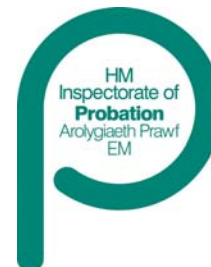
Review of services for children and young people

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

1. This report assesses the contribution of local services in ensuring that children and young people:

- at risk, or requiring safeguarding are effectively cared for
- who are looked after achieve the best possible outcomes
- with learning difficulties and/or disabilities achieve the best possible outcomes.

Context

2. The county of Gloucestershire is situated on the northern edge of the southwest region and covers 1,025 square miles. Over half the county is designated an Area of Outstanding Natural Beauty. Gloucester and Cheltenham are the main two urban areas, situated in the centre of the county, with small market towns being a feature of the wider area. Gloucestershire has a population of 575,000, including approximately 138,000 children and young people aged 0-18. Whilst the population as a whole is predicted to increase by 11% by 2025, numbers of children and young people were falling until the last two years, with an overall predicted decrease of 12.1% of 0-19 year olds by 2026.

3. Although essentially a rural and relatively affluent county, parts of Gloucester and Cheltenham have wards in the top 10% most deprived areas in the country, with health and education outcomes for children and young people in these areas being at a lower level than the county average. There are also pockets of rural deprivation.

4. In the 2001 census, 2.8% of the population described themselves as from Black and minority ethnic communities, half of whom lived in the Gloucester district. The largest Black and minority ethnic groups are from the Indian and Black Caribbean communities. There is a Gypsy and Traveller population of 600, mainly focussed in the north of the county, and there has been a rise in migrant families from Eastern Europe and Portugal.

5. A significant area of Gloucestershire, notably around the Tewkesbury, Gloucester and Cheltenham and the Cotswolds, was affected by major flooding in late July 2007. Water supplies were disrupted for two weeks. This caused severe hardship to 350,000 households and to agencies providing services. The aftermath of the floods is a continuing focus for all services in providing longer term recovery.

6. Early years child care and nursery education is provided by: 532 childminders; 109 day nurseries; 27 family centres; nine children's centres; 121 out of school care; 207 pre-school play groups; 17 independent nursery units; 11 private nurseries, one maintained school with two nursery classes, and six special schools.

7. Primary and secondary education is provided by: 249 primary schools; 42 secondary schools; 12 special schools and four pupil referral units. A Virtual School is provided for children and young people who are looked after.

8. Post-16 education is provided by: four general further education colleges; one specialist land-based college; three independent specialist colleges; 25 secondary schools with sixth forms.

9. Work-based learning is provided by Gloucestershire and Wiltshire Partnership of Training Providers which includes 22 local and national providers.

10. Entry to Employment is run by: Bridge Training; The Furniture Recycling Project; Gloscat Training; JHP Training; The Painswick Inn Project; Prospect Training Services and Royal Forest of Dean College and Stroud College.

11. Adult and community learning is provided by a wide range of providers, including: Gloucester, Stroud, Cirencester, Forest, Hartpury and National Star Colleges; Newent, Dene Magna and Wydean schools; Artspace; Art Shape; Neighbourhood Network; Chinese Children Association; Chinese Women's Guild; Barton Trust; Seslin Harris Training; Prospect Training; Gloucestershire Federation of Women's Institutes; PATA (Playgroup and Toddler Association); Workers Educational Association; Vibrant Enterprise Ltd(Pitman); Bridge Training and Adult Education.

12. Commissioning and planning of NHS Services and primary care is carried out by Gloucestershire Primary Care Trust (PCT), which was created in October 2006 and replaced the three previous PCTs in the county. The PCT also provides a number of health services to children and families, such as health visiting.

13. Gloucestershire Hospitals NHS Foundation Trust provides acute hospital services and community paediatrics. A Hospital Education Service is provided to children and young people in hospital.

14. Gloucestershire Partnerships NHS Foundation Trust is the main provider of specialist mental health services to children and young people throughout Gloucestershire.

15. Children's social care services are provided through: 235 foster carers; five children's residential care homes; two residential respite units for children and young people with learning difficulties and/or disabilities; one county-wide Access Team; seven area-based children and family teams; three looked after children teams. There is one county-wide Leaving Care Service and one county

social care Children with Disabilities team. There is an Emergency Duty Team and three family support teams. Family support services are also provided within children's centres.

16. The Learning and Skills Council operates across the Gloucestershire, Swindon and Wiltshire area and there is a Gloucestershire Connexions company.

17. The police service is co-terminous with the county area. Services to children and young people who are at risk of offending or have offended are provided through the Gloucestershire Youth Offending Service. There are no Young Offender Institutions in the area.

18. In excess of 345 voluntary and community sector organisations across the county work with children and young people.

Main Findings

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

- There are strong multi-agency partnerships and a strong commitment to safeguarding across children's services in the county. However, there is a lack of clarity about thresholds for access to social care services, with thresholds being high and inconsistently applied. Decision-making on social care referrals at the point of entry to the service is not always made at an appropriate managerial level. Serious weaknesses in council processes to ensure safe staffing, identified by this inspection, have been remedied immediately by prompt and excellent corporate action.
- The majority of children and young people who are looked after achieve well and receive good support. They have very good involvement in the evaluation and planning of services provided for them. However placement choice for children and young people is limited and the provision in most council residential children's homes is inadequate.
- Educational progress and achievement of children and young people with learning difficulties and/or disabilities is generally good, and young children with complex needs receive timely and well co-ordinated support. However, there are inconsistencies in the quality of overall provision and shortcomings in provision for older children and young people or those with less complex needs. Many initiatives to address these issues are too recent to have a demonstrable and sustained impact on outcomes.

- Overall service management across the Partnership is good, with good outcomes for most children supported by effective performance management. Capacity for improvement is also good based on clear leadership, effective partnership working and good needs analysis.

Grades

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

	Local services overall
Safeguarding	2
Looked after children	2
Learning difficulties and/or disabilities	2
Service management	3
Capacity to improve	3

Recommendations

For immediate action

The local partnership should:

- ensure that an appropriate way is found to successfully disseminate the findings of this report to children and young people in the area
- urgently review the thresholds for access to core child protection services to ensure consistency of response across the county and that children and young people who are at high level risk but who do not meet the thresholds are offered appropriate and timely multi-agency support
- review the referral systems in social care services to ensure there is one clear pathway, that decisions about access to services are made at an appropriate managerial level and that transfers of cases to area teams are consistently processed and services provided in a timely way

For action over the next six months

- Ensure that performance indicator data accurately reflect action taken and outcomes for children and young people.
- Ensure that all council residential units where children and young people are placed are of consistently high quality.

