



Joint area review

Buckinghamshire

Children's Services Authority Area

Review of services for children and young people

Adult Learning Inspectorate
Audit Commission
Commission for Social Care Inspection (CSCI)
Healthcare Commission
HM Crown Prosecution Service Inspectorate
HM Inspectorate of Constabulary
HM Inspectorate of Court Administration
HM Inspectorate of Prisons
HM Inspectorate of Probation
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Audience	Published	Reference no.
All	12 December 2006	825



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Introduction

1. This joint area review was conducted using the arrangements required under Section 20 of the Children Act 2004. It was carried out by a multi-disciplinary team of nine inspectors from the Office for Standards in Education (Ofsted), the Commission for Social Care Inspection (CSCI), the Healthcare Commission (CHAI), the Adult Learning Inspectorate (ALI) and the Audit Commission. The review was undertaken according to the requirements of the *Framework for the Inspection of Children's Services*.

2. The review was linked to the contemporaneous corporate assessment of the local council by the Audit Commission and its findings are represented in the relevant part of the corporate assessment report.

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

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

5. The review took place in two stages consisting in total of three weeks over a 12-week period. The first stage reviewed all existing evidence including:

- self-assessment undertaken by local public service providers
- a survey of children and young people
- performance data
- the findings of the contemporaneous inspection of the youth service
- planning documents
- information from the inspection of local settings, such as schools and day care provision
- evidence gathered during the earlier Youth Offending Team inspection
- briefings from staff within inspectorates, commissions and other public bodies in contact with local providers.

6. The second stage involved inspection fieldwork. This included studies of how far local services have improved outcomes for a small sample of children and young people, some of whom have the most complex needs, and a study

of provision in High Wycombe. It also included gathering evidence on nine key judgements, selected because of their critical importance to improving outcomes for children and young people in the local area. This included discussions with elected members of the local authority and their equivalents in other public agencies, officers from these agencies, service users, and community representatives. A review of case files for children and young people receiving support from a number of local agencies was also included.

Context

7. Buckinghamshire has a population of 479,000 and lies in the south-east of England to the north of London, with small market towns in the more rural north, and a more urbanised south. Approximately, 40% live in the rural areas. Under 19s make up 25.7% of the population. The two largest centres of population are Aylesbury and High Wycombe, with populations of 69,000 and 77,000 respectively. The ethnic makeup varies across the four administrative districts: Wycombe has the largest proportion of black and minority ethnic (BME) residents (12.1%), followed by South Bucks (6.6%), Aylesbury Vale (5.9%), and Chiltern (4.5%). Asian communities form the highest percentage among BME groups.

8. The average household income is 34% above the national average and unemployment is half the national average. Small areas of relative deprivation exist and 1% of the population of Buckinghamshire live in areas within the 30% most disadvantaged in the country. Recorded crime is well below the national average. Part of Buckinghamshire lies within one of four growth areas in the south-east, and a large increase in housing will encompass Aylesbury and the north of the county.

9. The council has undergone a reorganisation to deliver the Every Child Matters agenda. Portfolio holders and a Director of Children's Services are in post and appointments to the senior management team have recently been completed. The Local Safeguarding Children Board (LSCB) is in place.

10. There is a history of partnership working across agencies and a shadow Children's Trust has been established. The Children and Young People's Plan (CYPP) is linked to the Corporate Plan, the wider community strategy and Local Area Agreement (LAA), and sets out Buckinghamshire's priorities for improving children's services.

11. Buckinghamshire has 320 children and young people in the care of the local authority. There is a pupil population of 76,000, and BME pupils comprise 18.9% of the total in primary schools and 18.1% in secondary schools. There are two nursery schools, 185 primary schools, a selective secondary education system with 13 grammar schools and 21 upper schools, five pupil referral units and 13 special schools.

12. The Thames Valley Police has a Basic Command Unit which serves Buckinghamshire.

13. The trusts providing health services for the children of Buckinghamshire fall within the South Central Strategic Health Authority area. Primary care for children in Buckinghamshire is provided by the Vale of Aylesbury Primary Care Trust (PCT), Chiltern and South Bucks PCT and Wycombe PCT: these are due to be merged shortly into one. Two acute hospital trusts serve the area's children, and include Accident & Emergency facilities: Buckinghamshire Hospitals NHS Trust comprises Stoke Mandeville and Wycombe hospitals, and Heatherwood and Wexham Park Hospitals NHS Trust has its sites in Slough and Ascot. Both trusts also provide services to children from outside the Buckinghamshire area. Child and Adolescent Mental Health Services (CAMHS) are provided by Buckinghamshire Mental health NHS Trust and Vale of Aylesbury PCT.

14. Milton Keynes, Oxfordshire, and Buckinghamshire Learning and Skills Councils (LSC) are partners with the local authority, Connexions, colleges, training providers and schools in addressing the 14-19 strategy. Post-16 education and training is provided by two further education colleges, 40 school sixth forms (of which six are in special schools) and a range of work-based learning providers. Adult and community learning, including family learning, is provided by Buckinghamshire Adult Education Service.

Summary Report

Outcomes for children and young people

15. Outcomes for children and young people in Buckinghamshire are generally good. Children and young people appear safe.

The impact of local services

16. **The impact of local services in improving outcomes for children and young people is good.** Strategic planning across the health community is good and based on an analysis of the needs of children and young people. Mental health services are good although some children and young people face delays in receiving treatment. Effective action is taken to protect children most at risk, but high thresholds for access to social care services result in delays in responding to some less urgent cases. Good multi-agency activity supports many children and families but practice is too variable. Services help young people to achieve well in school and attainment standards are high; however, not all excluded children receive full-time alternative education. Special schools perform well, but progress in implementing changes to the provision have occurred only very recently. Children contribute well to society and receive support to deal with the challenges they face. There are opportunities to contribute their views and influence the services they receive. A strategic approach to consult over service design is at an early stage. Local services enable young people to achieve economic well-being and rates of young people

in education, employment and training are good. Joint work provides a range of suitable housing, although a number of families and care leavers currently live in inadequate accommodation. The management of services is good and plans are well linked, with shared priorities among partners. Capacity for improvement in the council is good, but budgetary challenges in health are beginning to impact adversely on services and outcomes.

Being healthy

17. The impact of all local services in securing the health of children and young people is good. Outcomes overall meet, or are better than, national averages. Families and carers are well supported to help keep their children healthy. The Healthy Schools Programme offers a range of good initiatives. Both local hospitals offer accident and emergency services to children, although only one is appropriately staffed. Plans are in place to transfer children's acute services from Wycombe to Stoke Mandeville, and with only limited public transport connections, staff and families expressed concerns at the possible delays in access and treatment that might result. Mental health services for children and young people are good. Access to assessment is within acceptable four week timescales, but there are some delays in receiving treatment. Action is being taken to develop a joint commissioning approach to deliver a comprehensive service.

