



Joint area review

Barnsley Children's Services Authority Area

**Better
education
and care**

Review of services for children and young people

Adult Learning Inspectorate
Audit Commission
Commission for Social Care Inspection (CSCI)
Healthcare Commission
HM Crown Prosecution Service Inspectorate
HM Inspectorate of Constabulary
HM Inspectorate of Court Administration
HM Inspectorate of Prisons
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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 eight 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 Barnsley 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 a recent 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 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 one neighbourhood: Dearne South. It also included gathering

evidence on 11 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 council 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. Barnsley is situated in South Yorkshire and is one of the most extensive metropolitan areas. It has a population of 218,100 and strong contrasts between rural and Pennine countryside (68% of the borough is green belt, 9% is National Park land) and urban industrial areas, including the main town of Barnsley and other smaller towns and former mining villages.

8. There is significant deprivation, with over 39% of Barnsley's 54,700 children and young people living in poverty. In 17 of the 21 wards, over 25% of children and young people are affected by deprivation, resulting in a high level of social exclusion. Dearne South, which was a focus for attention in this review of children's services, is one such area.

9. The number of school children from black and minority ethnic (BME) groups is low at 2.4%, as is the number of those with English as an additional language at 0.5%. The number of asylum seeking families and migrant workers is small but growing. Reflecting the overall level of deprivation in the area the proportion of children and young people entitled to free school meals is above the national average. Of the pupils attending Barnsley schools, 18.7% have an identified learning difficulty and/or disability and 1.7% have a statement of special educational needs.

10. Unemployment, although decreasing, is still in excess of national and regional averages and the proportion of the population without qualifications is high. The proportion of the population receiving disability benefit is the fourth highest nationally. Average earnings are above those found elsewhere in the region but below the national average.

11. Barnsley continues to experience serious economic challenges as a legacy of the demise of the mining industry. The local council and its partners have an ambitious programme to deliver economic and social regeneration. The Local Strategic Partnership (One Barnsley) provides overarching strategic leadership. Significant regeneration funding, received from central government and Europe, is having an impact in improving transport networks and extending local employment prospects and housing. Improvements to services for children are central to this wider community regeneration and ambition.

12. The local authority works with the South Yorkshire Learning and Skills Council (LSC) to develop and implement their 14–19 strategy. Post-16 education and training is provided by a general further education college, one

secondary school with a sixth form and a range of work-based learning providers. Dearne Valley College in Rotherham also enrolls a significant number of learners from Barnsley. The work-based learning partnership represents 10 Barnsley-based providers and five in the neighbouring boroughs of Sheffield, Doncaster, South Yorkshire and Rotherham. Overall, Barnsley residents follow work-based learning programmes with some eight different providers. Education to Employment (E2E) provision is offered by two local providers. Adult and community learning, including family learning, is provided by Barnsley Local Authority and Northern College.

13. Community services are the responsibility of the Primary Care Trust (PCT) but provision is undertaken jointly by the PCT, the Acute Sector and Social Services under a Section 31 agreement. All three major statutory organisations deliver some primary and community services. Well established partnerships provide a range of community-based, multi-agency services. Barnsley Hospital NHS Foundation Trust is the main provider of acute health services, including Accident and Emergency. Other children's hospital acute services are provided by Doncaster and Bassetlaw NHS Foundation Trust, and the Rotherham NHS Foundation Trust. Specialist services, including tier 4 child and adolescent mental health services (CAMHS), are provided by Sheffield Hospital Children's NHS Foundation Trust. The trusts providing health services for the children of Barnsley fall within the Yorkshire and the Humber Strategic Health Authority.

14. Barnsley comes under the jurisdiction of the South Yorkshire Police Service, which covers the boroughs of Barnsley, Doncaster and Sheffield. One of the six district command units is based in Barnsley and has co-terminous boundaries with the borough. There are no young offender institutions in the area.

15. There is cross-party political support for the local authority's strategy to implement the Every Child Matters agenda. A comprehensive Children and Young People's Plan (CYPP) provides a comprehensive multi-agency framework for integrated children's services. A formal appointment to the post of Director of Children's Services has been made with effect from April 2007, formalising the current cross-agency working arrangements and the implementation phase of the CYPP.