- Ensure that sufficient resources are allocated to deliver comprehensive child and adolescent mental health services which are able to meet demand at all levels of service, especially for those groups identified as a priority.
- Allocate partnership resources to ensure that services are sufficient to identify and meet the needs of children and young people with learning difficulties and/or disabilities promptly, engaging parents, carers and children and young people in any service developments.
- Take steps to rapidly reduce the percentage of fixed-term exclusions of pupils with learning difficulties and/or disabilities.
- Review quality assurance processes to ensure they are effective and that managers are supporting and driving good practice.
- Continue to monitor and review the revised safe staffing processes, to ensure that all staff working with children and young people are appropriately checked.

For action in the longer term

- Ensure access to independent advocacy services for children and young people with learning difficulties and/or disabilities.
- Ensure all partners, in particular councils, the Primary Care Trust and the Learning and Skills Council, develop resource allocation arrangements that support delivery of the Children and Young Peoples Plan with flexible use of resources which deliver value for money.
- Engage with the community sector in developing the partnership approach to joint commissioning.

Equality and diversity

20. Equality and diversity issues are identified and addressed in strategic planning, and the council and its partners are working to ensure that operational processes take good account of the differing needs of local communities. There are examples of focussed work to address specific need. For example, 34 of 38 children of fairground families took distance learning packs with them when they left in spring 2007 for the new travelling season, to promote inclusion, basic skills and curriculum continuity. Meeting the needs of pupils from Eastern Europe is high on the agenda of the council Race Equality and Diversity Service, which has identified 300 pupils arriving in school in 2005/06 with little or no English, an increase of 123% on the previous year. However, children and young people from Black and ethnic minority groups remain over-represented on the child protection register and within the population of children and young people who are looked after. Gloucestershire

Safeguarding Children Board is engaged in an audit process to more completely understand the reasons for this. Work is also taking place within social care services to address the issues for children and young people who are looked after.

21. Key leaders of Black and ethnic minority groups are consulted and involved in service planning, but this is not yet embedded across the range of services. Key community groups within the urban areas have facilitated and improved access to mainstream health and social care services very well for local people for whom English is not their first language. However, there is an acknowledgement of the need to further focus services to ensure equity of access for all, across both urban and rural areas.

Safeguarding



22. **The contribution of local services to improving outcomes for children and young people at risk, or requiring safeguarding is adequate.**

Major strengths	Important weaknesses
<p>Good reduction in teenage pregnancy, exceeding the national average.</p> <p>Numbers of schools achieving National Healthy Schools Standards exceed national targets.</p> <p>Wide range of early intervention and preventative services, with demonstrated good impact of provision of children’s centres</p> <p>Effective identification of private fostering, with good support to carers</p> <p>Anti-Bullying Accreditation scheme implemented, raising awareness across agencies and providing consistency of response to bullying.</p>	<p>Thresholds for access to core child protection services are high and inconsistent in their application.</p> <p>Decision-making on social care referrals at the point of entry to the service is not made at an appropriate managerial level.</p> <p>Inconsistent application of transfer protocols in social care services leading to delays in service to some children and young people.</p> <p>Performance indicator data of numbers of initial assessments completed within timescales do not accurately reflect outcomes for children and young people.</p> <p>Inadequate management oversight of case files across all agencies.</p>

<p>Good processes between the police and other agencies leading to reduction in crime and anti-social behaviour by young people.</p> <p>Good multi-agency procedures for tracking missing children.</p> <p>Good multi-agency engagement in Gloucestershire Safeguarding Children Board.</p> <p>Good progress in roll-out of common assessment framework within required timescales, with good outcomes for children and young people who have already received such services.</p>	
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23. The majority of children and young people in Gloucestershire who responded to the TellUs2 Survey said that they felt very or quite safe. Gloucestershire's 2006 Children and Young People's Health and Lifestyle on-line Survey of nearly 13,000 children in 300 schools, found that 94% felt safe at home. However, that survey also identified that pupils' confidence in the manner in which bullying was addressed varied widely between schools.

24. There is a wide range of information, in a variety of formats, to inform and advise children and young people and their families about key risks to their safety, with examples of good work by children's centres, health visitors and school nurses, and other agencies, such as the fire service. A high quality domestic violence information pack is available in all schools for staff and young people. However, whilst deaths or serious injuries to children and young people in road traffic accidents has reduced by 31% compared to the 1994-1998 average, the numbers are still above national average.

25. A range of strategies, policies and multi-agency initiatives are in place to promote healthy lifestyles including the effective Teenage Pregnancy Strategy. The number of schools achieving National Healthy Schools Status was 177 (58%) schools at May 2007 is very good. This is above the average for national and similar authorities, and already exceeds the national target of 55% achievement by December 2007. A good number, 83%, of the county's five to 16 year olds are taking part in at least two hours of high quality PE and school sport a week, well above the national target.

26. Nine children's centres are established, providing a wide range of support and preventative services, which are valued by families. Good progress is being made in the planning of a further 23 centres by the government timescale of March 2008, with an eventual target of 41 centres in all.

27. The 2006 Annual Performance Assessment recommended improvements to Child and Adolescent Mental health services to address the mental health needs of young people more effectively. Waiting lists for assessments are now reduced from 54 weeks to eight weeks, but data about waiting times for receiving a service are unavailable. Inconsistency of access to specialist services remains, particularly for vulnerable groups such as children and young people who are looked after.

28. Substance misuse services for young people were identified as an area for improvement in the 2006 annual performance assessment. A detailed analysis by the partnership of local provision across the four levels of substance misuse services demonstrates that some good services are being provided at all levels of service, but there is a lack of coordination of these, with short term funding inhibiting forward planning at some levels. Overall services for vulnerable groups are not well developed. A joint commissioning strategy has been developed, with agreement for implementation and resourcing of plans across agencies by the end of January 2008.

29. Effective initiatives are in place to deter and reduce anti-social behaviour by young people. The family intervention team, run jointly by Gloucester City Council and Gloucestershire County Council, works successfully with families to reduce anti-social behaviour and to improve school attendance. Effective work between schools and the police has been enhanced by the linking of a police community support officer to every school. A programme targeted at children and young people at risk of becoming involved in crime is working successfully with good outcomes demonstrated for 100 children and young people. Youth Offending Service performance has improved greatly, and the service is now good and working effectively. However, while access to mental health services are good, there remain delays for young people known to the Youth Offending Service accessing appropriate physical health support. Personal, health and social education in schools, supported through the Healthy Schools' initiative, is good and the programme addressing social and emotional aspects of learning is having a positive impact.

30. Good protocols and processes are in place to track missing children with effective working arrangements between the police and other agencies. Good progress is being made in re-integrating excluded pupils through the pupil referral service which works effectively with excluded children to get them back to school.