18. The provision for looked after children is good and the number of completed health assessments are in line with national averages. A specialist nurse and designated paediatrician strengthen the service. Services for most children with learning difficulties and/or disabilities, and complex and continuing care needs, are good especially for younger children. The appointment of a matron and a specialist learning disability consultant are positive developments.

19. Data are used well to improve services and for analysing community needs. Strategic planning across health communities is good. There are many examples of effective multi-agency working at an operational level. However, the three merging PCTs are facing financial pressures and resulting reductions in service are having a negative impact on some partnership activities.

Staying safe

20. The impact of all local services in keeping children and young people safe is adequate. Action is taken to protect children and young people most at risk of abuse. However, the threshold to access social care services is high, and there are unacceptable delays in responding to some less urgent cases. Multi-agency policies and procedures are in place to safeguard children. The LSCB is well supported and funded by partners, and provides an effective lead. Good training in child protection is provided to those working with children.

21. There is good practice to support children and families, but it is variable and there is some poor planning. All children on the child protection register (CPR) are allocated a qualified social worker, but too many children in need remain unallocated. Nearly all looked after children have a qualified social worker and their placement stability is good. Reviews for looked after children and for those on the CPR are held within timescales. Adoption performance is satisfactory overall. There is a range of family support services but this is insufficient to meet need, and many have waiting lists. The council recognises that there are too few foster carers with the result that placements have to be purchased outside Buckinghamshire for too many children. Initiatives to recruit more foster carers are too recent to have had a significant impact. The council has had some success in increasing the numbers of permanent social workers through a range of initiatives. The service provided to care leavers is generally good.

22. There is a good range of support for families of children with learning difficulties and/or disabilities but insufficient to meet need. There are some good examples of integrated practice between agencies, but the integration of services for these children is at an early stage. Too few young people have transition plans to move in to adult services, although practice is improving to secure their futures.

Enjoying and achieving

23. **The impact of all local services in helping children and young people to enjoy their education and recreation and to achieve well is good.** There is an extensive range of well developed support for parents and carers to help their children succeed at school. The strategy for early years and childcare is sound and builds on existing Sure Start programmes. Standards of attainment are very good at most stages of children's and young people's education. The National Primary Strategy and an intensive support programme are beginning to improve the attainment of 11 year olds in areas of relative deprivation, particularly for children and young people of BME heritage. The attainment of 14 year olds is good and the number of 16 year olds attaining five or more higher grade GCSEs is among the highest in the country. The results of 16 year old BME students are improving. The council has a good understanding of the weaknesses in the performance of individual schools and specific groups of children and young people.

24. Admissions to schools are managed effectively within the selective system in the county. The management of secondary school places is good and the number of surplus primary school places is acceptable. Attendance at school is good. Despite recent improvements, not all children and young people excluded from school receive full-time alternative education. Good partnerships enable children and young people to take part in a wide range of safe and accessible learning and recreational activities outside the normal school day.

25. Support for the education of looked after children is good. Their attainment and attendance at school is improving. The council's multi-agency team to support looked after children provides good additional support. However, too few have up-to-date personal education plans and there is some inconsistency in the quality of these plans.

26. Support for children and young people with learning difficulties and/or disabilities is adequate. The council has an appropriate strategy for including pupils within mainstream schools. Special school provision provides a good service for the children who attend. There has been lengthy consultation to develop and implement a revised strategy for special educational needs, but action is only now taking place to review the role of, and funding for, special schools and funding arrangements for statements of special educational needs. There are good systems for monitoring the attainment and progress of pupils with learning difficulties and/or disabilities working at National Curriculum levels, but the development of more appropriate measures for children working below these levels is very recent.

Making a positive contribution

27. **The impact of all local services in helping children and young people to contribute to society is good.** Effective guidance for social and emotional development provides the majority of children and young people with opportunities to develop positive attitudes to their lives and learning. There is good support to help children and young people, including those with learning difficulties and/or disabilities, deal with many routine changes and major challenges in their lives. In the last year, there have been two exceptional examples of multi-agency action to support vulnerable groups of young people during crises in which their communities were under strain in the national spotlight, and breakdown has been prevented. Partnerships work effectively to reduce antisocial behaviour. Continued support for personal development in schools, youth services and partnerships are evident in the generally responsible behaviour and low incidence of offending by young people in the area.

28. Services consult children and young people routinely when making decisions about their individual needs and there is good practice to involve looked after children directly in their reviews. There are widespread opportunities for young people to share their views through school councils and some conferences and questionnaires. However, an overall participation strategy to engage more young people, including the most vulnerable groups and younger children, in contributing routinely to the management and design of services is at an early stage. Links between local and county-wide representational bodies are not yet developed.

Achieving economic well-being

29. **The impact of all local services in helping children and young people achieve economic well-being is good.** Help for many young people to prepare for working life is good. Rates of participation by 16-18 year olds in education, employment and training in Buckinghamshire are particularly high. An improving range of vocational study options is available to those aged 14-16. School sixth forms offer a wide range of AS/A levels. Colleges and work-based learning providers offer an adequate range of vocational and work-based learning. Standards are high in sixth forms and at least satisfactory elsewhere. Collaborative arrangements to plan provision for pupils and young people aged 14-19 provide an adequate framework for development to take place. Close working relations exist between the council, the local LSC and Connexions. This partnership has yet to develop an effective strategy to meet the needs of BME learners aged 16-19.

30. Community regeneration focuses appropriately both on projects in specific geographical areas and action to benefit residents county-wide. District councils and housing association partners work actively and effectively towards ensuring that children and young people live in suitable homes, but shortages of appropriate social housing for families exist. Coordination of efforts to tackle homelessness across the county is improving, but families with children stay too long in temporary accommodation in some areas.

31. The service received by young people leaving care has improved substantially over the last two years, and is now generally good. However the proportion of care leavers in education, training, and employment is low compared to that of other young people. Accommodation for care leavers is improving and adequate for most. Too many care leavers are still housed inappropriately in bed and breakfast accommodation. Learning provision for young people aged 16-18 with learning difficulties and/or disabilities is good. Planning of provision for those with learning difficulties and/or disabilities aged 19 and over is poorly coordinated, and the LSC does not currently have an adequate strategy to ensure provision is available to meet their needs.

