

Joint area review

Essex 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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Contents

Introduction	2
Context	2
Main findings	4
Grades	5
Recommendations	5
Areas for investigation through fieldwork during the joint area review	
1. Safeguarding	7
2. Looked after children and young people	11
3. Children and young people with learning difficulties and/or disabilities	15
4. Additional investigations	19
5. Service management	24
6. Capacity to improve	24
Annex A: The APA letter	29
Annex B: Summary of the Enhanced Youth Inspection Report	30
Annex B: Children and young people's section of the corporate assessment report	32
Annex C: Summary of joint area review and annual performance assessment arrangements	34

Introduction

1. The 2007 Annual Performance Assessment (APA) for Essex judged the council's children's services as adequate and its capacity to improve as adequate.
2. 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.
3. The following investigations were also carried out:
 - the impact of the partners' 14–19 strategy in improving outcomes for young people
 - the impact of the partners' strategy on improving the provision of child and adolescent mental health services (CAMHS).

Context

4. Essex is situated in the south east of England bordering the Thames estuary. It covers 1,300 square miles and is the second largest county in England. It has a population of about 1.36 million. The county has a rich mixture of urban and rural environments. It is ranked among the fifth least deprived areas in the country but includes areas of severe disadvantage and challenge, particularly along the eastern seaboard. The percentage of the population with higher education qualifications (23.4%) is lower than those nationally (28.3%); 17.3% of adults in Essex have no formal qualifications, compared to 13.8% nationally. Unemployment, at 4.3%, is below the national average of 5.4%.
5. There are 329,100 children and young people under the age of 19 years, 24.4% of the total population. These children and young people in Essex are generally more advantaged than is the case nationally. Entitlement to free school meals is 9.5% in primary schools, compared with 15.5% nationally, and 7.5% in secondary schools, compared with 12.8% nationally.
6. The proportion of children and young people from minority ethnic groups is 9.4%, compared with 21.3% in the country as a whole. This includes a large Gypsy, Roma and Traveller population. Proportions of pupils with English as an additional language are 3.6% in primary schools and 2.7% in secondary schools; both of these figures are well below the respective national figures of 14.4% and 10.8%.

7. Early years childcare and nursery education is provided by: 1,575 registered childminders; 60 children's centres; two nursery schools; 643 private and voluntary early years settings. School education is provided by: 469 primary schools; 76 secondary and 19 special schools; three academies and five pupil referral units. The county has one of the highest proportions of Foundation schools in the country, with 55 primary, 46 secondary and one special school in this category. Provision for primary-aged pupils is organised in infant, junior and all-through schools. Secondary provision includes four single sex grammar schools as well as comprehensive schools for 11–16 year olds and 11–18 year olds, most of which are coeducational.

8. Post-16 provision is provided by: nine colleges providing further education, complemented by colleges in neighbouring council areas which Essex students attend, 42 secondary schools and three academies with sixth form provision. There are around 20,850 students aged 16–19 in full-time education.

9. The Essex Learning and Skills Council operates across the area. Work-based learning is provided by a wide range of partners. There are three consortia in Essex which hold contracts for Entry to Employment (E2E) and three additional direct training providers who have Learning and Skills Council national office contracts with some 1,420 placements in total.

10. Adult and community learning, including family learning, is provided by the county council working with a range of partners including nurseries, pre-schools, children's centres, schools, further education colleges, health settings, community and voluntary sector organisations and faith groups.

11. The county council's Adult Community Learning Service delivers its programme from 20 main centres and 250 other local venues. The service is working in conjunction with the Learning and Skills Council to map provision available for personal and community development learning across Essex. There are over 30 third sector organisations providing parental support/family learning under contract.

12. Commissioning and planning of national health services and primary care are carried out by five primary care trusts (PCT): South West Essex PCT; (Basildon and Brentwood); Mid Essex PCT (Braintree, Chelmsford and Maldon); North East Essex PCT (Colchester and Tendring); South East Essex PCT; (Castle Point and Rochford); and West Essex PCT (Uttlesford, Harlow and Epping).

13. Acute hospital services in Essex are provided by: Basildon and Thurrock University Hospitals NHS Foundation Trust (South Essex); Colchester Hospital University NHS Foundation Trust (North East Essex); Mid Essex Hospital Services NHS Trust (Mid Essex); and Princess Alexandra Hospital NHS Trust (West Essex). Mental health services are provided by: North Essex Mental Health Partnership NHS Trust and South Essex Partnership NHS Foundation Trust.

14. Children's Trust arrangements are delivered through a well-established children and young people's strategic partnership with representatives from all key partners including the 12 districts and boroughs. This is supported by 11 local children and young people's strategic partnerships (CYPSPs) responsible for local planning and delivery of children's services.

15. Children's social care services are provided through: 549 foster carers, 11 children's residential care homes, eight family centres, one secure unit, 37 field social work teams and 29 locality prevention and early intervention Teams around the School, Child and Community (TASCCs).

16. There is one young offender institution in the area supporting young adults aged 18 years and over.

Main Findings

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

- Safeguarding is inadequate. The nature and importance of the key weaknesses outweigh those aspects of safeguarding that are good and adequate, leading to an overall judgement of inadequate.
- Outcomes for looked after children are adequate. Health outcomes overall are adequate. Education outcomes and placement stability are improving. Support for care leavers is good and take-up of education, employment or training is very good.
- Outcomes for children and young people with learning difficulties and/or disabilities are good. This is reflected, for instance, in their educational achievement and their progress into education, employment or training.
- The impact of the partners' 14–19 strategy in improving outcomes for young people is adequate. There is evidence of improved 14–19 strategic planning and collaboration. However, employers are insufficiently engaged. Participation rates in post-16 learning are high but there is underachievement and persistent absenteeism by some secondary-age students.
- The impact of the partners' strategy on improving the provision of CAMHS is adequate. Partnership working is effective, with good progress being made in developing comprehensive services. Timescales for assessment are good, but access to follow-up treatment is slow for some children.
- Service management is adequate. Ambition and prioritisation are good. Financial planning is secure, with effective commissioning and targeting of resources at a local level. However, the quality of target-setting in service plans is inconsistent, and capacity difficulties are affecting the

delivery of some services. The capacity to improve is good. Strong leadership and targeted additional resources are improving outcomes in most areas.

Grades

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

	Local services overall
Safeguarding	1
Looked after children	2
Learning difficulties and/or disabilities	3
Service management	2
Capacity to improve	3

Recommendations

For immediate action

The local partnership should:

- ensure that an appropriate way is found for the successful dissemination of the findings of this report to children and young people in the area
- implement service thresholds for children's social care specialist services and clarify the remit for TASCC
- ensure robust action planning to address practice deficits in children's social care
- ensure serious case reviews are undertaken where appropriate within agreed timescales and learning from these reviews is disseminated without delay
- improve the quality of information and risk assessment of incidences of domestic violence affecting children and young people and ensure a prompt and appropriate response
- ensure safe vetting for new and current staff and volunteers and put a secure system in place to monitor compliance.

For action over the next six months

- Improve and monitor CAMHS follow-up and treatment.
- Establish and monitor transitional arrangements for children and young people with complex needs and dual diagnosis moving into adult mental health services.
- Increase the involvement of employers in further developing and implementing the 14–19 strategy.
- Improve the attendance of looked after children.
- Ensure all looked after children have up-to-date personal education plans of good quality.
- Ensure all targets in service plans are specific, measurable, achievable, relevant, time-specific and outcome-focused.