31. Children and young people who are privately fostered are effectively identified with appropriate assessment of their needs and the capacity of their carers.

32. There is good support for young carers and several have been supported well to write about and publish their experiences, to assist other young carers.

33. Gloucestershire Safeguarding Children Board, chaired by the Director of Learning and Development, has good representation at a senior level from a wide range of agencies. The roles and responsibilities of members are clear, with good evidence of effective challenge between agencies. The board has clear, agreed, priorities. The county has adopted the southwest regional child protection procedures, ensuring consistency of process for children and young people who may move between authority areas. Good multi-agency child protection training is provided. Road shows have been attended by over 500 staff to disseminate learning from serious case reviews, with very positive feedback from those who have attended.

34. Gloucestershire Safeguarding Children Board is developing consistent processes for all member agencies to ensure good adherence to safe staffing processes. However, this inspection identified weaknesses in the council's human resources procedures and processes to ensure that all the necessary recruitment checks are completed for staff who work with children and young people, and that there is robust quality assurance of processes. Excellent and prompt action, including a full audit of all personnel files, comprehensive assessment of risk to ensure that only staff who have been appropriately checked work with children and young people, and a clear, corporately agreed action plan, with robust monitoring arrangements, was immediately implemented.

35. The common assessment framework process, a standardised approach to conducting assessments of children and young people with additional needs and deciding how those needs can best be met, with budget holding lead professionals, has been successfully piloted in two areas of the county with very positive feedback from families. The process is on track for full implementation within required timescales. However, thresholds between the common assessment framework and referrals to children's social care are insufficiently clear and transparent. In some cases, children who should have been offered an initial assessment from social care services have been inappropriately diverted to the common assessment framework process.

36. Thresholds for access to children's social care services and for core child protection services are high, leading to risk that children and young people with high level need who do not meet these thresholds do not receive appropriate services. The referral pathway is not clear to all agencies, as it runs parallel to a further system whereby concerns are 'logged' by the council's Safeguarding Unit, which provides advice to professionals only. Decision-making at the point of referral is insufficiently robust, with a lack of management oversight and auditing of decisions and processes. The timeliness of allocation of cases for core assessments is inappropriately dependent on capacity within area teams, leading to unacceptable delays in service provision in some areas. Disputes between teams as to the appropriateness of transfer for some cases also leads to inappropriate delay in provision of services.

37. The timeliness of initial assessments of children and young people and their families improved to 72% in 2006-07, higher than comparators and national averages. However, this apparent improvement does not always accurately reflect improved quality and timeliness of service, as it is due to a changed way of counting assessment completion, whereby assessments which are delayed are counted as completed, and a 'new' assessment started when work on the assessment resumes. This is unsatisfactory. However, the timeliness of core assessments remains very good with 84% completed on time in 2006/07, higher than statistical neighbours and national averages.

38. The number of multi-agency meetings to plan specific intervention to assist families has increased, and they are valued by all agencies. However, there is a lack of clarity regarding the aim and process of each, as different types of meeting are called Strategy Meetings, confusing their purpose with the clear focus of child protection Strategy Meetings as defined in *Working Together to Safeguard Children 2006*¹. In practice, some meetings are held as a suggested alternative to accessing the core child protection process. While the purpose of working closely with families to avoid the possible perceived stigma of child protection processes is acknowledged, many of these alternative meetings do not facilitate the attendance or contribution of children and young people and their parents/carers, which is unsatisfactory.

39. The rate of initial child protection conferences and the number of children and young people whose names are on the child protection register rose slightly in 2006/07 but remain below the averages of similar councils and national average. The Gloucestershire Safeguarding Children Board has identified inconsistencies in practice across differing geographical areas, leading to local disparities in registration rates, and is rightly investigating the reasons for these. All children on the child protection register are allocated to a social worker and 100% child protection reviews are held within required timescales.

40. There is over-representation of children from Black and ethnic minority groups on the child protection register, with 2.4% in 2006/07 compared with statistical neighbours of 2.1% and nationally 1.4%. Children from Black and ethnic minority groups are also over-represented amongst children and young people who are looked after, with 2.9% in 2006/07 compared with 2.6% and 1.6% nationally. Gloucestershire Safeguarding Children Board is engaged in an audit process to more completely understand the reasons for this. Work is also taking place within social care services to address the issues for children and young people who are looked after.

41. There are good arrangements for staff supervision in agencies. However, there is inadequate management oversight of case files across all agencies, and insufficient auditing of processes to ensure high quality services.

¹ *Working together to safeguard children: a guide to inter-agency working to safeguard and promote the welfare of children* (ISBN-13: 978-0-11-271187-2), HM Government, 2006

42. Public protection arrangements are good. Multi-agency Risk Assessment Conferences are effective in identifying families where there is high risk of domestic violence, and providing appropriate intervention.

Looked after children and young people



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

Major strengths	Important weaknesses
<p>Educational achievement is higher than similar councils and national averages, and improving. 100% completion of personal education plans.</p> <p>Very good consultation with children and young people, with demonstrated involvement in planning and evaluating services.</p> <p>Very good achievement in number of children and young people adopted.</p> <p>Good achievement of number of statutory reviews on time, with increasing participation by children and young people in their review meetings.</p> <p>Good access to general health services including dentistry.</p>	<p>Inadequate standards in most children's residential homes.</p> <p>Limited placement choice.</p> <p>Limited access to specialist child and adolescent mental health services, despite being a designated priority group.</p> <p>Although performance indicator data shows that all children and young people who are looked after are allocated to qualified social workers, in some cases, this is in name only, with work being carried out by unqualified community family workers.</p>

44. The majority of children and young people who are looked after achieve well and receive good support. They are offered good opportunities to voice their views, are involved in the planning and evaluation of services, and receive feedback on actions taken in response to their comments and suggestions. However, placement choice is too limited and provision in most council residential units is of poor quality.

45. The proportion of children and young people who are looked after is lower than in similar councils and nationally. A reduction in numbers of children and young people, who are looked after, from 518 in 2002 to 386 in October 2007,

has been achieved. Placement stability is very good, and in line with similar councils and national averages.

46. Preventative services are being developed in a range of ways, for example through children's centres, extended schools, and the common assessment framework, to enhance the multi-agency provision of services and to divert children and young people and their families away from core social care services and from admission into accommodation.

47. A significantly higher percentage (16%) of children and young people who are looked after are placed with family or friends compared with the national average (12.7%) and similar councils (9.5%). In the majority of cases placements are appropriate, however in a small number of cases such placements are made due to the lack any immediately available suitable fostering or residential placement.