Service management

32. **The management of services for children and young people is good. The capacity to improve the council's services is good, while the capacity to improve local services is adequate.** The shared ambitions of the council and its partners are set out clearly in the CYPP and these are linked well to other strategic plans. Partners are committed to these ambitions through the soon to be launched Children's Trust and their leadership of the delivery of specific outcomes. The priorities in the plan are based clearly on the needs analysis and on the priorities of the children and young people, and the parents and carers consulted. There are robust delivery plans for each of the outcomes, which are monitored by the lead partner and the Children's Trust Board. However, the priorities and targets do not always give explicit attention

to the full range of equality and diversity issues and the strategy for delivery of preventative services is not yet robust.

33. The capacity of the council and its partners to deliver their ambitions is adequate. Significant cuts to health budgets are having an impact on some services and it is not currently clear how this will affect the integration of children's services. Financial management and value for money within the council are generally good, with robust processes to identify and deliver efficiencies and to fund priorities. Progress on the Every Child Matters agenda has been relatively slow but is now accelerating with the appointment of new senior managers. The development of joint commissioning, the workforce strategy, the Common Assessment Framework and lead professionals is behind schedule. Staff are committed and enthusiastic and some innovative approaches to recruitment have been successful. However, restricted resources and staff recruitment difficulties continue to affect services to some vulnerable children. Performance management is good, supported by a strong culture in the council and an effective performance management framework. Performance management of the Children's Trust is based on established practice from previous partnership work and partners have included targets in their own plans. The council and a wide range of partners show a satisfactory overall understanding of their performance as reflected in their self-assessment.

Grades

Grades awarded:

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

	Local services overall	Council services	Health services
Being healthy	3		
Staying safe	2		
Enjoying and achieving	3		
Making a positive contribution	3		
Achieving economic well-being	3		
Service management	3		
Capacity to improve	2	3	
Children's services		3	
The education service		3	
The social care services for children		2	
The health service for children			3

Recommendations

For immediate action

The council and its partners should:

- review and agree thresholds for referral to social care, including children and young people with learning difficulties and/or disabilities
- ensure all looked after children and young people with learning difficulties and/or disabilities have good quality and up to date care plans (including personal education plans) or transition plans, which are implemented within appropriate timescales.

For action over the next six months

The council and its partners should:

- increase the impact of consultation with children and young people on the design and shape of services for them
- ensure that the implementation plans for the Every Child Matters agenda and the joint commissioning strategy identify sufficient resources to allow the delivery of change while maintaining the performance of services.

The council should:

- ensure pupils permanently excluded from school receive full-time alternative provision
- further develop its recruitment and retention strategy for social work staff, and, in the interim, review workloads to ensure work is allocated and progressed
- implement plans for the young people's participation network.

The health services should:

- ensure that there is a sufficient number of children's nurses to staff paediatric A&E services
- ensure speedier access to assessment and treatment within CAMHS.

For action in the longer term

The council and its partners should:

- ensure a sustained improvement in outcomes in education, training, and employment for young people from BME backgrounds and for other vulnerable groups, including care leavers
- reduce the length of stay for families with children in temporary accommodation, and ensure an adequate supply of semi-independent and supported accommodation for care leavers.

The council should:

- ensure that special school provision and funding is well matched to the changing needs of children and young people to deliver the county's commitment to educating all pupils in their local communities where appropriate.

Main Report

Outcomes for children and young people

34. Outcomes for children and young people in Buckinghamshire are generally good.

35. Children and young people are generally healthy. The area has met most of the national health targets for children and young people. A low proportion of expectant mothers smoke during pregnancy, a high percentage of women breast-feed and infant mortality is low in most, but not all, parts of the county. Immunisation rates are higher than the national average and oral health is good in the under fives. The number of children who are admitted to hospital with childhood illnesses is lower than the national average; there is a lower than average incidence of physical disease and mental ill health within the young population. The incidence of substance misuse for children and young people under 15 years of age is in line with national averages, although for over 16 year olds there are slightly lower rates of illicit drug taking than nationally, with alcohol the most frequently used substance. Admissions to hospital as a result of overdoses or substance misuse are lower than the national average. Teenage pregnancy rates in 15-17 year olds are falling, although the rate of abortion is much higher than the national average. The number of deaths of children under 15 is lower than the national average.

36. Children and young people appear safe. Multi-agency policies and procedures are in place to safeguard children. Almost all children in a survey carried out for this review report feeling safe. Road traffic deaths and serious injuries have reduced by 27%. The county has the lowest rate of referrals to social care when compared with similar authorities. The number of initial assessments completed on time has fluctuated; it rose last year to reach levels slightly below comparator councils but the most recent unvalidated data indicates a significant fall. The number of core assessments completed on time is just below comparator authorities. The number of children on the CPR is in line with that of similar authorities. All children on the register are allocated a qualified social worker and the majority remain registered for between 0-6 months. The county has a consistently low percentage of looked after children, half that of the national average and below that of its comparator group, but a high proportion of them are placed outside the authority. Placement stability for children looked after by the council is good and most are allocated to a social worker. The number of children adopted from care is low. There are good collaborative arrangements between teams to improve transition arrangements

for children with learning difficulties and/or disabilities but less than half have transition plans to adult services.

37. Most children and young people achieve well. Standards of attainment are generally well above national averages and above those found in similar authorities. Most children and young people surveyed see themselves as doing quite well or better at school. Many take part in an extensive range of recreational and out of school learning activities. The quality of childcare and early years provision is good. Most recently, fewer schools have been identified as having serious weaknesses or needing special measures than in previous years. One secondary school in 2005 did not meet the minimum level of performance by pupils at GCSE required by the government, and a small number of primary schools did not meet the minimum levels set. These are in areas of relative deprivation and the council has an appropriate strategy in place to improve their performance. Attendance at school is better than national averages and unauthorised absence remains low in most schools. Fewer pupils than in the rest of the country are permanently excluded from schools, but there is a rising trend in permanent exclusions from primary schools and some secondary schools, with an over representation of some minority groups.

38. Attainment in 2005 was generally higher than in other similar areas and well above national averages. The number of 16 year olds attaining five or more higher grade GCSEs continues to improve. Buckinghamshire schools do very well on this measure of attainment compared with similar local authorities. Most children with learning difficulties and/or disabilities are supported well. Overall, the progress of BME groups improves as they proceed through secondary education. Looked after children make satisfactory progress throughout their schooling: at 16 years old they perform below the level of other young people, but the most recent unvalidated data shows a significant improvement in the percentage achieving five A*-C grades at GCSE. Within the youth service, young people's achievement is generally good and the percentage of young people who use the service is well above average.