16. Barnsley's children and young people's service comprises a wide range of multi-agency teams that provide local support targeted in areas of identified need. Services include a Youth Offending Team, a youth service, and dedicated social work teams for assessment and family support services, fostering and adoption, children in need, and children who are looked after, including those leaving care. Support for children with disabilities and mental health needs are provided under the management of social care. Referrals to mainstream services are received by the two duty and assessment teams based in the east and west of the borough.

17. About 270 children and young people are looked after by the local authority at any one time and, at the time of the inspection, 47 were placed in agency foster care and 42 in residential placements. Some 67 looked after children are placed outside the borough. There are 197 children and young people on the child protection register.

18. The borough maintains 82 primary schools, 14 secondary schools, one special school and one pupil referral unit. Of the 14 schools, nine have specialist status and there is one academy. A comprehensive building programme through the Building Schools for the Future and Private Finance initiatives are designed to transform the learning environment for children and young people across the borough.

Summary Report

Outcomes for children and young people

19. **Outcomes for children and young people in Barnsley are adequate.** They are improving at a rapid rate in many areas. Children and young people are generally healthy and most indicators for health are in line with, or better, than national averages, except for dental health and sexually transmitted infections. Health indicators for children who are looked after are good. Safety in the home is improving and road accidents are reducing faster than the national picture. Children and young people's knowledge of nutrition and the importance of exercise are extended through school-based programmes. Health outcomes for some vulnerable children are compromised due to limited resources in CAMHS and speech therapy services. Most children and young people report that they feel safe at home and at school. Some children have concerns about bullying in their local area. A lower proportion of children than nationally are looked after by the council or are on the child protection register. Improved outcomes for those at highest risk are affected by delays in allocating a social worker to coordinate their care. Although educational outcomes are below national averages, they are improving at a rapid rate. Children appear to enjoy school and behaviour is good. Permanent exclusions are rare and children at risk of exclusion make good progress. Levels of offending by young people are below average. Many children and young people are fully involved in decisions that affect them and feel well prepared for working life. Increasingly, 16 year olds are choosing to continue in full-time education or training, although numbers are still low compared to the national picture. Young people with learning difficulties and those who are looked after make a positive transition from school to work or further education. Some vulnerable groups have difficulty in finding suitable long-term accommodation.

The impact of local services

20. **The impact of local services in improving outcomes for children and young people is good. Its capacity to improve further is good.** Strong political commitment, effective strategic management and embedded

multi-agency working are successfully raising aspirations and providing rapid improvements to outcomes in many areas.

Being healthy

21. **The impact of all local services in securing the health of children and young people is good.** Longstanding health inequalities are being robustly addressed through the Fit for the Future programme, a borough-wide strategy to improve health and tackle inequalities. The Healthy Schools programme is a key part of this and central to the delivery of healthy lifestyle education. Statutory and voluntary bodies work well with schools to promote a wide range of health and physical education. Partnership working between the health service and council services is well advanced, with extensive use made of pooled budgets to support the better integration of front line services. Parents, carers and their children receive good multi-agency support, particularly in areas with children's centres.

22. There is good targeting of resources at areas of identified need. Improving dental health is recognised as a priority, and recent initiatives involving dental health advisers working in the community are leading to improvements. Alongside this, a programme introducing fluoridated milk to primary schools is being successfully rolled out. Teenage pregnancy rates are comparatively high but are falling. Breast-feeding rates are increasing due to the combined efforts of health visitors, midwives and peer support. Local services have responded to the increase in sexually transmitted diseases by reorganising sexual health services to make them more accessible for young people both in the community and at school.

23. Access to a wide range health of services in local areas is generally good, although resources within CAMHS and speech and language therapy services are insufficient to meet demand. Waiting times for tier 3 CAMHS are greater than the national average. Mental health services for 16 to 17 year olds are unsatisfactory. Health services for looked after children are good. Services for children and young people with learning difficulties and/or disabilities are generally good except when young people transfer from paediatric to adult medical services. The lack of coordination of medical appointments presents difficulties for families of children with complex medical needs.