48. The majority of foster carers receive good support. However, some foster carers looking after children with complex needs or challenging behaviour receive insufficient access to respite care. Good efforts are being made to increase the number and range of foster carer placements, with appropriate linking with national recruitment campaigns, and with a particular focus on recruiting foster carers from Black and ethnic minority groups and for older young people to match assessed need.

49. A robust commissioning strategy and process for purchasing agency fostering and residential placements has been implemented. Gloucestershire is a member of the southwest consortium, which gives greater opportunity for block purchasing and consistency of commissioning processes across authorities. Accreditation standards for agencies from whom services are to be purchased are robust, with regular monitoring of placements to ensure high quality. However, standards in most county children's residential homes are inadequate. Residential care home inspection reports identify poor management, unsatisfactory fabric of buildings and high staff vacancy and sickness levels in homes. Robust action is being taken to address these issues, through the children's home improvement plan, but it is too early to judge the impact of the plan.

50. Arrangements for the adoption of children and young people are adequate overall. The percentage of children adopted is very good and higher than national average. However, the proportion of looked after children placed for adoption within 12 months of the agency decision to move to adoption dropped in 2006-07 to 71%, below the national average of 77%.

51. Some very good social work support for children and young people who are looked after is demonstrated in casefiles. However, support by children's social workers overall is variable and some foster carers feel that they are given too limited information and insufficient support by their child/ren's workers. Performance indicator data shows that all children and young people who are looked after are allocated to qualified social workers, implying that the allocated

workers work with the children and young people. However, in some cases, particularly longer term placements, this is in name only and the support work to children and young people, and attendance at their statutory reviews, is carried out by community family workers who do not hold a social work qualification. These arrangements are not satisfactory and are contrary to current guidance.

52. There is evidence of some good awareness across agencies of the diverse cultural needs of children and young people who are looked after. For example, pre-school children from black or minority ethnic groups at one nursery receive particularly good support to understand their own and other cultures. Unaccompanied asylum seekers benefit from partners' strong commitment to diversity and services to meet and support their needs, with good outcomes demonstrated.

53. Arrangements to meet the physical health needs of children and young people who are looked after and care leavers are good. The rate at which annual health and dental assessments are completed is very good, being above the national average and comparators. There is evidence of particularly good work to ensure that children and young people who are looked after have access to dentists. The Intervention Team, with health agencies, provides regular, positive, training for foster carers on emotional health issues for children and young people who are looked after. Children and young people who are looked after have access to some child and adolescent mental health services within the Intervention Team, which includes CAMHS professionals. This team may then fast track referrals to CAMHS locality teams in situations where more specialist services are required. The Gloucestershire Emotional Health and Wellbeing Strategy published in September 2007, identifies children and young people who are looked after as a priority group for access to CAMHS at all tiers. However, work to achieve this is at a very early stage.

54. Educational achievement by children and young people who are looked after is good and is improving further. Effective support is provided by designated teachers and 100% completion of personal education plans. Achievement of 5 GCSEs (or equivalent) at grade A*-C, at 20.5%, is above the national average for children and young people who are looked after and a significant improvement on results for the last four years. Nevertheless, this remains well below the average for their fellow pupils across the county. Achievement at the other key stages is also improving, supported by some well focused work on setting individual targets. Good progress is being made to launch the virtual school for looked after children which is actively supported by head teachers across the county. It is well planned and makes good use of expertise and experience within the partnership.

55. Since 2005/06 the number of children and young people who are looked after and absent from school for 25 days or more has reduced from 6.5% to 5.5% in 2006/07 and is now significantly below the national average. Enabling and ensuring that these children and young people attend school is a priority,

with a Fast Track system in place to ensure good and prompt services to those excluded from school. Where children who are looked after are showing early signs of persistent absence, a well co-ordinated approach by education welfare officers, school staff and carers is providing effective early intervention.

56. The independent reviewing officer team provides good monthly management information for senior operational managers, and effective challenge to operational processes. The team provides good training for social work teams to develop knowledge and skills about the statutory review process, and this has been accessed by 80% of relevant staff. There has been good improvement, from 75% in 2005/06 to 90% in 2006/07, in the number of review meetings for children and young people who are looked after held within timescales. This has been achieved by the team identifying admissions to accommodation in a more efficient manner. The participation of children and young people in their review meetings has improved from 75% to 88%, and is now slightly above national averages.

57. Children and young people who are looked after are involved well in evaluating and planning services, through a good range of opportunities offered to them and a variety of different formats, such as DVDs, newsletters and online surveys. The Young People's Looked After Network (YPLAN) very effectively co-ordinates opportunities for children and young people who are looked after and care leavers to voice their views directly to officers and elected members. The YPLAN magazine is widely read and the surveys they conduct engender a good response. Effective feedback to children and young people is given through the YPLAN 'You Said We Did' newsletter, which details the consideration given by officers and members to young people's suggestions, and reasons for resultant decisions. There has been good involvement of children and young people in Total Respect training. The Listening to Children Group (L2CG) and the Consultation Crew are outstanding in their contribution to planning and evaluating services.

58. Gloucestershire Independent Advocacy Network Team provides a satisfactory and in some areas good service for looked after children. The referral process is appropriate and is accessible to all children and young people who are looked after, including those placed out of county. Young people are made aware of the service by their social worker, posters and the YPLAN newsletter.

59. Unlike many authorities, Gloucestershire does not have a formal corporate parenting board. However, the needs of children and young people who are looked after and care leavers are championed strongly. Lead members for children and young people demonstrate a very good knowledge of issues for children and young people, give high priority to ensuring they listen and respond to their views, and demonstrate strong commitment to improving services. They actively promote the responsibility of all members as corporate parents. Members visit children and young people in residential units. However, there is no regular programme of member visits.

60. The youth offending service works to a good multi-agency protocol with children's services for children and young people who are looked after. There is good targeted work undertaken by the youth offending service to help young people who are looked after avoid entering the criminal justice system. Final warnings or reprimands and convictions reduced from 2.9% in 2005-06 to 2.1% in 2006-07, which is better performance than similar authorities and the national average.

61. Highly effective work by Connexions personal advisors and *Solutions*, the care leaving service, has increased the number of young people who are looked after moving to employment, education or training to a good level, being in line with Gloucestershire peers.

62. The majority of care leavers benefit from good personal support into independence provided by the leaving care team, *Solutions*. This practical assistance and encouragement is highly valued by young care leavers. Further work to establish more consistent practical support, by a training module to encompass issues such as budgeting and healthy living, is underway. The transfer process between looked after children's social care teams to the leaving care team is good. However, the quality of pathway plans can vary.

63. The range and quality of accommodation for care leavers is adequate although the availability of sheltered and supported housing in some parts of the county is insufficient to meet all needs. There is very little emergency accommodation available and in some rare cases bed and breakfast accommodation is used, which is inappropriate. Good work to coordinate provision and planning between housing agencies and district councils is beginning to improve outcomes and opportunities for care leavers.