39. Most children and young people behave responsibly and contribute well to their communities, although their ability to affect wider decision making is limited. Children and young people are supported well to develop socially and emotionally. The majority, including children with learning difficulties and/or disabilities and those facing more complex challenges, such as young carers, cope very well when starting and changing schools. Many children benefit from effective partnership work to reduce anti-social behaviour and the proportion of young people who offend in the area is low compared with the national picture. The extent to which children and young people are involved in reviewing decisions about their own lives is satisfactory, with some examples of very good practice for looked after children. The majority of young people have positive attitudes to their schools and communities, and are happy with their ability to contribute within their immediate sphere of interest. Some young people are involved in staff

interviews. A limited number of young people were consulted on, and influenced, the CYPP, and their views on the local transport plan are being actioned. However, very few have the opportunity to share their views and influence decision making more widely.

40. Most children and young people have good opportunities to achieve economic well being and are prepared well for working life.

Success rates at level 3 are high. Point scores at AS/A level are above national averages and improving. The proportion of young people who progress to higher education is significantly above national averages. Success rates at level 1 and 2 are satisfactory. In work-based learning, recent success rates in Entry to Employment (E2E) and apprenticeship programmes are generally at, or approaching, national averages. The proportion of young people aged 16-18 who are not in education, employment or training is low and falling steadily: at 3.8%, it stands at under half the national rate.

41. Participation by young people aged 16-18 with learning difficulties and/or disabilities in education employment and training is particularly high, but unclear for those aged 19 and over. The proportion of looked after children in education employment and training is too low, but in line with national averages. Too many young people from BME backgrounds are not in education, employment or training and make up over 25% of this group. There is a shortage of suitable permanent accommodation for young people living independently, and of appropriate social housing for families.

The impact of local services

Being healthy

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

43. Strategic planning across the health communities is good and based on a sound analysis of need. Data and information are used constructively to support local services. There is productive multi-agency working at an operational level. Lead specialists for children and young people within the PCTs and the public health service provide effective support to local partnerships to improve health outcomes for children.

44. Families and carers are generally well supported in keeping their children healthy, good childcare information is available throughout the county. There are positive and well received multi-agency initiatives to support young mothers and their children, such as drop-in centres, organised between health organisations, the voluntary sector and the police. Asian mothers in and around Wycombe receive good breast-feeding support from midwives and health visitors, although access to interpreters is limited. Dental decay is lower in the under five age group through initiatives such as Meet the Dentist.

45. School-based health education is delivered well overall through the Healthy Schools Programme, including a successful launch of the healthy packed lunch and school fruit schemes. The number of schools in Buckinghamshire that engage in the programme is low in comparison with the national average.

46. The recent children's hospital review rated Buckinghamshire Acute Hospital Trusts as adequate. They meet the national average in relation to the access of treatment and waiting times. Both Stoke Mandeville and Wycombe hospitals have dedicated children's A&E facilities. Wycombe Hospital has the appropriate number of children's nurses working in A&E, but Stoke Mandeville has fewer children's nurses than average and cannot always deliver 24 hour children's nursing cover. It provides a children's nurse for 10-12 hours a day and, at other times, children are seen in the adult A&E. This is unsatisfactory.

47. Following consultation, the health organisations have agreed to transfer acute children's services from Wycombe Hospital to Stoke Mandeville, situated 17 miles away. Staff and members of the public expressed concerns at the delays that might result in some children accessing emergency care following the move. Concerns that were expressed focused on the perceived inadequacies of the public transport system.

48. The work of the CAMHS is good, but the service is aware that further improvements are required. The majority of children are assessed within four weeks. The number of non-specialist cases that receive treatment within four weeks is slightly lower than the national average, although most are treated within 26 weeks. Action has been taken to recruit and train psychologists to enhance the service and to offer suitable intervention at an earlier stage. A joint commissioning approach is being developed to deliver a more comprehensive service. All three Buckinghamshire PCTs achieved the maximum score on the CAMHS performance indicator. CAMHS offers 24 hour access for all 16 and 17 year olds, and for young people with learning difficulties. This service applies across the county.

49. The health provision for looked after children is good. The number who have an annual health assessment is in line with the national average. The looked after children's nurse delivers an effective service and successfully encourages young people to engage in their health reviews. A paediatrician for looked after children has recently been appointed. There are delays for some looked after children in accessing mental health treatment, although others involved with the adoption support service are provided with a fast and effective response. Staff in the leaving care service receive good advice and support from the CAMHS service. Specific sexual health policies have been developed for children who are being looked after.

50. Services for children with learning difficulties and/or disabilities, complex and continuing care needs are generally good, especially for the younger age group. A specialist disability consultant provides a service for children with learning disabilities and is able to support young people in the transition to

adult services. A matron, based in the Wing respite unit for children with complex needs, has been in post for a year. The employment of both these specialists is a welcome development. There are social workers for children with disabilities and complex needs at both Stoke Mandeville and Wycombe hospitals. There is a spinal rehabilitation unit at Stoke Mandeville. Wycombe PCT has identified the development of a fully integrated service for children and young people with learning difficulties and complex needs as a key priority.

51. Some partnership activities are being affected by financial pressures. The Chiltern and South Bucks, Vale of Aylesbury and Wycombe PCTs will merge to become Buckinghamshire PCT on October 2006. The merging PCTs are facing budget cuts and capacity may be reduced. The community health services are being assessed on a priority basis to ensure the children with the greatest need will be able to receive appropriate services and support. Some health promotional initiatives are no longer in place and some staff vacancies are subject to vacancy control measures.

Staying safe

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

53. Appropriate action is taken to protect children who are most at risk of abuse. Thresholds for access to social care services are high and the rate of referrals accepted by the service is low in relation to Buckinghamshire's comparator group. There are unacceptable delays in responding to some referrals that present less immediate concerns, and a lack of rigour in following written procedures and timescales for referral and assessment.

54. All children on the CPR are allocated to a qualified social worker but systems for allocating other cases are insufficiently robust. A number of these, particularly children in need but also some looked after children, are not allocated to a named social worker but are managed reactively by a duty social worker if further requests for help are made. Information systems for the delivery of social care services are adequate.

55. Child protection reviews are held on time and are chaired by Independent Reviewing Officers. A low proportion of children are on the CPR under the category of sexual abuse. A child protection adviser has been appointed to manage the group of reviewing officers and to reinforce consistency in the management of cases of child protection and looked after children. Looked after children are reviewed regularly in line with statutory requirements, although there is insufficient focus on their health and education plans.

56. The response of the council and its partners to the wider safeguarding agenda has been good. The LSCB is effective and has been in operation since January 2006 with an experienced independent chair. The LSCB has representation from partners at a senior level, and includes membership from district council. It receives appropriate multi-agency funding and has agreed

priorities for its work, including auditing the performance of partner agencies. Effective multi-agency public protection arrangements are in place and timely reports are provided to the LSCB.