Staying safe

24. **The impact of all local services in keeping children and young people safe is good.** There is an established culture of safeguarding which is evident in the routine work of individual agencies, including the key partnerships of the Children and Young People's Strategic Partnership (CYPSP) and the Local Safeguarding Children Board (LSCB). Staff receive good training in child protection. Children, young people and their families have access to good quality information and advice about key risks to their safety. Good multi-agency approaches for tackling bullying, domestic violence and road safety have a positive impact on keeping them safe. Children feel that better lighting

in parks would keep them safer in their local communities. Systems for tracking missing children are effective. A good range of preventative services is available for children and young people.

25. Referrals to the social care referral and assessment services are dealt with promptly and there is effective working with other agencies to identify children at risk of significant harm. For a minority of children at risk, there are delays in the allocation of a social worker. Arrangements are in place to ensure these children are safe but the continuity of support and the progress of protection plans can be adversely affected. In addition, a number of children in need cases are unallocated. All reviews of looked after children and child protection cases are held in a timely way. However, some recording of casework is poor. The arrangements for joint interviews with the police are not effective, as some children are being interviewed more than once.

26. Looked after children receive a good standard of service from agencies. Most are living in family situations and have stable placements, although this is not always the case for some children who have been in care a long time. Systems for safeguarding children with a physical disability are effective. Families have access to a range of support services, including respite care, family aid and day care. Work to develop integrated services pathways to care, health and education is progressing well. Young people leaving care and those with learning difficulties and/or disabilities are well supported by agencies.

27. The management of dangerous offenders in the community is well coordinated. All agencies have in place safe recruitment arrangements. Good multi-agency protocols relating to professionals alleged to have abused children have been agreed. However, these locally agreed protocols and reporting arrangements are not consistently adhered to.

Enjoying and achieving

28. **The impact of all local services in helping children and young people to enjoy their education and recreation and to achieve well is good.** Parents and carers receive good support from the council and its partners to help their children enjoy and achieve well at school. The opportunities parents have to engage in learning are a significant strength. Children's centres provide a strong multi-agency focus in local areas. The work of the school improvement service and national strategy consultants is having an impact on raising standards. Although levels of attainment are below national averages, the rate of improvement is more rapid than that found nationally. Importantly, the council has successfully engaged partners, including schools, in its drive to raise standards. Schools value the support from, and challenges set by, the council and share the council's vision. The improved provision of data and training are resulting in more accurate assessment and tracking of pupils' progress, including that for vulnerable groups.

29. There is a strong commitment to the inclusion of children and young people. The majority of those who have learning difficulties and/or disabilities are educated in mainstream schools and the number of statements of special educational need is low. Support for the education of looked after children is good, as is their attendance at school, although the Life Chances team do not have strong enough links to the school improvement service. Schools' expectations do not always match the availability and scope of services from the cultural diversity team. There is good support in schools and from the behaviour support service to promote the emotional well-being of children and young people. Secondary schools work together effectively with the council to maintain the low level of permanent exclusions. The provision for pupils at risk of exclusion or excluded from school is good and there is an imaginative curriculum to meet their needs at Key Stage 4. Although there is a wide range of recreational activities, young people and their parents do not always know about them.

Making a positive contribution

30. **The impact of all local services in helping children and young people to contribute to society is outstanding.** Services have a strong commitment to helping children and young people make a positive contribution and provide excellent support to help them develop constructive relationships and take responsibility. Innovative practice is facilitated by coherent and effective partnership working through groups such as the Voice and Influence Task Group and Multi-Agency Action Group. Channels through which the voices of young people are heard are well embedded and there are strategies in place to ensure young people continue to take on lead roles. Targeted interventions engage the most vulnerable in positive activity. Specialist support on matters such as sexual health, pregnancy, drugs and alcohol is very good. These initiatives are having a positive impact on reducing criminal activity and high level anti-social behaviour by children and young people. Appropriate plans are in place to extend successful initiatives to combat bullying and racial harassment, although these areas remain a concern for some parents and young people. Looked after children and young people make good contributions to improving services. There is some good quality provision to enable children and young people with learning difficulties and/or disabilities to submit their views and participate in positive activities. These opportunities are not, currently, well advertised, and not all parents are fully aware of the opportunities and support available in the local community.