For action in the longer term

- Develop a clear strategic approach to equalities and diversity.

Equality and diversity

18. Essex's population has become more ethnically diverse since 2001. The percentage of Black and minority ethnic children and young people has increased from 2.9% to 9.4%. The profile of staff working in the Schools, Children and Families Department reflects the diverse community well, except for teaching, where there is an under-representation of Black and minority ethnic employees. Women are well represented across all grades. Work to assess the impact of policies on promoting race equality for children is in progress. Whilst equality and diversity issues are not given explicit prominence within the Children and Young People's Plan (CYPP), the commitment to its importance is exemplified in the Narrowing the Gap action plan 2008–09, which recognises deficiencies in this area and sets out a well-defined programme to improve the achievements of all vulnerable groups in Essex. However, there is a lack of a clear strategic approach across the partnerships. Current data collection regarding ethnicity does not routinely inform some services and forums, for example youth work and the work of 14–19 area planning groups.

19. A good range of culturally sensitive and targeted services across the area have led to positive outcomes for children and families, for example partnership working with the Family Centre in Clacton to enable Polish, Bengali and Turkish families to access services. Schools work effectively with support services to monitor and target intervention support for underachieving pupils. Specific intervention programmes such as 'Catch Up' reading have resulted in 75% of targeted children making double their expected progress. Cultural and heritage needs are appropriately addressed in child protection plans. However, there is a

shortage of Black and minority ethnic foster carers to match need. Delivering services in rural and urban areas is a challenge because of the size of Essex. Responses from some schools, parents and other service users indicate that there is still work to be done to ensure equity of access to some services, for example therapy and mental health services for children with learning difficulties and/or disabilities.

Safeguarding

Inadequate ☒ Adequate ☐ Good ☐ Outstanding ☐

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

Major strengths	Important weaknesses
<p>Good preventative and diversionary drug and alcohol services.</p> <p>Good youth service and college provision around sexual health.</p> <p>Good work to tackle anti-social behaviour and reduce re-offending.</p> <p>Effective strategic response leading to a reduction in bullying.</p> <p>Good safeguarding training, support and guidance to schools.</p>	<p>No common understanding or implementation of agreed service thresholds, leading to inconsistent support for children.</p> <p>Unacceptably high social work caseloads leading to cases not being closed in a timely or safe manner.</p> <p>Examples of child protection practice falling below acceptable standards.</p> <p>Shortfalls in the system to identify and respond to incidences of domestic violence affecting children.</p> <p>Insufficiently robust recruitment systems resulting in a significant number of staff working directly with children with no evidence of all the appropriate checks in place.</p> <p>Incomplete initial assessments being recorded as complete on information system.</p> <p>Delays in undertaking and completing serious case reviews and implementing action plans.</p>

	Aspects of youth offending services failing to demonstrate robustness to safeguard young people.
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21. The Essex Young People's Drug and Alcohol Service provides effective preventative and diversionary services, and there is good access to assessment and treatment provision. Teenage conceptions, at 32%, are lower than similar areas, at 34%. Services are well targeted at neighbourhoods with higher rates. However, the rate of reduction has fallen from 16.7% in 2005 to 12.1% in 2006 and is not as good as similar areas (14.9%). Sexual health services from youth workers and further education colleges are good, but there is no county-wide sex and relationship education policy in place for schools, leading to inconsistent provision. Participation in the Healthy Schools programme is good, but not as high as similar areas, nor is the level of schools achieving Healthy Schools status, at only 55%, which is below the council's own target of 65% and the national average of 67%.

22. The number of children killed or seriously injured in road traffic accidents has fallen, although the rate of reduction, at 49%, is not as large as the national average of 51%. It is not clear from the CYPP or other children and young people strategic plans how work to further reduce child deaths on the road is being progressed.

23. A well-established anti-bullying strategy is having an impact in reducing the incidence of bullying. There are good initiatives regarding cyber-bullying, homophobic bullying and peer mentoring. Good work in early intervention and preventative services through the increasing use of the common assessment framework (CAF) and the work of the TASCs is developing across Essex. These services are valued by the children and families who use them. However, there is insufficient clarity within these teams and those who refer to them about their remit. This has led to inconsistency in the delivery of preventative and social care services for children in need. A recent evaluation of the TASCs highlighted concerns that they were working with children and young people in need of more specialist social care services and this view is confirmed by schools. Many agencies identify that there are insufficient services for the most vulnerable young people aged over 16 years. A lack of clarity in determining who should provide this support leads to delays in some young people getting the help they need. This lack of clarity is compounded by the delay in implementing agreed thresholds across agencies for referral to children's social care services. Referrals to social care are very high at 474 per 10,000 of the under-18 population, where similar authorities are 343. Repeat referrals have risen and are also well above similar areas. The percentage of referrals leading to initial assessments has risen (from 39.4% to 43.5%), but remains well below similar areas (66%). The numbers of core assessments completed is also comparatively very low (66.7 compared to similar areas of 100.2 per 10,000 population). The council does not currently monitor work with children in need, and as a result there is no overview of the numbers of children and young people currently receiving or waiting for a service.

Nevertheless, the local authority has identified a capacity gap for children in need of support and has secured significant resources to address this through creating extra social work and family support posts for both child protection and children in need services over the next three years.

24. Improvement in the completion of assessments has been significant. Completion of initial assessments within expected timescales have risen from 58.5% in 2007/08 to the council currently reporting 86.7%. Core assessments have risen from 72.5% completed in 35 days in 2007/08 to the council currently reporting 82.3%. The currently reported rates exceed the council's own targets for 2008/09. However, there is evidence of unacceptable practice, where initial assessments are sometimes recorded as complete, on the electronic social care record system, without case records to evidence that the work was completed. The quality of assessments examined was satisfactory, with evidence of some good partnership working across agencies. There was good evidence of appropriate supervision and management decisions on many of the case files examined.

25. All children with child protection plans are allocated to qualified social workers. However, social work caseloads in some teams are unacceptably high, with some social workers carrying between 50 to 90 cases, of which half were 'waiting to be closed'. Consequently, large numbers of cases are not being closed in a timely and safe manner. The council has acknowledged this and in addition to securing new resources has deployed intervention teams to tackle the backlog. The number of children subject to a child protection plan has recently reduced from 21.1 per 10,000 of the under-18 population in 2006–07 to 18.4 in 2007–08, with the council currently reporting 17.6. This trend is counter to the national upward trend, with similar authorities having 22.9 and the national average of 26.6. The council is exploring the reasons for this reduction.

26. The council has undertaken good, targeted and challenging audit work to understand why too many children and young people remain subject to a child protection plan for more than two years. The council has formulated a plan, currently in draft form, which appropriately addresses the key findings. Responses to child protection concerns seen at duty points by inspectors were satisfactory overall, although some individual deficits in practice were found. These were acknowledged by the authority and appropriately addressed, for example gaps in case recording and an example of an assessment being completed without the child being seen. Evidence from complaints in 2007 and 2008 identified serious concerns about child protection practice in a number of cases, for example failure to complete a section 47 child protection investigation, failure to complete an initial assessment, missing records and cases closed without any record of appropriate actions. Recent audits of social work case files have identified some deficits in safeguarding practice, for example less than a third of child protection investigations showed evidence of the child being seen and spoken to alone. In addition, less than two thirds of those children subject to a child protection plan were seen within required timescales.