57. A Complex Cases Team, established originally to lead an effective investigation in to abuses within a school, has been retained to support the authority in its management of allegations against staff. Good multi-agency child protection training is provided to a wide range of statutory and voluntary agencies. The council and its partners have begun to respond effectively to the increase in reported incidents of domestic violence. A voluntary organisation, Women's Aid, has been funded to run a pilot project to support primary school children who have witnessed or have been the victims of domestic violence, and, following its success, a group for older children has been agreed.

58. High numbers of children attend good accident prevention courses annually, and road traffic deaths and serious injuries have reduced by 27%. School pupils are funded by district councils to attend Hazard Alley, an accident prevention scheme, and the Healthy Schools Programme provides an holistic approach to personal safety as well as safety in the home.

59. Despite significant efforts and some success in recruitment, there are shortages of qualified social workers and workloads for some are too high. Buckinghamshire has a lower number of qualified social worker posts in relation to its comparator group. There is a high turnover of the agency and locum staff who are employed in some teams. The council recognises that this contributes to delayed responses and a lack of continuity for some families and children.

60. The council and partner agencies, including those in the voluntary sector, have appropriate systems in place to undertake checks on staff who work with children. A Safeguarding in Education team plays an effective role in improving safeguarding practice in schools. It delivers good training in child protection to designated members of staff and governors, and provides well received and valued advice and support.

61. There is evidence of much good practice and information sharing between agencies on individual cases, but this is not sufficiently consistent. Care planning, particularly for looked after children, is variable, with some poor examples. Case tracking undertaken during this review highlighted instances of delay and a lack of focus, resulting in poor permanency planning for some looked after children. In some instances children have to wait too long to receive help from CAMHS. A recent pilot of the Common Assessment Framework identified significant learning points for partners. The difficulties in the implementation of the pilot identified the need for more explanation and preparation in the roll out of the Common Assessment Framework in Buckinghamshire.

62. There is currently a shortage of local foster carers and placement choice is limited. The authority has a range of positive initiatives to increase the number and range of local foster placements but these are too recent to have had a noticeable impact. Too many looked after children are placed far from their local communities, sometimes in costly independent placements. Performance on adoptions overall is satisfactory; although the latest annual figure for children adopted is low, numbers of children are in the system and this will improve the performance. The service provided to care leavers is generally good. Care leavers seen during this review welcomed the consistency of support offered by the leaving care team.

63. A new multi-agency protocol to protect children and young people who go missing usefully broadens the range of agencies involved. Multi-agency funding has also been agreed to enable Barnados to support young people who go missing and are at risk of sexual abuse or exploitation.

64. There is an adequate range of family support services, including those provided by voluntary agencies, although many have waiting lists and availability varies across the county. Universal support for teenagers is good through agencies like Connexions and contracted drug agencies, and there are some effective specialist services, such as the CAMHS outreach team, but these are insufficient and not readily available. The council has recognised the need to improve the coordination of preventive services and feedback from provider agencies, and is taking appropriate measures to address these. Preventive services are a priority in the CYPP, but comparative spend on family support services is low and reductions are planned for next year.

65. The council has a good approach to performance management and the culture is well embedded. Data are collected, analysed and shared with operational staff, and used effectively to improve practice and service delivery.

66. The range of respite and family support services for children with learning difficulties and/or disabilities is good. However, these are not sufficiently resourced to provide support for all children and families who need them. Although there are some good individual examples of integrated service delivery and appropriate processes for transferring funding between health and social care, the integration of services for children with disabilities is at an early stage. A common assessment format and shared care planning are not well developed and there are separate processes for allocating some health and social care resources. There are some effective examples of transition work for young people with learning difficulties and/or disabilities. The development of a transition team has improved joint working between children's and adult services, and this is now adequate. However, too few of these young people have transition plans and there are delays in formulating care plans for some young people before they leave school.

Enjoying and achieving

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

68. There are well developed and extensive arrangements to provide support to parents and carers to help their children succeed at school. The strategy for developing children's centres is sound with an appropriate focus on serving areas of greatest disadvantage. A well managed process has ensured a higher growth than nationally in the number of places for three and four year olds across the county. The strategy builds creatively on existing Sure Start programmes, and a good mix of private and voluntary providers gives parents choice. The development of new children's centres is further improving parents' and carers' access to specialist services. Monitoring, challenge and support to childcare providers to improve the quality of provision are good. The Buckinghamshire kite-mark quality assurance scheme is a strength of this work. The quality of early years provision is good and supports children's development and progress towards meeting the early learning goals. However, at the Foundation Stage in disadvantaged areas, children do less well in communication, language and literacy than other children in the county. An appropriate strategy to improve performance in these areas, particularly for BME children, is in place.

69. Overall standards of attainment are very high and are usually well above national averages at all stages of education. The progress children make is generally in line with, or above, national averages. Challenging targets are set and generally achieved. The National Primary Strategy and an intensive support programme are improving the attainment of 11 year olds in the areas of social disadvantage. The number of 16 year olds attaining five or more higher grade GCSEs continues to improve. Buckinghamshire schools do very well on this measure of attainment compared with similar local authorities. Although children and young people from BME groups generally achieve below the county averages, overall attainment is improving. The CYPP correctly prioritises further improvements in attainment, particularly for 14 and 16 year olds.

70. Buckinghamshire's school improvement service is well regarded and successful at promoting increasing levels of collaboration between schools. The council has a good understanding of weaknesses in the performance of individual schools and specific groups of children and young people. In 2005, one secondary school did not meet the minimum targets set by the government. Overall, the support for schools is good. In primary schools, the intensified support programme and the second local public service agreement are beginning to reduce the number of schools failing to reach minimum targets.

71. The management of secondary school places is efficient and additional secondary places have been made available to meet the growth in pupil numbers. Primary school surplus places are in line with those found nationally.

Admission arrangements are managed effectively and give priority to the most vulnerable groups of children and young people. A high proportion of parents receive their first preference of schools. Attendance at school is good and above the national average. The attendance service is working effectively with a small number of schools to further reduce rates of unauthorised absence.

72. Overall, behaviour in Buckinghamshire schools is good. Schools have confidence in the effectiveness of the behaviour support consultants and the good work of pupil referral units. Exclusions are low, although permanent exclusions show a rising trend. An appropriate range of provision exists to provide education for those children and young people who are permanently excluded from school, but, in practice, only two-thirds receive full-time education. The council is aware that it is not meeting the statutory requirement to provide full-time education for permanently excluded pupils. Good provision is made for children and young people unable to attend school for medical reasons. Support for parents choosing to educate their children at home is good.