Achieving economic well-being

31. **The impact of all local services in helping children and young people achieve economic well-being is adequate.** Local activities are increasing young people's aspirations and beginning to have a positive impact on the numbers continuing in education and training after 16, although numbers remain below national averages. Families have good access to neighbourhood-based family learning and information services. The provision of

good information has enabled most entitled families to receive benefits and tax credits. Young people are supported in making vocational choices and going into higher education; however, achievements at level 2 for 19 year olds remain very low. All Key Stage 4 pupils have good opportunities for vocational studies and work experience. There are successful young apprenticeship schemes in business administration and health and social care. A Step-Up multi-agency programme has helped pregnant teenagers and young mothers prepare for their new roles and engage in further education and training.

32. Young people, including those with disabilities, enjoy a good range of vocational learning opportunities. Advice and guidance is readily available in local settings that attract young people. Initiatives to engage those young people not in education, training or employment (NEET) are starting to have an impact, and a well developed strategy for 14–19 education is starting to drive improvements. An ambitious programme of community regeneration and targeting of resources has led to some local improvements in educational outcomes and childcare provision. Youth unemployment rates remain high and are worse for males and some vulnerable groups. A clear strategy is in place to address housing shortfalls with ongoing improvements to the housing stock in both private and public sector, however there is currently insufficient accommodation for care leavers, offenders and young people with disabilities.

Service management

33. **The management of services for children and young people is good, as is the capacity to improve further.** The council, in its own self-assessment, illustrates that it is aware of its strengths and weaknesses and has identified the right priorities for further improvement. However, it did not contain sufficient detail on the relative position of its performance against other authorities.

34. Very strong political leadership and commitment to improving outcomes for children and young people is a major strength. The council's ambition to improve life chances and deliver better outcomes for children, young people and their families is shared by all partners and is being achieved as an integral part of the regeneration of communities within the borough. Improvements are based on a good analysis of need and centred on a realistic intent to raise the aspirations of the whole community. The required actions to deliver on the priority for children and young people are well articulated in a good and accessible CYPP. The plan was constructed following extensive consultation and engagement with children and young people. Voluntary and community sector partners are beginning to feel more engaged through the consultation processes. Workforce development has effectively extended skills within education and social care, although further work is required to identify gaps and common skills needed for the integrated children's service.

35. Good strategic leadership and effective management provided by senior officers in education and social care are driving further improvements. Well established and wide ranging partnerships underpin many developments. A significant use of formal pooled budget arrangements facilitates responsive multi-agency services. There is a good track record of budget management. The council's capacity to improve further is illustrated by the rapid and significant improvements to the education service over the last two years. Identified as unsatisfactory in 2004, schools now report increased satisfaction with services provided, educational attainment is increasing at a faster rate than nationally and the strategy for 14–19 year olds, unsatisfactory previously, is now good. A comprehensive performance management framework is driving improvement in priority areas.

36. Quality assurance systems in children's social care are not sufficiently robust. Senior managers had insufficient understanding of risks being managed or the level of compliance with standards in relation to unallocated cases during recent staff shortages. A recent recruitment campaign has been successful in attracting eight additional social workers to address this situation.

Grades

Grades awarded:

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

	Local services overall	Council services	Health services
Being healthy	3		
Staying safe	3		
Enjoying and achieving	3		
Making a positive contribution	4		
Achieving economic well-being	2		
Service management	3		
Capacity to improve	3	3	
Children's services		3	
The education service		3	
The social care services for children		3	
The health service for children			3

Recommendations

For immediate action

The council and its partners should:

- ensure that all children and young people who have been assessed as in need of services are allocated a social worker or a lead practitioner as appropriate, to minimise risk and ensure improved provision and outcomes
- improve and monitor the quality and completeness of entries in children's social care files and ensure decisions and actions taken are recorded.