27. While identifying and reducing domestic violence is a priority, the quality of practice is variable, with examples of delayed response to ensure children affected by domestic violence are assessed. There has been good work in raising awareness of domestic violence with police officers and the implementation of the electronic notification system to refer cases to social care and other agencies. However, the quality of notifications is too variable, with little risk assessment, insufficient detail and delays in some instances. This makes the social care service's response ineffective in some cases. Practice in response to notifications is also inconsistent across the county, with some teams applying an approach of responding once they have received three notifications regarding a family, rather than risk-assessing each notification. Others use partnership meetings with the police to guide their work.

28. The new senior management team for the Schools, Children and Families Department has already identified many of the concerns outlined above and has taken strong remedial action which is beginning to take effect. The authority has further plans in place to take corrective action to strengthen services, for example taking steps to ensure compliance with case file audits. Arrangements to monitor and support private foster carers are effective, although low numbers of children in private foster care have been identified. Progress on this has been reported to the Essex Safeguarding Children Board. Awareness of private fostering is not well embedded across all agencies.

29. Systems to ensure safe recruitment are insufficiently robust. An audit of staff within the Schools, Children and Families Department was undertaken in September 2007. The outcome of that audit, reported in January 2008, demonstrated serious gaps in recruitment records for a significant number of staff in direct contact with children, including the absence of Criminal Records Bureau (CRB) checks. Steps were taken to address this. However, some of these staff are still without appropriate checks. The numbers involved are not clear. Following concerns identified by the inspection team in the audit of personnel files, the council audited all staff appointed prior to the introduction of CRB checks in March 2002. This audit found that, of this group of staff, over 200 frontline staff in the Schools, Children and Families Department did not have all the appropriate checks in place. Immediate steps are being taken to remedy this.

30. The Essex Safeguarding Children Board has good engagement by partners but it has not been taking a sufficiently strong lead in driving the safeguarding agenda and has lacked sufficient focus on social care. Good steps have been taken to improve its effectiveness, including the appointment of an independent chair who will soon take up post, and strengthening professional advice to the board. The quality of the serious case review concluded in 2007/08 was evaluated by Ofsted as adequate. Policies and practice are reviewed in line with lessons learned from serious case reviews, but there have been unacceptably long delays in undertaking and completing serious case reviews and implementation of their associated action plans. The Essex Safeguarding Children Board does not have sufficient oversight of recruitment practices. Partner agencies have completed a safeguarding audit but areas of concern and follow-up actions are unclear. Specific

training, support and guidance for schools regarding safeguarding are good. The training programme offers an appropriate range of safeguarding training to all staff, but monitoring of take-up is insufficient to ensure staff have the required training.

31. There is a comprehensive protocol for children missing from education and good, effective liaison between health professionals and education to establish the whereabouts of all children and young people. Some unaccompanied asylum-seeking children have gone missing over the last two years and appropriate steps have been taken to trace them. Significant progress has been made in ensuring that pupils excluded from school are in receipt of full-time educational provision, with the proportion of those receiving 20 or more hours rising from 66% in 2006/07 to 98% in 2007/08. Performance in relation to accessing full-time provision within six days is low, however: currently at 61%.

32. There are some good services to enable children and young people to develop socially and emotionally. These include the integrated youth provision, children's centres, family centres, extended services and TASCCs. These services also provide good advice and support to parents and carers experiencing difficulties in maintaining a positive relationship with their children.

33. Youth work programmes are addressing the risks and harm of anti-social behaviour effectively. The Integrated Youth Service makes good use of mobile provision and detached work to enable workers explore issues such as anti-social behaviour, alcohol and substance misuse with young people. There is good joint working between anti-social behaviour team and the youth offending service (YOS). The number of children and young people offending for the first-time between April 2007 and March 2008 has reduced by 16% well above the 5% year-on-year reduction requirement. Good work by the service has reduced re-offending, and outcomes are better than both similar areas and the national average. Parents of young people receiving a service from the YOS expressed satisfaction with the service. Whilst preventative work is strong, safeguarding aspects of youth offending provision are inadequate. For instance, staff across the YOS had a poor understanding of the risk of harm to young people and there was poor inter-agency collaboration on a number of cases where risk or safeguarding issues were found including a failure to make appropriate referrals to social care.

Looked after children and young people

Inadequate	<input type="checkbox"/>	Adequate	<input checked="" type="checkbox"/>	Good	<input type="checkbox"/>	Outstanding	<input type="checkbox"/>
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34. **The contribution of local services to improving outcomes for looked after children and young people is adequate.**

Major strengths	Important weaknesses
<p>The timeliness and involvement of children in reviews.</p> <p>Education outcomes are improving and are better than the national average for looked after children.</p> <p>Children and young people participate in many activities and initiatives that are beginning to shape the service.</p> <p>More children have stability in where they live.</p> <p>Young people leaving care are well supported, high numbers are in education, employment or training, and most live in suitable accommodation.</p>	<p>Shortage of suitable local placements.</p> <p>Some children have to wait for treatment or follow-up service from CAMHS.</p> <p>Absenteeism and exclusion from school are too high.</p> <p>Too high a proportion of children do not have a personal education plan.</p> <p>Too many children experience frequent changes of social worker, undermining the support the council gives.</p>

35. There is a good focus on preventing children and young people from becoming looked after. The council spends more per child under 18 years on family support services than similar authorities. However, this has not yet resulted in a reduction in numbers in care. The number per 10,000 of population, from most recent data, is 43.2, higher than similar authorities but lower than the national average. Further investment in preventative services is planned. The percentage of children looked after in family kinship placements with people already known to them is 18% and is a much higher proportion than similar authorities. Flexible financial agreements support individual circumstances well. However, almost three quarters of looked after children are on a care order, which is a high proportion. The council is reviewing the plans for these children to ensure their status is appropriate and alternative placement arrangements, for example through residence orders or guardianship orders, are appropriately considered.

36. Health outcomes for looked after children are adequate. A high percentage of looked after children and young people have immunisations which are up-to-date. The most recent data shows improvement in the number having annual health and dental checks at 82.9%, which is above similar authorities but less than the national average of 85%. An integrated healthcare service with consultant paediatricians and local practitioners generally provides good healthcare. However, children do not like being taken out of lessons to have health checks in school time. There is a direct referral route for looked after children to CAMHS. This enables them to have good access to assessments, but there can be delays in treatment or follow-up after initial assessment. Carers and some professionals are concerned that when a child's placement is in crisis and expert support is believed to be needed, services are not always provided, particularly for those who are not

in settled long-term placements. Recent work with care leavers has produced good educational materials that encourage their peers to avoid the culture and dangers of substance misuse.

37. Services helping looked after children to live in safe environments and protect them from abuse and exploitation are adequate. Recent changes in social work teams give a better focus to meeting the needs of looked after children. However, some have frequent changes of social worker, which they find very unhelpful. Lack of continuity is also difficult for carers and other agencies. Placement stability is improving generally. In the year ending in April 2008, 11% of looked after children had experienced three or more changes of placement in the previous 12 months. This has reduced from a high number in previous years, and is now slightly less than similar authorities. Of children aged under 16 who have been looked after for at least two and a half years, 60% have lived in the same placement for two years, maintaining an improving trend since 2004.

38. Planning properly for children has been given high priority. Placements are sustained by independently chaired 'stability' meetings. These improve understanding of behaviours and problems, but carers do not always find these meetings as helpful as they are intended. The timeliness of reviews of looked after children have improved: 98% of statutory reviews were held at appropriate intervals over the past five months. The Central Placements Team has a good monitoring process in place and has agreements with care providers to secure value for money. This is reducing costs while not compromising the quality of the placements. In some cases before the recent reorganisation, statutory visits were not carried out by a qualified worker, but now almost all looked after children are appropriately supported by allocation to a qualified social worker.