73. Children and young people access an extensive range of safe learning and recreational activities outside the normal school day. Good partnerships, for instance with district councils and the voluntary sector, support activities such as sports, outdoor education, music, theatre, museum visits and cultural events. Many young people take part. The youth service provides a very good range of informal learning opportunities for children and young people with learning difficulties and/or disabilities. Youth work is good.

74. Support for the education of looked after children is good. Attendance at school is improving among this group of children. There is a useful range of extracurricular activities such as study support for looked after children. Schools monitor their educational performance effectively, supported by the multi-agency local authority team. Challenging targets are set and attainment is improving. All schools have designated teachers for looked after children. However, too few of these young people have personal education plans and the quality of such plans is variable.

75. Support for children and young people with learning difficulties and/or disabilities is adequate. The council has an agreed strategy for including pupils with special educational needs in mainstream schools and for maintaining specialist provision. Inspections of special schools report good provision. However, preparations to revise the funding strategy for special schools and statutory statements of special educational needs, and to determine the future shape and organisation of special schools, have only recently begun. Consequently, the number of children with learning difficulties and/or disabilities educated in special schools and the number placed outside the county or in independent school places remains relatively high. There are suitable systems for monitoring the attainment and progress of pupils working at National Curriculum levels, but the introduction of the Pivats assessment system and the associated training for schools is very recent. The progress

made by pupils with special educational needs in primary, secondary and special schools is good. The quality of statements of special educational needs is sound but the production of proposed statements within statutory timelines, although improving, can still take too long. The council's disability action plan is being implemented appropriately in schools.

Making a positive contribution

76. **The work of all local services in helping children and young people to contribute to society is good.** Children and young people in early years settings, schools and youth provision make good progress in social and personal development. Many staff provide positive role models and build the self-esteem of those in their care. When surveyed for this review, most children and young people expressed confident attitudes to learning and life in their local communities. Sure Start and Children's Fund programmes successfully tailor activities to reduce the social isolation of groups such as teenage parents and those at risk of underachievement.

77. Information about sources of specialist help to families experiencing difficulties in relationships with their children is widely available, although access to parenting support groups is unevenly spread. The work commissioned from voluntary agencies, such as Homestart and Buckinghamshire Community Childminding Network, plays a vital part in providing intensive support in areas where there is greatest need, although resources are limited.

78. Services work well to support children and their families when starting and changing schools. Personalised arrangements ensure smooth transfers for children with learning difficulties and/or disabilities until they leave school. The extent of peer mentoring schemes is growing rapidly with the increase in the number of Healthy Schools, although there is no area-wide support to spread best practice. A well established young leadership scheme provides a voluntary route for young people to help others in youth and community projects. Particularly effective buddying and befriending schemes are organised for three different age groups by Buckinghamshire Young Carers.

79. Support for children and young people facing more complex challenges is often well focused and increasingly accessible. Many young people turn first for information to the website provided by the council. Connexions and the newly-formed Youth Support Team provide good and integrated specialist advice on housing, health issues and careers. These initiatives, and the recent transitions conference, are highly valued by participants. The extent of youth work in schools to tackle issues such as drug and alcohol abuse is increasing rapidly, if unevenly, across the county.

80. Young people are routinely involved in reviews of services that are provided for them. Connexions and the youth offending service regularly consult young people about the services they deliver. The great majority of schools have councils tackling issues of immediate interest to pupils, such as playground refurbishment. A very high proportion of looked after children

contribute in person to their reviews and three now participate on the council's Corporate Parenting Panel. Children and young people with learning difficulties and/or disabilities contribute well to their own plans until they leave school, although planning for their moves to adult services is weaker. Some young people are involved in the selection of staff such as youth workers and personal advisors, and young people were involved in the selection of the council's senior management team. There is an ambitious target in the Participation Plan to increase the involvement of young people in interviews.

81. Partners have taken care to consult young people on the development and priorities for the Children's Trust; this included vulnerable groups such as hard to reach communities in rural areas and more deprived urban areas, and looked after children. The number reached, however, represents a low proportion of all the children and young people in the area. The proportion of youth centre management committees with young representatives is low. Overall, there are few examples of involvement in managing or shaping services, especially for younger children and those with learning difficulties and/or disabilities. Target numbers for future involvement, especially for younger children, are low and training targets have not been met.

82. Participation in democratic and wider community activity is a key feature of plans for the area. The recently inaugurated Youth Cabinet is showing positive signs of taking the representational role very seriously; their views, for example, over the county-wide transport survey have led to action by the council and partners. The Youth Cabinet links well with established United Kingdom Youth Parliament structures. The full potential to engage young people is not being currently realised. There are no coherent links, for example, between school councils and the Youth Cabinet to enable more young people's views to have real impact on policies. Plans for a Participation Network, providing the mechanism for young people to link with officers and elected members at the appropriate level, are not yet implemented.

83. The great majority of children and young people behave responsibly in Buckinghamshire. Crime and Disorder Reduction Partnerships effectively coordinate information in order to target their activities. Agencies cooperate to make their criteria and thresholds clear and to identify the appropriate children and young people to receive services. There is a good range of effective diversionary programmes, particularly provided through well established arrangements such as Positive Activities for Young People, Serious Fun, the Youth Inclusion Support Programme and widely accessible play schemes. Information on impact and outcomes is not always shared as well as it could be.

84. Buckinghamshire is a low youth crime area compared and effective and timely work is done with offenders to continue the downward trend in re-offending. The youth offending service works strategically and well with partners, including the three PCTs and the council's children's services, to ensure an adequate range of support is in place. Work is appropriately focused

on young people with the most complex problems, including those with mental health needs.

85. An unusual and remarkable example of very prompt and effective multi-agency partnership work was seen in July 2006, and reflected another similar recent example. Following arrests in connection with alleged terrorist activity in High Wycombe, the police, the council, youth workers, and the Council for Racial Equality responded swiftly to work with local young people and their communities to defuse tension and restore community cohesion. This collaboration continued effectively to the next stage to consolidate the positive outcomes.

Achieving economic well-being

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

87. The amount and range of childcare available to parents meets most local demand. A growing proportion is good quality day care. The council provides appropriate information about what is available. Council advice services actively promote entitlements such as family tax credits. The council offers useful financial concessions to families in its sports and leisure facilities. It is acting effectively in response to young peoples' concerns over the high cost of public transport.

88. Help for many young people to prepare for working life is good. Success rates for young people at AS and A level are high and improving. The proportion of young people who progress to higher education is significantly in excess of national averages. An improving range of vocational study options is available to those aged 14-16, provided by schools and consortia which include the county's two further education colleges. Most learners, including many in special schools, benefit from well planned work experience programmes at Key Stage 4.