Children and young people with learning difficulties and/or disabilities



64. **The contribution of local services to improving outcomes for children and young people with learning difficulties and/or disabilities is adequate.**

Major strengths	Important weaknesses
Clear commitment across partners to improving outcomes for children and young people with learning difficulties and/or disabilities.	Delays in identifying and making provision to meet the needs of children and young people with less complex needs, across a range of services.

<p>Good multi-agency work to meet the needs of young children with complex needs.</p> <p>Good multi-agency work, and engagement of families, in common assessment framework planning meetings.</p> <p>Generally good educational outcomes across all age ranges.</p> <p>Good engagement and achievement in level 1 courses post-16.</p> <p>Good support for children and young people with life-limiting or life-long conditions.</p> <p>Very good support for those with communication difficulties to enable them to make their views known.</p>	<p>High levels of fixed term exclusions for pupils with learning difficulties and/or disabilities.</p> <p>Poor communication and engagement with parents in service development and responding to queries.</p> <p>Inconsistency in quality and monitoring of transition planning.</p> <p>Poor completion of reviews of respite care within timescales, with lack of independent chair.</p> <p>Lack of independent advocacy service for children and young people with learning difficulties and/or disabilities.</p>
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65. There is a clear commitment across partners to work together to improve outcomes for children and young people with learning difficulties and/or disabilities. Agencies are working very well together to identify and meet the needs of young children with complex needs, who are supported very well as they move into early years settings and schools.

66. The implementation of the common assessment framework, which is well supported by staff from a wide range of agencies, is proving effective in identifying and addressing a wide range of needs of children and young people with learning difficulties and/or disabilities. Parents and carers welcome their central role in decision-making and the range of support made available.

67. Inclusive practice in schools and settings is supported well. Clear advice is provided to schools and settings on the staged response to emerging difficulties, which includes clear expectations of school or setting based support. The capacity of mainstream schools to meet a range of more complex needs is being developed through good support, advice and training from the specialist teacher service and outreach services from special schools. Further support is also offered by the local independent specialist schools for pupils with and learning difficulties and/or disabilities. However, although the overall number of fixed-term exclusions, including those of pupils with learning difficulties and/or disabilities is falling, these pupils still represent a much higher proportion of overall fixed term exclusion (representing 61% of all exclusions between September 2006 and October 2007) and this proportion is not reducing.

68. Children and young people with learning difficulties and/or disabilities generally achieve well. The progress of pupils working within national curriculum levels in mainstream schools is monitored very well at individual, school and local authority level. Small-step measures of progress, such as p-scales, are being used well in special schools but in mainstream schools these are at an early stage. Schools are provided with good information, including p-scales where available, to enable them to compare the performance of children with learning difficulties and/or disabilities with other similar schools locally and nationally.

69. Children with life limiting or life long conditions receive good multi agency support. Very good links between health professionals and the Reintegration Service support these children and young people well in moving from hospital, back home and into school. Specialist nurses provide good support and advice to schools for those with long term medical conditions such as diabetes and asthma. However, access to health services for children with learning difficulties and/or disabilities in their local communities is inconsistent. Efforts are being made to hold clinics in local facilities, but the accommodation and equipment available vary considerably and are not always appropriate.

70. Completion of statutory assessments of special educational needs to the draft statement stage within the statutory timescale of 18 weeks is low at 45%, with late medical reports accounting for 43% of these delays. Responses to annual reviews and requests for amended statements are slow. As a result, some children and young people do not have their needs identified promptly and there are delays in making the most appropriate provision. Recent staffing changes in the statutory assessment team are resulting in month by month improvements. However there has been insufficient monitoring and strategic management oversight to ensure that difficulties are identified and resolved in a timely manner.

71. The availability of and access to some specialist services for children and young people with learning difficulties and/or disabilities is limited. The responsibility for addressing these shortfalls and developing services further is not yet fully shared across all partners. Children and young people with complex needs have particular difficulty in accessing specialists across all tiers of child and adolescent mental health services. There are long waiting lists for occupational therapy assessments. Steps have been taken to reduce these and the target is for no child to wait longer than 12 weeks by March 2008. However, at the time of the inspection, some children had been waiting up to 18 months for an assessment. Occupational therapy support for special and mainstream schools is limited with only one full time equivalent dedicated post to cover all schools. The educational psychology service is being stretched by the decision to allocate time to support new initiatives such as children's centres, which is resulting in a reduction in allocations to schools.

72. Some children and families have waited an unacceptably long time to receive services from the Children with Disabilities social care team. Thresholds for access to services are not yet fully understood by users or those making referrals to the service. Recent strengthening of staffing and improved provision of information to parents has significantly reduced the waiting times. At the time of the inspection these had reduced from over a year to approximately two weeks, and the service is in a good position to achieve their target of no waiting list by March 2008. Respite care arrangements are adequate, but only half the respite care reviews are completed within timescale. Reviews are chaired by the families' key worker, which is inappropriate, as these arrangements provide no independent overview.

73. Children and young people are encouraged to participate in their own reviews. Very good support is available to enable those with communication difficulties to make their views known through alternative or supported communication systems, which are used consistently across educational, home and care settings. There are a number of examples of good practice in engaging those with learning difficulties and/or disabilities in service development and partnership consultations, but this is not yet embedded in practice across all partners. There is no independent advocacy service for children and young people with learning difficulties and/or disabilities.

74. Special schools offer a range of after school and holiday activities for children and young people with learning difficulties and/or disabilities. Contact a Family are commissioned to offer activities for these young people, their families and siblings in the Forest of Dean area. The Youth Service provides good opportunities for young people with learning difficulties and/or disabilities to participate in targeted and integrated educational and recreational activities beyond the school day. However, the range and choice of either specialist or integrated activities in which these young people can participate are limited by access to appropriate facilities, support and transport. This is identified as an area for further development in the children and young people's plan and the Local Area Agreement.

75. Transition planning is also identified as an area for improvement in the plan. In 2005-06 less than half of children with disabilities had transition plans. This improved to between 75% and 90% in 2006/07. Accurate figures on the number of young people with statements of special educational needs who have transition plans are not available. Adult social care services have recently become engaged in transition planning at an earlier stage. Transition protocols in health services are not always comprehensive and make insufficient specific reference to the transition of children with learning difficulties and/or disabilities from children's to adult services.