39. Ofsted has inspected both the local authority fostering service and the adoption service in 2008, which were judged as satisfactory and good respectively. Action plans to make improvements are clear and on target. However, some foster carers do not feel treated as equal partners by the council, and say they find access to training more complicated than it used to be. Local authority children's homes have also been inspected and judged as satisfactory or good. The secure children's home was judged to be good. In 2007/08 the number of foster carers fell slightly, but this was significant in view of a target to increase recruitment. There are ambitious plans to recruit 200 more foster carers by 2010. More children from Essex are living in residential care than last year, although the percentage of all looked after children in residential care is broadly the same as other local authorities. Partnerships with care providers have been agreed to increase the availability of specialist placements. Until these all materialise, local resources are stretched and opportunities for children to be placed locally are constrained. Seven percent of looked after children are from Black and minority ethnic backgrounds, but there is a shortage of carers from similar backgrounds. The needs of unaccompanied asylum-seeking young people are generally being met well. Children are adopted in a timely way once the decision to do so has been made. The number is good but below the performance of other councils.

40. There is strong commitment and well-focused work by schools and support services in identifying, tracking and supporting underachieving pupils. This support is having a positive impact on achievement and standards. Performance fluctuates from year-to-year in different key stages but the overall trend is one of improving attainment, and above national averages for looked after children. For example, in 2007, 69% of young people in care at end of Key Stage 4 obtained at least one GCSE or equivalent, higher than the national average for this cohort. The number achieving five or more higher grades was slightly above the national average, at 13%. Value added information provided by the authority indicates that over half of those looked after made better than average progress for all children in Key Stages 2, 3 and 4. In the school year 2006/07, 130 looked after children (17%) missed 25 or more school days, above the statistical neighbour (16%) and national average (13%). Targeted work to reduce absence has yet to have a significant impact. Exclusions for looked after children have been high. A zero exclusion target is now in place and no looked after children or young people have been excluded since March 2008. A small number are on part-time timetables and currently do not have their entitlement to full-time educational provision.

41. All schools have a designated member of staff for looked after children. Many value the support and training that they can access. Additional funding for each looked after child is given to schools to underpin their education, but how it is used is not monitored centrally, and children themselves do not have a say in how the money is spent. Last year, the percentage of children with a personal education plan was poor and, though improved, it is currently only 78%. A quarter of looked after children live more than 20 miles from their home address when first placed, double the proportion in similar authorities and treble the national average. The council is trying to minimise the impact of this by enabling children to remain at their current school where appropriate, though for some children this means a long journey.

42. A high percentage of children communicated their views at their reviews in 2007/08: 91% and comparable to similar authorities. Some children have independent advocates and there are agreements to arrange this for all children placed out of county. However, the service has not been effectively monitored regarding its impact and cost-effectiveness. Looked after children participate in events in many ways, including an award scheme that means a lot to them and is praised for being inclusive of foster carers' own children. Young people are successful in grant-aided funding applications to provide arts and recreation opportunities. Children looked after play a growing part in shaping the direction of the services they use, for example in the design of complaints and information leaflets that have just been issued. The council is committed at elected member and officer levels to being a good corporate parent but its work is at an early stage. Members of the recently established corporate parenting panel have met with children and carers to develop a better understanding of what can be done to improve support. There is evidence of some good partnerships with other agencies and districts to promote this. For example, increasing numbers of looked after children and young people are benefiting from free leisure passes. However, children and young people are not members of the panel and do not regularly

meet elected members of the council unless they live in a county-run children's home. There is a lower than average ratio of looked after young people involved with the criminal justice system. Work to prevent unnecessarily criminalising children is good in some residential homes, but this is yet to be extended to all homes.

43. The council has good systems to keep in touch with young people leaving care. Care leavers are positive about the support and participation they experience, notably over the last two years stating, 'the department has got on top of it'. All care leavers have a personal advisor and pathway plan, including those living out of the county. This is consistently better performance than similar authorities. The very large majority of care leavers aged 19 are assessed by the council to be in suitable accommodation, which is also very good and better than similar authorities. The work of the leaving and after care team is effective, achieving a range of good agreements with partner agencies to support the transition from care to independence. Many care leavers are in college or at university; altogether the proportion in education, employment or training is higher than in similar authorities and the national average. However, some care leavers say it is hard to get a job. They would like more help earlier on and worry about the stigma of having been in care.

Children and young people with learning difficulties and/or disabilities



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

Major strengths	Important weaknesses
<p>Early identification of health, care and education needs.</p> <p>The high percentage of children and young people included in mainstream schools.</p> <p>Good levels of achievement at school.</p> <p>The support and opportunities given to children and young people to have a strong and effective voice.</p>	<p>Inconsistent access to CAMHS and some therapies.</p> <p>Lack of clear transition arrangements to adult mental health services for young people with complex needs.</p> <p>High numbers of permanent exclusions from special schools.</p>

<p>The number of young people progressing into education, employment or training.</p> <p>Relationships and engagement with voluntary organisations and the good range of support they provide.</p>	
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45. Inspection findings show that children and young people with learning difficulties and/or disabilities make good progress in most schools and subsequently progress into education, employment or training at a better rate than the national average. The track record for the timely completion of statements of special educational need is very good. The CYPP and the work of individual services appropriately reflect priorities for children and young people with learning difficulties and/or disabilities. A strategic partnership group has been established and a draft Children with Disabilities Strategy has been agreed. Partners are committed and fully prepared to take forward partnership working.

46. There is good multi-agency work and early intervention in the pre-school years and settings and specialist teachers work well with colleagues from other disciplines such as health. The strong partnerships have enabled an effective implementation of programmes such as Early Support and Good Beginnings, the latter being targeted to support families who have a child with autistic spectrum disorder. Families feel well supported through these programmes and the use of family support key workers ensures coordinated support. There is also good support for families and children who need palliative care. Early years support is carried through into school in order to assist transition, and this has enabled many children to successfully enter mainstream provision, especially those with autism.

47. The Parent Partnership service is strong and works very effectively with parents and a range of voluntary organisations, some of which are contracted by Essex to provide independent advocacy. The percentage of pupils with a statement of special educational need is lower than the national average or statistical neighbours. However, there has been a gradual increase in the number of new statements issued resulting in appeals to the Special Educational Needs and Disability Tribunal. The reasons for this have been appropriately analysed but no particular factors have been identified. The authority has reviewed practice and is working more proactively with parents and schools. It is also providing additional support to assist transition into secondary school. Early indications are that these strategies are having a positive impact, for example in the slight decrease in requests for formal assessment of special educational need in 2007–08. Relationships with schools have been tense around issues relating to special educational need procedures and practice. While some schools are reporting that relationships are improving, the authority has recognised the need to improve partnership working in this area.

48. Voluntary groups speak well of their relationship with Essex County Council and they are effectively represented on the strategic partnership group by Essex Forum. They provide a very good range of support, counselling, mediation and training courses for parents and carers, in addition to clubs and leisure activities for children and young people. The wide range of support available to families is further augmented by that provided through children's centres, extended schools and by the local CYPSPs. A parenting commissioner is in post, working across all agencies, to bring together an effective framework of support for parents and carers.