89. Young people receive regular and appropriate careers education and guidance at Key Stages 3 and 4. Much of it is provided through Connexions, which also makes more wide-ranging information, advice and guidance freely available to children and young people in schools, colleges and through a useful network of advice points in other settings. Young people have good access to an extensive range of personal and welfare support through well planned and often innovative initiatives provided jointly through Connexions, the council's youth service and the voluntary sector.

90. Rates of participation by 16-18 year olds in education, employment and training in Buckinghamshire are particularly high. Few young people are not in education, employment or training. Connexions is particularly skilled at identifying and making contact with those who are not in education, employment or training or at risk of becoming so. It is developing useful strategies to tackle the low proportion of teenage parents who are in education,

employment or training. However, action to identify and meet the specific needs of young people from BME backgrounds who are not in education, employment or training does not receive sufficient priority.

91. Collaborative arrangements to plan provision for pupils and young people aged 14-19 have developed significantly over the last two years. They provide an adequate framework for development to take place. Close working relations exist between the council, the local LSC and Connexions. The 14-19 strategy group, led by the local authority, includes appropriate representation from partners, building effectively on earlier partnership arrangements. However, the number of learners directly benefiting from its initiatives is low at present.

92. Learning provision within the county is good at level 3. Sixth forms in grammar schools and some upper schools offer a wide range of AS/A levels. Standards are high. At level 1 and level 2, colleges and work-based learning providers offer an adequate range of vocational and work-based learning. Standards have risen and are at least satisfactory. Success rates are at or approaching national averages. Sufficient E2E programmes are offered, mainly by the private and not-for-profit sector. However, there is insufficient provision for those not ready for E2E programmes. The amount of English for Speakers of Other Languages provision is not sufficient to meet demand.

93. Action to improve the quality of post-16 learning is effective. The local LSC provides appropriate challenge and support to colleges and work-based learning providers. The local authority school improvement service works effectively with schools with underperforming sixth forms to raise standards.

94. Some useful small scale initiatives have been developed specifically to meet the needs of BME learners. Colleges and some work-based learning providers are particularly effective in recruiting learners from these groups. However, the council and its partners have not developed an effective strategy to meet the needs of BME learners aged 16-19. Many are at risk of continuing to underachieve. Planning emphasises the needs of disadvantaged learners generally, but is not sufficiently sensitive to race and diversity issues.

95. Community regeneration initiatives to meet the needs of children and young people in Buckinghamshire focus appropriately both on projects in specific geographical areas and action to benefit residents county-wide. Much activity takes place in areas of relatively high deprivation, prioritising the needs of families effectively. Consultation with children and young people about development takes place as a matter of course, but it is sometimes superficial.

96. District councils and housing association partners are making adequate progress towards ensuring children and young people live in homes meeting the decent homes standard. Action includes increasing the amount of newly built affordable homes and social housing, and refurbishment of existing property. Currently a shortage of social housing accommodation with three or more bedrooms in the county contributes to significant numbers of families living in unsuitable one or two bedroom units. Co-ordination of effort to tackle

homelessness across the county is improving, but the length of stay for families with children in temporary accommodation is too long in some areas. Despite effective action to increase the amount of appropriate supported housing for teenage parents, provision remains insufficient.

97. The service received by young people leaving care has improved substantially over the last two years. The leaving care team acts effectively to help care leavers move to independence. Most looked after children have pathway plans, prepared with good support from Connexions personal advisors. However, the proportion of care leavers in education, employment and training is low compared to that of other young people in Buckinghamshire and care leavers regionally. The council's new financial support policies for care leavers contain strong incentives for entering education, employment and training, but are much too recent to judge their effectiveness.

98. Accommodation for care leavers is improving and adequate for most. A new pilot protocol to ensure timely planning for care leavers' accommodation needs is already having some positive effects. The range of accommodation available to care leavers currently is not wide enough. Well developed plans for improvement aim to increase the supply of semi-independent and supported accommodation. However too many care leavers are still housed inappropriately in bed and breakfast accommodation.

99. Learning provision for young people aged 16-18 with learning difficulties and/or disabilities is good. Most are in good sixth-form provision in special schools or well planned programmes in further education colleges. Despite recent improvements, collaborative arrangements between the council and its partners for transition planning are insufficient. Too few children and young people with learning difficulties and/or disabilities have transition plans. The range of provision for those aged 19 and over is fragmented and poorly co-ordinated. The local LSC recognises that it does not currently have an adequate strategy to tackle this. Action to achieve the priorities identified in its strategic area review is insufficient. Data on destinations of young people over 19 is not sufficiently detailed to identify the extent to which their needs are met.

Service management

100. The management of services for children and young people in Buckinghamshire is good. The capacity to improve the council's services is good, while the capacity to improve local services is adequate.

101. The council and its partners have set clear and challenging ambitions for children's services in the area which are manifested through their high level strategies: the Community Strategy, the LAA and the CYPP. The CYPP articulates the children and young people strands of the Community Strategy and LAA and is clearly linked to these. These strategic ambitions are understood and supported by local services, including district councils, which are represented on the shadow Children's Trust Board and which are identified as

leads for the relevant outcomes. Partnership working is generally effective and well established, based on the successful work of the Buckinghamshire Strategic Partnership.

102. Prioritisation is good. The CYPP sets out Buckinghamshire's priorities for improvement. The key priority areas are: tackling under-achievement; prevention; active lifestyles and participation by children and young people. They are based on consultation with limited numbers of children and young people, parents and carers and a detailed needs analysis. There are clear links between the gaps identified by the needs analysis, the concerns and priorities of those consulted, and the priorities in the plan, including three cross service priorities. However, priorities do not always give explicit attention to the full range of equality and diversity issues; for example, the relatively high proportion of young people from BME groups who are not in education, employment or training is not targeted.

103. Separate delivery plans give a detailed picture of the actions required to deliver the outcomes, resources and the partners involved. The plans for both the CYPP and LAA use a tested common format which identifies a named lead officer for each outcome and target, the resources required, detailed actions, timescales, risks and the partners involved in delivery. It is clear which partner is responsible for ensuring the success of each outcome. The lead councillor takes responsibility for overseeing delivery of the council's outcomes. Although prevention is one of the four key CYPP priorities, the council and its partners are only beginning to move towards a more preventative focus.