76. There is a good level of engagement in post-16 level 1 courses with generally good levels of success. Young people receive good support from Connexions advisers to help them make decisions about post-16 education, training or employment. The range of post-16 options for these young people

is being developed to widen choice in their local area, but partners are not yet fully engaging users and parents or carers in decisions about changes or developments. Guidance and application forms for transport for these young people do not provide clear information regarding entitlement for families who may consider applying, nor do they provide sufficient information for officers to make sound decisions on whether applicants meet the criteria for subsidised transport.

77. Many parents who spoke to inspectors reported that they were dissatisfied with the transparency of decision-making and responses to requests and concerns put to local authority services. As a consequence, parents do not always have confidence in the information and support they receive. This is in marked contrast to the very positive views expressed by those parents who had been involved in common assessment framework processes. Steps are being taken through a multi-agency project to genuinely engage parents in service developments such as respite care and individualised budgets, but this approach has not yet been adopted by all services and partners.

Service Management



Capacity to improve



78. **The management of services for children and young people is good. Capacity to improve further is good.** Outcomes for most children and young people in terms of educational attainment and health outcomes are good, with 75% of performance indicators ranking among the best 25% of councils nationally. Partners, including the voluntary and community sector, have a good overall understanding of the needs of children and young people and their families and carers, and are using their detailed knowledge to plan effectively. Plans for service development are clear and have wide support.

Major strengths	Important weaknesses
Children and Young People’s Plan jointly owned by partners with good commitment and effective partnership working.	The council’s information technology in social care and human resources limits some performance management.

<p>Effective consultation.</p> <p>Good information utilised by partnership, with robust needs assessment.</p> <p>Agreed joint priorities.</p> <p>Clear targets linked to resources and timescales.</p> <p>High profile effective leadership.</p> <p>Robust strategic performance management systems and processes.</p>	<p>Inconsistent council safe staffing arrangements – now being addressed through corporately agreed action.</p> <p>Joint workforce planning at an early stage.</p> <p>Insufficient engagement of some community groups, particularly small voluntary agencies, in commissioning processes.</p>
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79. Ambition is good. There are challenging ambitions for children and young people in Gloucestershire that are clearly articulated in the Children and Young People’s Plan. The vision for children and young people is underpinned by a commitment to delivering early preventative community based services. These will aim to be easy to access, high quality integrated services that will support children and their families. This represents a robust joint agenda for the county. The plan has explicit targets for improved outcomes for all, but particularly for vulnerable children and young people, together with clear timescales and responsibilities for action.

80. The council and its partners offer high profile leadership for services for children. The Director of Children’s services provides effective leadership and is highly regarded by staff and partner agencies. Councillors and senior council officers together with senior representatives from partner organisations provide a highly visible presence leading the Children and Young People’s Strategic Partnership and championing children’s issues. The partnership evidences a strong commitment from partners with appropriate senior representation, and has taken ownership of the Children and Young People’s Plan and responsibility for delivering against agreed targets. The plan is built on a good understanding of the needs of local children and young people, drawing on a well developed joint database, the Multi-Agency Information Database for Neighbourhoods (MAIDeN). It also draws extensively on the views of children and young people through a detailed consultation process. This includes specific attention to involving vulnerable groups. The partnership is still in the process of mapping needs and identifying gaps in services, working through its local networks.

81. Prioritisation is good. The Children and Young People’s plan sets clear priorities and targets. These are well based on a common understanding of need. The strategies and business plans to deliver the priorities are mostly in place, but some, such as a joint workforce strategy are still in development. There are some clear links to resources and investment for example in the council’s medium term financial strategy, but some partners are still working to allocate specific budgets for children’s services.

82. There is investment in a range of preventative services, such as diverting first time offenders, the Youth Inclusion and Support Team and in reducing teenage pregnancy and serious road accidents, and these are yielding positive results. As a result, first-time offender numbers, based on unvalidated data, are reducing following close work with the police, teenage pregnancy rates are falling and fewer young people are being seriously injured or killed on the county's roads. The rollout of the National Healthy Schools programme is ahead of national targets.

83. Resources have been targeted to areas most in need. Access to services for children, young people and their families or carers has improved, for example through the first phase of a network of children's centres. These were located in the areas of greatest need, and to maximise accessibility, based on information supplied through the MAIDeN service. Youth services have delivered effectively in rural areas.

84. The partnership is engaged in planning how to shift resources across the county and between partners and providers to meet its priorities. A number of pilots and community projects have an uncertain future due to funding changes. The partnership has yet to be clear about how such pilots are to be taken forward.

85. Capacity is adequate, with clear building blocks in place. The Children and Young People's Strategic Partnership is developing well following an extended period of change in local arrangements. The partnership was established in April 2005 and is still developing its membership and its management. Local health providers have now joined commissioners on the Partnership Board. The council Children and Young Person's Department has been developing since April 2006, with some posts only recently filled, and the reorganisation is still bedding in. Health service partners have also been restructuring, with the three local primary care trusts being replaced with a single coterminous county-wide primary care trust. Local NHS providers have gained Foundation Trust status. These arrangements are now becoming well established and partners are focusing effectively on the joint agenda. The voluntary and community sector are also contributing effectively to the partnership agenda.

86. Decision-making in the partnership appears timely, based on good information and advised by risk, using the council's robust risk management approach. Joint commissioning strategies are developing with some key areas of provision such as residential care services currently under consideration, within a framework that focuses on outcomes for children and young people, rather than on particular delivery arrangements. The partnership is developing its joint understanding and measurement of value for money across all partners. Some individual services clearly demonstrate value for money. For example, education spending is comparatively low while attainment is above average, indicating the council is achieving good value for money. By contrast, residential care services are high cost and of variable quality. Resources overall, across the partnership, are adequate and financial management by the key

players is good. The common assessment framework programme has been successfully piloted and is being rolled out county-wide.

87. The partnership demonstrates an appropriate discharge of responsibilities. For example, councillors are aware of their responsibilities as corporate parents for children in care. There are some good examples of involvement in service design and development by young people. Children and young people who are looked after are offered a range of opportunities to comment on services and the council ensures they have effective feedback on their comments and actions taken to address these. The Youth Service has successfully engaged with young people to help develop its services.

88. However, the council and its partners are not yet maximising their capacity. They have made limited use of pooling of budgets, only utilising this opportunity within the occupational therapy service to date. Alignment of budgets is not always clear. For example, primary care trust budgets are not yet disaggregated to show the spending on children and young people's services. There are some examples of the flexible use of resources between partners, but these are limited at present. The scope for joint working at the front line is being actively explored.