49. EssexWorks website is comprehensive, providing a wide range of information for parent and partners. The Children's Information Service sponsors newsletters for organisations such as the Play and Resource Centre (PARC) and Parent Partnership produces regular newsletters. However, some parents report that it can be difficult to obtain information on events, activities and leisure opportunities if they are not attached to a special school or other organisation.

50. Children with high level complex needs are well supported by the Children with Disabilities team where there is a positive track record in staff retention and stability. Staff in the team have good access to relevant safeguarding training. The percentage of young people with a transition plan to support their move to adult services has increased significantly to 94%, addressing an area for development in the 2007 APA. However, transitional arrangements for young people with complex conditions and dual diagnosis, including mental health and substance misuse, moving to adult mental health services are not yet fully established. Essex is well served with a range of overnight and day respite care and other support initiatives, the latter addressing some rural needs. The flexibility and use of direct payments has been positively promoted and 300 direct payment packages are in use. Parents value the flexibility which the packages allow. The child development centre offers a good range of integrated health provision for children and young people with severe learning difficulties and/or disabilities in North/Mid Essex but similar provision is not yet available across the county.

51. Inclusion is very well promoted in Essex with the result that, in 2007, over 80% of children with new statements of special educational need were integrated into mainstream schools. This is significantly more than the national average and similar authorities. Mainstream primary and secondary schools provide good, effective, efficient and inclusive education, and learners achieve well, with positive inspection findings which are generally more positive than nationally and better than for similar authorities. Furthermore, learners with learning difficulties and/or disabilities make good or better progress in both primary and secondary schools. Progress is above national and statistical averages for primary schools. In secondary schools, progress is broadly in line with national and statistical comparators. Schools and the local authority's School Inspection and Advisory Service have worked well together to identify the lowest 20% of achievers and target specific programmes, with positive outcomes. Valued outreach support is provided to mainstream schools by the special schools. A highly regarded, comprehensive professional development programme, with many accredited

courses, is available to education staff. A good range of well-qualified specialist teachers and health staff effectively support schools in integrating children and young people with more complex needs, although access to CAMHS is inconsistent. Shortfalls in therapy services, such as occupational therapy have been identified; some of these gaps have been filled through recruitment by schools themselves or through the local CYPSP. There has been a recent investment agreement with health services to address this shortfall.

52. Special schools provide good quality education. They meet learners' needs well and ensure very good personal, social, moral and spiritual development. They use data effectively to analyse outcomes and benchmark themselves against other schools. In addition, they have worked very effectively with local employers to ensure that young people have the opportunity for work experience in Years 10 and 11. Young people have valued these experiences. Independent travel training programmes have been implemented successfully, enabling some 50 young people to travel independently and ease the transition to work and college.

53. There has been an upward trend in the percentage of fixed-term exclusions of pupils with statements of special educational need from both primary and secondary mainstream schools. In 2007, this was 13.6% and 48.1% respectively, which is significantly higher than the national averages of 10.1% and 33.4% or similar authorities at 7.9% and 27.3%, respectively. The authority has reorganised behaviour, emotional and social difficulties support to address the issue and given fresh guidance to schools on the review process and action planning. In addition, a new behaviour and attendance strategy through Aiming High funding is to be implemented in schools. Permanent exclusions from special schools remain high: in 2007, the percentage was 0.51% against the national 0.20%. The authority has taken action by providing more professional support to special schools and closing a failing school. A new school is being built for children and young people who have behavioural, emotional or social difficulties. This will enable some children currently in residential educational provision to be educated locally.

54. Much good work has been put into ensuring that young people on the verge of adulthood, including those with the most severe needs, are encouraged and enabled to use their 'voice' to influence provision and make life choices. They are on school councils which are effectively influencing the school environment and they are also involved in the allocation of Youth Opportunities and Youth Capital funding. Children and young people consistently contribute to their annual reviews and are encouraged to contribute to council consultations, for example on Aiming High. The Children's Rights Officer has worked very effectively on the inclusive communication agenda with the result that Inclusive Communication in Essex projects offer a range of services to support communication needs. The Schools, Children and Families Department has enabled young people to be involved in developing job descriptions and interviewing candidates.

55. A wide variety of out-of-school activities, including clubs, Duke of Edinburgh Award and holiday schemes are available in both separate and inclusive provision. Young people make good use of them and speak very positively of their experiences. Transport is available with escorts to targeted youth provision and young people enjoy the range of activities.

56. A broad range of college provision and taster E2E courses are available to assist in the progress towards life after school. The Transitions Co-ordination team works closely with the Connexions service to ensure a coordinated approach to the different aspects of support provided for young people as they progress towards adulthood. The Connexions service follows up young people post-16 years to ensure their appropriate transition to further education or employment. A very successful initiative has been the provision of teachers of the deaf and a tutor in sign language to support deaf and hearing impaired students at colleges which has enabled over 94% of the 37 students to progress either to higher education or full-time employment. There is a good uptake of work-based learning by young people with learning difficulties and/or disabilities. These outcomes are reflected positively in the percentage of those not in education, employment or training, which has dropped by over 2% and, at 11.1%, is below the national average.

57. Although at an early stage, some projects such as 'Closer to Home', which take a holistic approach to young people's emerging independence and adult needs, are providing particularly positive outcomes, as is The Great Tey project run with the National Association for Mental Health (MIND). A range of housing options is available to those young people who wish to work towards independent or sheltered living.

Other issues identified for further investigation

The impact of the partners' 14–19 strategy in improving outcomes for young people

58. **The impact of the partners' 14–19 strategy in improving outcomes for young people is adequate.**

Major strengths	Important weaknesses
<p>Good, clear 14–19 strategic planning and collaboration.</p> <p>High participation rates in post-16 learning.</p> <p>Good quality, well-established and successful increased flexibility and alternative educational provision for school-age young people.</p>	<p>Insufficient employer engagement in the 14–19 strategic partnership and area planning groups.</p> <p>High percentages of teenage parents and young people involved with offending not in employment, education or training.</p> <p>Low standards achieved by some students aged 14–16.</p>

59. The revised and clear 14–19 strategic plan is good and has measurable performance indicators aligned with well-devised and learner-focused objectives. Although slow to start, collaborative 14–19 arrangements are now developing well in each 14–19 area planning group, resulting in a successful diploma bid. The local authority has made a significant investment in the 14–19 agenda. It has increased the resources to develop this work and support local area planning groups in working together to improve outcomes for young people. Although there have been significant improvements in communication, not all headteachers are aware of 14–19 developments and there are concerns that the development of the 14–19 strategic plan was not routinely shared with them. Whilst many colleges and work-based learning providers have good and well-established productive relationships with employers, there is insufficient employer engagement in 14–19 developments, particularly at a strategic level. Work-related learning is well-established in schools, but placements are often hard to find for more challenging young people. Pockets of good practice and effective business partnerships are developing innovative work-related learning activities, for example the Harlow Education and Employer Partnership, but these initiatives are not routinely shared across all the area.

60. Secondary school improvement strategies are beginning to have an impact. However there are still too many schools below the 30% GCSE floor target. The new behaviour and attendance partnerships, which have 'hard to place' panels in many areas, are proving useful in identifying young people at risk of disengagement with school and addressing persistent absenteeism. There are good examples of effective vocational education programmes which have had a significant impact on engagement, attendance and risk of exclusion. Of the original 16 secondary schools identified as having high rates of persistent absence, 15 have reduced their number of persistent absentees against 2006/07 baselines. However, overall secondary school attendance remains below similar areas and the national average. Fixed-term exclusion rates are above national averages and statistical neighbours and have shown a slight increase between 2005 and 2007. Permanent exclusions rates are slightly above similar authorities and national averages. At July 2008, only 62% of young offenders were receiving 25 hours of full-time education.