104. The area's capacity to deliver its priorities is adequate. Officers, councillors and partners are clear about their respective roles and relationships are good. Financial management within the council is robust and a clear priority, and value for money is good. There is a strong corporate and individual focus on balancing budgets and achieving value for money. The council is aware of its relative costs and performance. Costs are low compared to performance in education. Spending on social services is low, although there was an increase in gross spend on children's services from a low base between 2002/03 and 2003/04; performance in social care is improving slowly. The medium-term financial planning process ensures resources are linked to agreed priorities. Resources have been shifted to priorities or areas of underperformance for example to increase school funding and to improve social services performance for children and adults. Longstanding deficits in school budgets have been tackled effectively by a specialised deficit recovery team and are reducing in line with DfES deadlines.

105. However, there are some weaknesses in the use of resources in children's services. Although council budgets are balanced at department level, there is continuing high spending in some areas compared with similar councils. Most notably, £10 million a year is spent on placements outside the authority for pupils with special educational needs due to the lack of provision in-house and the slow progress on delivering this through a revised special educational needs

strategy. Out-of-authority placements for looked after children are also high due to a lack of local foster carers. High levels of balances in some schools are only just beginning to be tackled.

106. Cuts to the budgets of local health trusts and the consequent vacancy controls are having an impact on services such as therapies, and preventative services such as parenting courses. Resources are also a constraint on the council's delivery of some services to children and young people, for example the implementation of the youth strategy and the integration of children's services.

107. Progress on implementation of the Children's Trust has been relatively slow and some aspects of the process, such as joint commissioning, the CAF, development of lead professionals and the workforce strategy, are behind schedule. Until new appointments were made recently, senior management leadership in children's services was insufficient to maintain the pace of change. Partners are now working effectively to establish the Children's Trust. Appropriate action is being taken to re-focus the project plan to ensure faster delivery. The shadow Trust has a wide range of members and a draft constitution, with details of its terms of reference, finance, commissioning and performance management. Guidance for deciding to pool or align budgets has been drawn up, but no significant budgets have yet been combined. A joint commissioning framework and action plan have recently been drawn up by a multi-agency commissioning group. An audit of jointly commissioned work has been completed but there is not yet a strategic view of the priority areas for joint commissioning of services for children and young people. Partnership working enhances capacity in other areas; for example the youth service works well across services and with partners such as the police and Connexions, and anti-social behaviour has been tackled with the police, district councils and voluntary organisations. There are clear protocols for joint working in some key areas, such as affordable housing work with the four district councils, and an overarching information sharing protocol.

108. Staff are committed, able and enthusiastic, training is good and sickness absence is low in most services. Workforce planning has begun within the council and there has been an innovative approach to recruitment in some areas. However, partners are not yet engaged in developing the workforce strategy and staffing shortages and turnover are impacting adversely on the delivery of some services. Efforts to recruit social workers have had some effect but some still have excessively high workloads and turnover is high.

109. Performance management is good. There is a strong performance culture in the council, supported by a good performance management framework; performance management is integral to the way people work. The 'golden thread' which demonstrates a link between high level priorities, service and business plans and the targets of individuals is usually clear. Good use is made of benchmarking, external evaluation and consultancy to drive improvement. Scrutiny is used well to focus on specific performance issues, such as changes

in school admissions arrangements and mental health services for primary age children. Major areas of previous underperformance, as in social care, have been effectively tackled. However, there are some examples of slowness in tackling poor performance, for example in adoption services, and the education of children excluded from school. Performance management of the CYPP is at an early stage but is based on the established practice of the first local public service agreement and the LAA. Partners have included the outcomes they are responsible for in their own plans and performance management systems and performance information is shared and reported back to the shadow Children's Trust. The council and a wide range of partners have a satisfactory overall understanding of their performance as reflected in their self-assessment, though weaknesses are sometimes under emphasised. However, there is not yet a clear process for ensuring the involvement of children and young people, parents and carers in ongoing performance management.

110. The capacity of the council services to improve for children and young people is good. It has clear ambitions that are underpinned by priorities and an evident commitment to, and track record of, improvement. There is a strong performance management culture across children's services and a robust council-wide performance management framework. Although lack of management capacity has slowed progress on children's services, new senior managers are beginning to drive change. In contrast, the capacity of local services to improve is adequate due, to current uncertainties about the future commitment and support by the local health trusts.

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

1. Overall, the council is performing well to meet the needs of children and young people and the capacity of the council to improve is good. Social care is adequate. The youth service is good. The council and its partners have clear and shared ambitions in the CYPP. Attention to diversity issues and the preventive services strategy is insufficiently robust. Performance management is good. The capacity of the council and its partners to deliver their ambitions is affected by significant cuts to health budgets.

2. Strategic planning among health partners is sound, and the health of children and young people is good. Outcomes overall are in line with or better than national averages. Mental health services for children are good, but there are some delays in receiving treatment. Provision for looked after children and for those with learning difficulties and/or disabilities is good. Staff and families have expressed concerns at the additional travel time resulting from the decision to transfer acute children's services from Wycombe to Stoke Mandeville Hospital. The financial difficulties facing the merging Primary Care Trusts are having an increasing impact on services.

3. Children appear safe. The LSCB provides an effective lead. Action is taken to protect those most at risk of abuse, but the threshold to access social care services is high, with delays in responding to some less urgent cases. There is good but inconsistent multi-agency collaboration to support children and families. There are insufficient preventive services. Shortages of foster carers and social workers are being addressed. There is some good integrated work for children with LDD but the strategic integration of services is at an early stage.

4. The contribution of local services to helping children and young people achieve well and to enjoy their education and recreation is good, and standards of attainment are very good at most educational stages. Admissions to schools are managed effectively within the selective system in the county and attendance is good. Not all children and young people excluded from school receive full-time alternative education. The attainment and attendance of looked after children is improving. Lengthy consultation to review the role of special schools is only now being converted into action.

5. The combined work of services in helping children and young people to play a positive role and contribute to society is good. There is good support to help children and young people, including those with learning difficulties and/or disabilities, deal with many routine changes and major challenges in their lives. Partnerships work effectively to reduce anti-social behaviour, and there is a low incidence of offending by young people. Young people are consulted about some of the services they receive but an overall participation strategy is at an early stage.

6. The overall contribution of services to helping children and young people achieve economic well-being is good. Rates of participation by 16-18 year olds in education, employment, and training are particularly high. Partners plan provision for pupils and young people aged 14-19. Standards are high in sixth forms and at least satisfactory elsewhere. An effective strategy to meet the needs of BME learners aged 16-19 has yet to be developed. Community regeneration is appropriately focused. Action to reduce homelessness has still to address the needs of families with children in temporary accommodation. Careleavers are generally well supported. Learning provision for young people aged 16-18 with learning difficulties and/or disabilities is good. Planning of provision for those with learning difficulties and/or disabilities aged 19 and over is poorly co-ordinated.