89. The council is using its information technology systems to support the partnership well. The MAIDeN service is a jointly funded research database that supports joint planning. For example, data from MAIDeN has assisted a further education college to increase its offer to students by mapping journey times for its catchment area, which has led to changes in both bus and course timetables so that more students can access courses. Other systems, including financial planning, risk and performance management systems form a common basis for the partnership. However, some council information technology systems are limiting service effectiveness, such as those for social care services and for human resources. These limitations have been identified and improved systems are being put in place. Joint commissioning arrangements are in place between the council and the primary care trust, with work ongoing to develop a strategy and approach for managing the local market for services. However, community groups, and small voluntary agencies in particular, are unclear as to how they will be involved in future service development and delivery.

90. Performance management is good. There are good outcomes for universal services, such as health outcomes and educational attainment, with the latter being in the top quartile for most indicators. Three quarters of performance indicators were in the top quartile nationally in 2006-07, double the national average. Effective management action has been taken to deal with underperformance; for example, in reshaping the Youth Offending Service following an adverse Youth Justice Board consultancy report to one which has achieved an inspection finding of 'good' in 2007.

91. The partnership has effective systems in place to support performance management. It uses the council's 'Performance+' system as the basis for monitoring progress against children and young people's plan targets. The system permits managers at all levels to check progress on-line against agreed targets, with automatic identification of underperformance, and routine upward reporting. In 2006-07 69% of performance indicators showed improvement over the previous year, which is above the national average. This system is being further developed through enabling direct on-line access to the Performance+ system by key partners for data entry and reporting to improve transparency and joint information. The partnership has adopted a clear scheme of governance that links to the Local Area Agreement and to district based partnerships that develop local plans to deliver the children and young people's plan targets. Partners have robust business planning systems in place. Successes in partnerships include reducing serious injuries and deaths of children and young people in road traffic accidents by 40% between 2001 and 2005. Teenage pregnancy rates are now the lowest in the southwest, with a reduction of 17.7% from 1998 to 2004, against a target of 15%, and a national average drop for England of 10.5%. Strong partnership arrangements, agreed priorities and ring-fenced money from the PCT have led to this achievement.

92. The council's scrutiny process is continuing to develop. The council has a dedicated children's services scrutiny committee that looks at progress across the partnership as a whole, while information on the council's own services is also overseen by a corporate performance and budget committee that can compare service performance within the county. Scrutiny task groups take forward much of the work and have included a group on anti-bullying that champions new policies and guidelines, although it is too early to identify the impact of these.

93. Despite effective high level performance management systems and structures being in place, some quality assurance processes within children's social care services, such as management oversight of case files, are underdeveloped. This inspection identified weaknesses in human resources processes to ensure safe staffing. Once these were identified, the council has taken urgent and robust action to ensure that appropriate and timely arrangements for criminal records bureau and other required checks are in place. The partnership has clear and robust systems in place to manage performance at a strategic level through performance indicators. However, there is an acknowledgement of the need to measure outcomes for children and young people through wider quality measures.

94. Capacity to improve is good. The council and its partners have most of the necessary building blocks in place. There is an agreed vision supported by a clear strategic planning process that is jointly owned and managed. Common understanding of need is based on a joint database that is funded and maintained by key partners, and children and young people are increasingly consulted and involved in service planning at all levels. There is clear and sustained commitment to the joint agenda by partners, with effective and

visible leadership. Services have continued to improve from a high base: the council has a good track record for key performance indicators for children's services; in 2006-07 three quarters of Gloucestershire's performance indicators were in the top quartile nationally, with 69% improving over the previous year, above the national average. Outcomes for children who are looked after and children and young people with learning difficulties and/or disabilities are improving, particularly educational attainment. The partnership is still developing its joint approach to workforce planning.

Annex A

MOST RECENTLY PUBLISHED ANNUAL PERFORMANCE ASSESSMENT OF SERVICES FOR CHILDREN AND YOUNG PEOPLE IN GLOUCESTERSHIRE

Summary

Gloucestershire generally delivers services for children and young people at a good level, with many good and some outstanding features in most of the five main areas of assessment.

The achievement and well-being of children and young people are well above average and the council works hard to narrow the gap between the commendable outcomes for the majority and the small number who are more vulnerable. Senior officers, quite rightly, recognise there is still some way to go; collectively they ensure that improvement continues at a swift pace. A thoughtful and intelligent approach has improved both integration and consistency in provision, particularly for more vulnerable groups, such as looked after children and young people.

The inclusive CYPP and the council's assessment of progress demonstrate good capacity for further improvement. Areas of need have been carefully identified and addressed precisely. There is evidence of progress in many outcomes over the last year and all of the issues identified for improvement in the 2006 annual performance assessment have been tackled or are still being addressed successfully. Children and young people are consulted in a range of innovative ways. Their views are valued, taken seriously and influence change. Collaboration with most external partners is good.

The full annual performance assessment can be found at:

http://www.ofsted.gov.uk/reports/pdf/?inspectionNumber=3222&providerCategoryID=0&fileName=\\APA\\apa_2007_916.pdf

Annex B: Summary of the Enhanced Youth Inspection Report

Main findings

1. The quality of youth work provision in Gloucestershire is good but until the necessary details underpinning the strategic decision to integrate various youth support and development functions are agreed, youth work is not sufficiently secure. The current youth service focuses well on improving young people's well-being and the five every child matters outcomes. It, combined with its voluntary sector partners, achieve good levels of participation. Achievement is also good and young people develop their skills and self confidence through activities they enjoy. Accreditation arrangements are well designed and implemented. The quality of youth work practice is consistently good whether working with groups of young people or individuals with specific needs. The range and coverage of youth work activities is excellent and the local authority lives up to its ambitious youth pledge. Commissioning arrangements are at an early stage of development. There is much to gain from the local authority resolving the initial tensions these arrangements have caused with some voluntary sector organisations in order to build on the many examples of good practice that exist in the area. The service is committed to promoting equality and diversity and to engaging with underachieving and vulnerable groups. The needs of both urban and rural areas are met well and partnership working is very strong. Good local knowledge, good team work and well established universal youth work enables the service to target specific needs quickly as local needs arise. Young people contribute well to decision making in their own communities and beyond. The leadership and management of the service are good but, as recognised by the council, there is still work to be done to use management information more systematically for planning and assessing the impact of youth work. The council's self assessment of the youth service was generally accurate in identifying strengths and areas for development but failed to recognise the outstanding quality of the curriculum and resources and the overall strength of leadership and management when grading the provision.

Key aspect inspection grades

Key Aspect		Grade
1	Standards of young people's achievement	3
	Quality of youth work practice	3
2	Quality of curriculum and resources	4
3	Leadership and management	3

*Inspectors make judgements based on the following scale
4: excellent / outstanding; 3: good; 2: adequate/satisfactory; 1: inadequate*

Strengths

- The service is well lead and managed.
- High standards are achieved by most young people.
- Procedures for accreditation are well developed and widely used.
- Young people have wide ranging opportunities for participating in decision making.
- The curriculum is rich and diverse.
- Promotion of social inclusion is good.
- Partnership working is excellent.