61. Standards at the end of Key Stage 4 are improving and are slightly above national averages, but slightly below statistical neighbours. However, this picture masks a few areas of poor performance. A recent audit of practice carried out by the local authority showed that young people from some vulnerable groups were underperforming. As a result, the School, Children and Families Department has clearly identified the need to reduce inequalities in success rates of these groups as demonstrated in the 'Narrowing the Gap' action plan 2008/09. Some underachieving groups are being targeted, for example White boys, Bangladeshi and Traveller young people.

62. Arrangements to help young people aged 14–19 prepare for working life are good. Post-16 participation rates have increased from 69% in 2004/05 to 92% in 2007/08 and are above statistical neighbours and national averages. The Aim

Higher programme is improving its profile, with good communication to schools and increasing participation and progression rates. The steady reduction in the percentage of young people aged 16–18 years who are not in education, employment or training is good and the level is now below national averages, but slightly above similar authorities. At 5.6% in 2007/08, it shows a reduction of 3% since 2005/06. The percentage of young people whose destination is not known has also reduced from 6.6% in 2006/07 to 5.4% in 2007/08, which is better than national averages but not as good as statistical neighbours. Recent local data indicates a further reduction to 3.9%. Effective recent measures have been implemented to increase teenage parents' engagement in education, employment or training, addressing a weakness in the 2007 APA. For example, 54 young parents were identified as not being in education, employment or training in February 2008. Of these, 74% now have an individual action plan and all have an agreed identified pathway to education, employment or training. The percentage of teenage parents in education, employment or training has risen from 9.4% in 2005/06 to 18.4% in 2007/08. This shows improvement but is still well below similar authorities at 23.4% and the national average at 28%. Good use is made of Offender Learning and Skills Service funding for young people post-16. The project, known as 'Ready to Work?' is run by the YOS to meet the needs of challenging young people. However, 35% of young people involved with offending above school age are not in education, employment or training. Financial support for post-16 learning in 2007/08 was good. However, the take-up of Care to Learn funding has been low, and although it increased slightly last year, it is still below the regional and national averages.

63. Initiatives to widen the curriculum for young people aged 14–16 through an effective increased flexibility programme, the school engagement pilot and alternative education are particularly good and cater for approximately 1,300 young people. The range of initiatives include the new construction and engineering apprenticeship centre in Basildon and other work-based learning providers, further education colleges and a personalised programme run by the Integrated Youth Service. Success rates have improved year-on-year and there are no significant differences in outcomes for young people from Black and minority ethnic groups. Provider and council quality assurance arrangements are robust. Progression to further education courses or work-based learning is good. The range of vocational options available, as a result of consortia arrangements, is wide. Work to develop the online prospectus with the inclusion of all learning providers has progressed well with details of most providers now on the website. This addresses a weakness in the 2007 APA. Information, advice and guidance targeted support, provided through Connexions personal advisors, is effective in supporting vulnerable young people into a range of post-16 options. However, some young people and schools reported variability in the effectiveness of the Connexions service for Year 11 learners.

The impact of the partners' strategy on improving the provision of CAMHS

64. The impact of the partners' strategy on improving the provision CAMHS is adequate.

Major strengths	Important weaknesses
Effective partnership working. Timely access to assessment.	Transition arrangements for young people with learning difficulties and/or disabilities with complex needs and dual diagnosis moving into adult mental health services are not fully established. Delays in accessing follow-up and treatment caused by insufficient capacity at most levels.

65. Partnership working and commitment between CAMHS, Essex County Council, district councils and the voluntary sector is good. This is in the context of a complex environment of having PCTs in the local area. West Essex PCT commissions the majority of specialist services and services for those with the most complex needs on behalf of all five PCTs. Mental health services are provided by two mental health trusts, the North Essex Mental Health Partnership NHS Trust and the South Essex Partnership NHS Foundation Trust. Improved leadership and engagement with the council has endorsed a more collaborative approach to developing the CAMHS. This is reflected in the CYPP, the CAMHS strategy and action plan which identify clearly the priorities of this multi-agency approach to developing CAMHS provision and practices.

66. The CAMHS joint commissioning group was slow to develop; it was established in April 2008. It has undertaken a strategic review and needs analysis and has identified the gaps in service provision. Current provision of services varies across the area and is adversely affected by resource capacity issues at most levels of the service, including work in community and primary care settings (tier 2), multi-disciplinary specialist services (tier 3), services for children with the most severe difficulties (tier 4) as well as a lack of sufficient day-care facilities. Investment in CAMHS has increased and further investment is planned to address these gaps. For example, in response to limited inpatient facilities for children and young people, a new inpatient unit will shortly open in the south of the county. There are also a number of good examples of local strategic partnerships commissioning specific mental health services to fill a specific local gap in services; for example, the appointment of a primary mental health worker as part of the extended school services in one area.

67. Partners have developed appropriate and sound referral pathways for the most common mental health needs. Waiting times for the assessment of children and young people in CAMHS are good, and much better than the national average. Good work has been undertaken by CAMHS staff to support general practitioners in the appropriate completion of referrals for children and young people. Children and young people have access to appropriate 24-hour emergency and crisis care. However, for some young people, including some who are looked after, there is a lack of timely access to follow-up appointments and treatments. Funding has been agreed for the recruitment of an associate medical specialist to help with the increasing population of looked after children and young people with mental health needs. Effective and valued support by the substance misuse teams is provided to foster carers and adoptive parents. Services for children and young people with learning difficulties and/or disabilities are developing, with some good examples of individual pilots and projects, for example the community-based project in South Essex to support special schools. However, access to consistent services for this group of children and young people varies across the area. This has been identified as a priority area for improvement. Transitional arrangements and long-term planning for 14–25 year-olds with learning difficulties and/or disabilities with complex conditions, and dual diagnosis such as mental health and substance misuse, are not yet fully established. The YOS has four established CAMHS posts but appointments to two vacant posts had just been made. Whilst interim measures were put in place, the level of support for young people was still affected. A recruitment drive is now well underway. Comprehensive staff training is in place and staff interviewed by inspectors confirmed they are well supported in all aspects of their training, supervision and development.

68. Good progress has been made on mental health promotion and community-based mental health services and there is evidence of effective multi-disciplinary working. The involvement of CAMHS staff in TASCs and children's centres has improved awareness of mental health issues and enabled better access to early intervention. There are a wide range of projects across the area to support children, young people, parents and carers with mental health difficulties. Evidence of some effective multi-agency commissioning of specialist services for children and young people can be seen in a partnership with MIND in establishing The Junction in Colchester. Strengthened by a young people's board, this provides good support and advocacy services. South West Essex has commissioned three voluntary organisations to provide easily accessible counselling for young people living in Thurrock, Basildon and Brentwood. Both these initiatives have been confirmed as having a positive impact on meeting the children and young people's needs. Plans are in place to further develop the sharing of local project outcomes and good practice among teams and services and to develop more equitable access to these services across the area.