For action over the next six months

The council and its partners should:

- improve access to the speech and language therapy
- reduce waiting times to specialist CAMHS and improve CAMHS provision for 16 to 17 year olds
- review and evaluate systems for assuring quality, especially in relation to social care to ensure that senior managers have detailed information about the level of risk being managed
- promote awareness of, and access to, recreation and extended learning provision for all groups of children, young people and their families.

For action in the longer term

The council and its partners should:

- engage more young people in education and training at 16
- progress formal management structures of the children's service and ensure skill gaps and competencies for multi-agency working are addressed
- extend the availability of supported accommodation for vulnerable groups.

Main Report

Outcomes for children and young people

37. **Outcomes for children and young people in Barnsley are adequate. They are improving in many areas.**

38. **Children and young people are generally healthy.** Most health indicators are in line with, or better than, national averages. Infant mortality rates are low and immunisation rates are high. Incidence of childhood illnesses such as measles is low. Good child health surveillance services ensure early identification and action to meet health concerns. Safety in the home is improving and road accidents are reducing faster than the national picture. Children and young people's knowledge of nutrition and the importance of exercise are extended through school-based and community-based programmes. There are many good examples of improving health outcomes, such as increases in breast-feeding and reductions in teenage pregnancy and smoking, although these figures continue to be worse than national averages. Recent initiatives are improving dental health but currently outcomes are poor. Health indicators for looked after children are good. Outcomes for young people with mental health problems are variable, with good early intervention support in schools. Tier 1 and 2 CAMHS are good but waiting times for specialist services are longer than nationally, with insufficient services for 16 and 17 year olds and young people with learning difficulties. Young people have access to good support introduced to tackle high rates of alcohol abuse and sexually transmitted infections, although the impact of this on outcomes for young people is yet to be seen.

39. **Children and young people in Barnsley appear safe.** Children generally report that they feel safe, particularly in schools where they are aware of the procedures to report bullying. Children's safety at home and in the community has improved through programmes to tackle bullying, domestic violence and road safety. Families facing challenges receive good support to enable children to remain at home, and fewer children than the average enter local authority care or are placed on the child protection register. There is a prompt response to referrals of children at the highest risk but improved outcomes for this group are affected by delays in allocating a social worker to coordinate their care. Reviews of looked after children and child protection cases are held in a timely way. Most looked after children are living in stable family placements and children are placed for adoption in good time. There are good systems for safeguarding children with a disability and they and their families have access to a range of support services, including respite care, family aid and support to access day care. Young people leaving care are well supported into adulthood. Arrangements for managing dangerous offenders and safe recruitment practices are in place to safeguard children.

40. **Children and young people achieve adequately.** Provision for children in early years settings is good. Outcomes have improved steadily and at a fast pace over the past four years, although attainment at all key stages continues to be below that of statistical neighbours and that found nationally. The trend of improvement at Key Stage 4 means that the authority is in line with the national average for pupils achieving five or more A* to G grades at GCSE. Some schools have made particularly good gains in the numbers of pupils attaining at higher levels and this is an improving trend at Key Stages 2 and 3. Results have recently improved at Key Stage 1. The attainment of pupils from BME groups is higher than the local authority average at this key stage. Children and young people appear to enjoy school and most attend regularly. Behaviour seen on inspections is largely good. The proportion of pupils who receive fixed-term exclusions is low and permanent exclusions are rare. The percentage of young people reached by publicly-funded youth services is in line with the national average. The attainment of looked after children is low but their attendance is good and no children in this category have been excluded. There is good inclusion of children and young people with statements of special educational need, most of whom are educated within mainstream schools.