Areas for development

- Develop a strategy for engaging looked after children.
- Refine the use of management information in planning youth work.
- Embed the use of qualitative and quantitative data for assessing the impact of youth work.
- Secure the commitment of the voluntary sector to commissioning arrangements.

Annex C

CORPORATE ASSESSMENT ACHIEVEMENT - CHILDREN AND YOUNG PEOPLE

1. Gloucestershire generally delivers services for children and young people with good outcomes in each of the five main outcome areas. Service management is good. All of the issues identified for improvement in the 2006 APA have been resolved, or are being addressed.
2. The combined work of all local services in securing and promoting the health of children and young people is good. Teenage pregnancy rates are reducing and are now the lowest in the Southwest. There is very good guidance on sexual health, contraception, smoking cessation and treatment for substance misuse. A very good number of schools have achieved National Healthy Schools Status, and there is good take up of physical exercise. However, while long waiting lists for assessment by specialist child and adolescent mental health services (CAMHS) are now reduced, waiting times for provision of service are not available. Key vulnerable groups are identified as priorities, but do not have priority access to services. A comprehensive emotional health and well-being strategy aims for improvement of quality and availability of CAMH services. The percentage of annual health and dental checks for children and young people who are looked after completed within timescale are good. However, children and young people with learning difficulties and/or disabilities, particularly those with less complex needs, can wait too long for services.
3. The impact of services in ensuring that children and young people are safe is adequate. The majority of children and young people feel safe. However, thresholds for access to social care services are high and inconsistently applied, with risk that some children and young people with high level need do not receive a service. Serious weakness in some council human resources processes to ensure safe staffing, identified by the Joint Area Review, resulted in prompt and robust corporate action to remedy the deficiencies. While performance indicators show improvement in initial and core assessments completed within timescales to above national average, some of this is due to a changed method of counting rather than improvement in service. All children and young people whose names are on the child protection register are allocated qualified social workers and are reviewed within prescribed timescales. Gloucestershire Safeguarding Children Board monitors performance and utilises data well in order to improve service quality and consistency. Lessons learned from serious case reviews have been disseminated effectively through road shows attended by over 500 staff.
4. The number of children and young people who are looked after remains consistently low, reflecting some good preventative services. The rate of children being adopted is very good. Placement stability for children and young people who are looked after is good. However, placement choice for children and young people who are looked after is too limited. Although robust

commissioning arrangements ensure good quality agency placements, some council residential units are of poor quality, with the remainder assessed as adequate. The authority is addressing this through a robust children's home improvement plan. Too many children and young people with learning difficulties and/or disabilities do not have a transition plan.

5. The impact of all local services in helping children and young people to enjoy their education and to achieve well is good, with some outstanding features.

6. Standards of attainment remain consistently above the national average in primary and secondary schools. Progress of children and young people who are looked after is higher than national average. Attendance in primary and secondary schools is good. However, fixed term exclusions have increased, although still below national average. A good range of strategies now help children and young people to avoid exclusion, although fixed term exclusions of children and young people with learning difficulties and/or disabilities remain high.

7. The number of children having access to early education and provision has increased and is good. A high proportion of services, including children's centres, are judged to be good or outstanding in inspections. The proportion of schools that provide a good or better quality of education is higher than in similar local authorities and those nationally, although the picture for special schools is more variable. School improvement services continue to be at least good or better.

8. The impact of all local services in helping children and young people to contribute to society is good. The local authority is strongly committed to involving young people and its participation strategy is comprehensive. Children and young people in Gloucestershire are given excellent opportunities to express their views and contribute to the design, delivery and improvement of services. The council takes its corporate parenting responsibilities seriously, and high quality services for children and young people who are looked after are championed effectively by members and across council directorates. The Youth Offending Service was the lowest performing in the region but has now made significant progress. A robust performance improvement plan is now beginning to have impact and is on track to bring about further improvements.

9. The combined work of all local services in securing and promoting economic wellbeing is good, with some outstanding aspects. The overall effectiveness of 16-19 education in most secondary and special schools is good or better. The percentage of young people gaining level 2 and 3 qualifications by the age of 19 continues to be above national average. The percentage of young people entered for, and gaining qualifications in academic and vocational examinations, is well above the national average. The NVQ success rate for all work-based learners is above national average. The percentage of young people in employment, education and training is high and increasing, with the

authority now ranked sixth nationally. The council acknowledges that more needs to be done to develop appropriate vocational pathways and effective transition to post-16 education for all vulnerable groups, particularly those young people with learning difficulties and/or disabilities. The local authority continues to ensure that 14-19 education and training is planned and delivered in a coordinated way, working closely with all the providers.

10. The capacity of council services to improve is good. The council has stated its high ambitions clearly in the CYPP and its associated business plan. These comprehensive and accessible documents are subject to thorough self assessment and detailed evaluation. Gaps in service provision are identified clearly, showing a prompt response to emerging needs, especially by integrating service delivery or commissioning new services. Decision making is transparent and officers work effectively with most partners, securing value for money. For example, educational attainment remains consistently good or better despite the low funding levels of schools. The council recognises there is more to do to align service priorities with resources across the Children and Young People's Strategic Partnership and to ensure that all the services provided for children and young people from vulnerable groups are of a consistently high quality.

Annex D

SUMMARY OF JOINT AREA REVIEW AND ANNUAL PERFORMANCE ASSESSMENT ARRANGEMENTS

1. This joint area review was conducted using the arrangements required under Section 20 of the Children Act 2004. It was carried out by a multi-disciplinary team of inspectors from Ofsted, the Healthcare Commission and the Audit Commission. The review was undertaken according to the requirements of the *Framework for the Inspection of Children's Services*.
2. The review was linked to the contemporaneous corporate assessment of the local council by the Audit Commission and these findings plus aspects of the most recent Annual Performance Assessment are represented in the relevant part of the corporate assessment report.
3. This review describes the outcomes achieved by children and young people growing up in Gloucestershire and evaluates the way local services, taken together, contribute to their well-being. Together with the Annual Performance Assessment of Children's Services, joint area reviews focus on the extent to which children and young people are healthy, safe, enjoy and achieve, make a positive contribution, and are well prepared to secure economic well-being. This review explores these issues by focussing on children with learning difficulties and/or disabilities, children who are looked after and children at risk or requiring safeguarding and a few additional investigations. It evaluates the collective contribution made by all relevant children's services to outcomes for these children and young people.
4. The review took place in two stages consisting of an analysis stage (where recorded evidence was scrutinised) and a two week fieldwork stage (where inspectors met children and young people and those who deliver services for them).