Service Management



Capacity to improve



69. The management of services for children and young people is adequate. Capacity to improve further is good.

Major strengths	Important weaknesses
<p>Strong and high level commitment and leadership by senior officers across all partners and by councillors.</p> <p>Devolved budgets and increasingly good local intelligence is enabling effective commissioning and targeting of resources.</p> <p>Secure financial planning with increased resourcing for children's services.</p>	<p>Target-setting is not consistently specific, measurable, achievable, relevant and time-specific (SMART) in service plans.</p> <p>Lack of a strategic approach to equality and diversity across partnerships.</p> <p>Staff shortages in key areas.</p> <p>Lack of systematic reporting on quality of work.</p>

70. Ambition is good. The ambitious shared vision in the refreshed CYPP is to create a better future for Essex children and their families and those who support them. This is to be achieved by creating a highly participative and aspirational environment to ensure that children and young people lead positive and fulfilling lives. This vision is well supported by clear objectives and top-line targets, informed by the findings of a robust joint strategic needs analysis and a continuing and detailed analysis of county-wide and local needs. Socio-economic factors are well understood and the views of children and young people, their parents and carers have been sought and taken into account in the needs analysis and informed the development of the priorities, such as out-of-school activities for children with learning difficulties and/or disabilities. Gap analysis, feedback from the 2007 APA and more recently the council's close scrutiny of performance in children's social care has identified where the main improvements are needed. Positive action has resulted in improvements in most areas identified by the 2007 APA, such as closer partnership working between the council and the health sector increasing the percentage of looked after children that have annual dental checks.

Good multi-agency working at a strategic level ensures that ambitions are reflected in partnership plans, and community plans such as the local area agreement and the plans of local CYPSP groups. However, there is no robust strategic framework for equality and diversity across partnerships. So while there is good overall agreement about what the partners want to achieve, the approach to ensuring that equality and diversity are taken into account is not explicit.

71. Prioritisation is good, with clear shared priorities based on needs analysis. There is an effective strategy to deliver priorities, although the quality of target-setting is variable. There is evidence of considerable improvement in a number of important areas, for example a significant reduction in the number of secondary schools where GCSE attainment is below national targets. Integrated working is developing well, as is the preventative approach. Progress is increasingly being made in mapping provision and identifying gaps at a local level, and resources have been devolved to local CYPSPs. This enables delivery against the CYPP priorities, with the emphasis adjusted and action targeted in line with local needs such as teenage pregnancy or provision of parenting support. Senior level representation on local CYPSPs is enabling effective access to resources in partner organisations to deliver CYPP and local CYPSP priorities. The council monitors partner compliance with race equality schemes and major initiatives such as 'Narrowing the Gap' and the increasingly robust identification of local needs are targeting action on vulnerable groups. Many parents, children and young people have commented on the positive effect these services have had on their lives. However, not all of the identified issues have translated into CYPP priorities. For example, there is no specific target to increase the number of teenage mothers in education, employment or training. There are some barriers and limitations to service accessibility due in part to continuing capacity issues. There are generally effective inter-agency processes for planning and reviewing provision for individual children and young people but their views are not always recorded, for example in social care and in the YOS. Overall, clarity about the county-wide and local priorities is enabling partners to effectively determine the action needed to improve services.

72. There is adequate capacity overall, with Children's Trust arrangements in place and working effectively. The CYPSP Board has the statutory partners, plus others such as representatives of faith groups and of the voluntary sector. Engagement with the district and borough councils is strong. The relationship with schools is improving but from a low level. There is strong, clear and committed political and managerial leadership. Six councillors play clearly defined roles in championing and challenging service provision. They include the leader and the deputy leader, who is the lead member for children's services. The strengthened scrutiny arrangements are providing robust challenge, for example requiring clarity on the expected outcomes from the recent significant investment agreed for the services. The council's chief executive chairs the CYPSP as well as the YOS management board and an experienced senior manager has recently been appointed as Director of the Schools, Children and Families Department. Well supported by an experienced and skilled management team, the director is providing strong and effective leadership. Partners are committed to the delivery

of the priorities at county and local CYPSP levels, taking on responsibility for actions. There are regular progress reports and careful monitoring of progress, for example through monthly, quarterly and annual 'score-cards'. There are many examples of the views of children and young people, their parents and carers being sought and taken into account in identifying their needs and designing services, for example through the Youth Assembly and in the youth service as a whole.

73. Integrated working is increasingly strengthening across the partnership. A lead professional approach and a CAF have been established through the TASCCs and there is increasing use of a CAF across the area, although limited monitoring information is available from the CAF database. There is some pooling of budgets between CYPSPs and other partnerships, such as with local development groups of schools, in order to commission services and alignment of budgets between partners at local levels to improve, for example, health and well-being outcomes. An increasingly robust approach to commissioning is developing. Learning from the pathfinder on commissioning for school places has been used to help change perceptions and culture, and local CYPSPs are receiving increasing support to enable them to effectively commission services to meet local needs. This includes involvement and development of the voluntary sector. However, over-arching joint commissioning is at an early stage.

74. Capacity is improving, for example almost all looked after children now have an allocated social worker, but there continue to be significant staffing shortfalls in some areas affecting consistency of service. Additional resources have been identified and are well targeted to address this. The workforce strategy is at an early stage of development and there are also pressures on services due to shortages of local foster care provision. Current information and communication technology provision is not fully efficient in supporting service delivery and performance management, for example with delays in accessing information due to records being stored on different systems. While consultation and engagement with most partners is good, some headteachers feel insufficiently involved in the establishment of TASCCs or in the development of the CYPP.

75. There is good financial capacity and value for money is secured. Reviews and benchmarking have achieved savings, for example leading to revised contracts for school transport arrangements. Regional commissioning has helped secure cost savings and increased external placement opportunities for looked after children. Appropriate financial provision and control is in place, for example with central monitoring of the funds that have been devolved to local CYPSPs to enable them to deliver against the county-wide and local priorities. School balances are high but an approach for tackling excessive school balances has been agreed with the Schools' Forum. The council has allocated an additional £13.278 million to its budget for children and young people over the next three years. This will provide an additional 235 members of staff and has been allocated in accordance with detailed business plans well focused on priorities and securing improvement. Further resources have been earmarked for an ambitious Building Schools for the Future programme, with agreement in principle from the Schools' Forum that

delegated funds will be top-sliced to meet the 'affordability gap'. Provision is in place to meet the existing and anticipated financial requirements to deliver improved services, with due regard being paid to achieving value for money.

76. Performance management is adequate. A robust framework is in place to enable effective monitoring and management. There is clarity regarding the high level targets and careful monitoring, reporting and managing performance against these. Effective challenge to performance is provided by senior managers, for example to delays in social care assessments, and by politicians, such as highlighting the low levels of take-up of measles, mumps and rubella vaccination in Colchester. Findings from external reviews have translated into appropriate improvement actions, for example increased police staffing to deal with child abuse issues. Learning is effectively shared, for example fraud prevention training for schools and council staff. Staff feel well supported through regular supervision and have personal objectives that clearly link to corporate and service aims. There are examples of children and young people contributing to quality assurance, such as in the integrated youth service where young people's involvement in planning, development and quality assurance is outstanding.

77. However, target-setting is not fully robust in all service planning. Targets are not consistently specific, measurable, achievable, relevant and time-specific, such as those for the integrated youth service and tackling teenage pregnancy. Although responsibility for delivering actions is specified in the CYPP action plan, this is sometimes spread across several officers from partner organisations, which makes 'ownership' of the delivery unclear. Local CYPSPs are shaping their objectives, informed by increasingly comprehensive data about their areas, but setting of baselines and of clearly measurable local targets is at an early stage. Underperformance against key targets is carefully analysed and targeted remedial action is put in place, for example if health checks for looked after children are not taking place. The school improvement service is strong and is tenacious in tackling underperformance, successfully reducing the rate of schools going into a category of concern through effective intervention strategies. However, there are weaknesses in qualitative monitoring and reporting in social care. The Annual Representations and Complaints report for 2007/08 has effectively highlighted qualitative case practice issues, some of which indicate poor response to serious safeguarding issues. However, this has not been used systematically to improve practice. It also revealed that complaints handling is weak with long delays in response and resolution. Complaints made at local offices are not always formally recorded. Limited monitoring is possible of the take-up and impact of some services, for example of ethnicity, due to poor recording practices in the integrated youth service.

78. The capacity of the council and its partners to further improve outcomes for children and young people is good. Leadership and management are strong. Performance across a number of important indicators show sustained improvement over the past three years, including stability of placements for looked after children, the timeliness of core assessments and numbers of young people in education, employment or training. Areas for improvement are well

understood and robust action is taken to improve underperformance. Positive outcomes have already been achieved against most of the issues identified by the 2007 APA. Unvalidated GCSE results show that the number of schools below the 30% floor target has reduced significantly in 2008. Although staff capacity in some key areas remains stretched, a firm and focused approach is being taken to securing and developing a workforce capable of delivering good quality services. Senior politicians and officers across the Children's Trust are united in their commitment to achieving better outcomes, with significant extra investment agreed to help ensure delivery of the strong shared ambition for improved prospects for children and young people in Essex.

Annex A

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

The full annual performance assessment for 2008, which was published on 17 December 2008, can be found at:

[http://www.ofsted.gov.uk/oxcare_providers/la_download/\(id\)/4785/\(as\)/APA/apa_2008_881.pdf](http://www.ofsted.gov.uk/oxcare_providers/la_download/(id)/4785/(as)/APA/apa_2008_881.pdf)

Annex B: Summary of the Enhanced Youth Inspection Report

Main findings

1. The quality of youth work provision in Essex is good. The local authority sufficiently secures the provision of youth work and provides good strategic direction and support. Young people achieve well and there are notable examples of outstanding achievement. The quality of youth work practice is good. Youth workers know the needs of the young people with whom they work and successfully engage them in interesting and challenging learning programmes. Accreditation is used to good effect in validating young people's learning. A good range of learning opportunities is supported by access to high quality resources such as outdoor education centres and mobile provision. Premises are welcoming and generally in good condition. Targeted youth work addresses social inclusion well. However, the promotion of equalities and diversity is inadequate with few examples of youth work programmes that extend young people's understanding of these issues. There are gaps in provision for gay, lesbian and bisexual young people and the growing population of young people of Black and minority ethnic heritage.

2. Leadership and management are good. Managers have maintained good staff morale and high quality youth work during a period of significant change. However, delivery plans are insufficiently specific and measurable. Management information systems do not support accurate assessments of performance against priorities. Safe recruitment practices have been insufficiently robust but the local authority is taking steps to remedy this. Young peoples' involvement in decision-making at all levels is outstanding. They are meaningfully involved in shaping services across the county.

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	3
3	Leadership and management	3

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

Strengths

- Young people achieve high standards.
- Youth work practice is good.
- Young people's involvement in decision-making is outstanding and results in tangible change.
- Youth work targeted at vulnerable groups promotes social inclusion.
- The local authority provides good support for youth work.

Areas for development

- Improve the promotion of equality and diversity in youth work programmes.
- Develop management information systems that capture the impact of youth work.
- Ensure that all objectives in delivery plans are specific and measurable.

Annex C

CORPORATE ASSESSMENT ACHIEVEMENT – CHILDREN AND YOUNG PEOPLE¹

Note: the fieldwork for this joint area review took place in September 2008 and is based on the information used for APA 2007.

1. Outcomes for children and young people in Essex are adequate. Most health outcomes are good. The large majority of children and young people report feeling safe. However aspects of safeguarding practice are inadequate. Educational outcomes for all children and young people are adequate. Pupils with learning difficulties and/or disabilities make good progress. Outcomes for looked after children are adequate. Children and young people are well involved in planning and decision-making. High numbers of young people are in education, employment or training.
2. Service management in Essex is adequate. Ambition is good with high level commitment and good leadership well supported by clear objectives and top-line targets. Ambitions are well reflected in plans. However, there is no robust strategic framework for equality and diversity across partnerships. Prioritisation is good, with clear shared priorities based on the needs analysis. There is an effective strategy to deliver priorities, although the quality of target-setting is variable.
3. Capacity is adequate. Children's Trust arrangements are in place and working effectively. Scrutiny arrangements provide robust challenge. Capacity is improving but there continues to be significant staffing shortfalls affecting the quality and range of services. Financial capacity is good and value for money is secured. Performance management is adequate, with clarity regarding the high level targets monitoring, reporting and managing performance against these. However, target setting is not fully robust in service planning. Staff feel well supported through regular supervision and have personal objectives that clearly link to corporate and service aims
4. The combined work of all local services in securing the health of children and young people is generally good. Young people benefit from good preventative and diversionary drug and alcohol services with ready access to assessment and treatment. Teenage conceptions are lower than similar areas, but not reducing as quickly. Services are well targeted at neighbourhoods with higher rates. Participation in the Healthy Schools programme is not as high as similar areas. Health outcomes for looked after children are adequate. A comprehensive CAMHS is developing. Assessments are timely but access to follow-up treatment is variable.

¹ Judgements contained in the corporate assessment of children's services are based on a combination of the outcomes of the joint area review and the latest published annual performance assessment report (APA 2007) available at the time of the inspection.

5. Overall, arrangements to ensure that children and young people are safeguarded are inadequate. There continues to be a lack of clarity about thresholds for children's social care services. All children in need of protection plans are allocated to qualified social workers. However some social work caseloads are unacceptably high, leading to cases not being closed in a timely or safe manner, and there are examples of child protection practice falling below acceptable standards. The recruitment system is not sufficiently secure to ensure safe recruitment practices.

6. The impact of all local services in helping children and young people to enjoy their education and to achieve well is adequate. At the end of Key Stage 1 attainment is improving and is better than the national average. At Key Stage 2 attainment is in line with national and statistical averages. Attainment at the end of Key Stage 3 is slightly above average. Standards by the end of Key Stage 4 are improving and are also slightly above national averages, although slightly below statistical neighbours. Contextual value added (Key Stages 2 to 4) fell slightly in 2007 and is below average. School improvement services offer good and valued challenge and support to schools. There has been a reduction in the number of schools in special measures and unvalidated GCSE results show that the number of schools below the 30% floor target has reduced in 2008. Children and young people with learning difficulties and/or disabilities make good progress.

7. The impact of all local services in helping children and young people to contribute to society is good. Opportunities for their involvement in decision-making and planning of services are many and varied. Work to prevent offending is good and anti-social behaviour is well tackled. While rates of first-time offending are higher than similar areas, work to prevent re-offending is good, with rates below similar areas and the national average. The impact of all local services in helping children and young people achieve economic well-being is adequate. The percentage of young people aged 16–18 years who are not in education, employment or training is below national averages, but slightly above statistical neighbours. The percentage of teenage parents in employment, education or training is improving but remains below similar areas. Too many young people involved in offending are not in education, employment or training. Young people leaving care are well supported.

8. The capacity of council services to improve is good. Leadership and management are strong and recent performance has improved in most areas. There is good awareness of most areas for improvement and recent significant investment has been agreed to address these.

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 Essex 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).