41. **Children and young people have an outstanding range of opportunities to make decisions and take personal responsibility and many make a good contribution to their communities.** Children and young people are involved in an impressive range of activities where they develop personal and social skills and take personal responsibility. Many, including vulnerable and minority groups, make a positive contribution to their local communities through voluntary activities, mentoring, awareness raising and training. Youth councillors, Children's Fund ambassadors and the Multi-Cultural Youth Committee make an outstanding contribution in representing the voice of children and young people and work constructively with decision makers. Over 2000 children and young people were consulted in the development of the CYPP and there is a consistently high turn out for youth council elections. Looked after children and young people have good participation rates in their reviews; they are aware of how to raise any concerns and contribute their views to improve services. Those with learning difficulties and/or disabilities are also involved in their reviews but have few opportunities to participate in broader decision making. Levels of offending by young people are below average, including that of young people looked after by the council. Re-offending is in line with the national average. The majority of young people surveyed say they feel safe in their local area but point out that better street lighting and more organised recreation opportunities would help them to feel safer.

42. **Children and young people are able to achieve economic well-being and are prepared adequately for working life.** Most young people have access to good careers advice. Participation rates in post-16 education, training or employment are rising each year, although they are still lower than those of similar authorities and national averages. Young people report that they are learning well at school and are more motivated by the broader

curriculum now on offer. A high proportion of looked after young people are engaged in post-16 education and training, but numbers are low for young people with learning difficulties and/or disabilities, teenage mothers, offenders and other vulnerable groups. Success rates for young people at 16 are improving, particularly in work-based learning and for girls at Key Stage 4. These results have improved year by year and are now in line with national averages. Numbers progressing to higher education remain low. There is a very low proportion of 19 year olds who acquire level 2 qualifications.

43. Unemployment rates have recently increased and too many males go into jobs not offering training opportunities to level 2. The proportion of young people who are NEET has reduced but is still above that of statistical neighbours and national averages. Care leavers, offenders, teenage parents and young people with disabilities have difficulties in finding supported accommodation. Whilst significant regeneration activity has taken place and continues as a part of an on going strategy, over one in six families with children and young people are currently living in accommodation that is not regarded as decent. Provision for vulnerable families is effective, with no dependent children being placed in hostels in the last year and the length of stay of families with children in bed and breakfast accommodation limited to nine days on average.

The impact of local services

Being healthy

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

45. Longstanding health issues are being robustly addressed through the Fit for the Future programme, a borough-wide strategy to improve health and tackle inequalities. The Healthy Schools Programme is a key part of this and central to the delivery of healthy lifestyle education.

46. Parents and carers, particularly those living in areas with children's centres, receive well coordinated advice and support in keeping their children healthy. Partnership working is well developed, involving statutory and voluntary organisations and the communities themselves. Areas of high deprivation have been targeted and good support programmes focus on childcare, parenting skills, emotional well-being, healthy eating and safety in the home. In addition, good advice is provided to encourage mothers to stop smoking during pregnancy, although these rates remain higher than the national average.

47. Community involvement has been successful; for example, breast-feeding peer support groups have been set up across many of the most deprived areas. Whilst breast-feeding rates are low compared to the national average, they are improving, and noticeably in those areas where there is peer support available.

Immunisation rates are very good. Outreach services are providing effective support and advice to families, for example, dental health advisers, support for asylum seekers and for mothers with postnatal depression.

48. The promotion of healthy lifestyles for children and young people is effective and well coordinated. All schools are involved in the Healthy Schools Programme for which there is a good level of commitment and support. Over 60% have achieved the bronze award with a goal of reaching the national target of 50% achieving the silver award by July 2007. Healthy eating is promoted in schools and menu choices reflect this. However, the availability of drinking water varies between schools, and, for those that allow young people to leave at lunch time, there is ready access to fast food. A programme to introduce fluoridated milk to primary schools is being successfully rolled out. The council is actively tackling obesity, which is recognised as a significant problem. Weighing and measuring children at five and 11 years has been introduced ahead of the national scheme. The School Sport Partnership is promoting sport effectively both in and out of school across the borough in order to increase participation in regular exercise. Over 90% of children are involved in some form of exercise out of school.

49. Good advice on how to stop smoking is delivered in schools, all of which are smoke free, but the proportion of young people who smoke regularly is significantly above the national average, particularly for females. Sex education is provided well in schools and a high proportion of young people are aware of sexual health services, which are being redesigned to make them more accessible. Good access to advice and condoms is provided across the borough. In schools, more school nurses are providing contraception through the Clinic in a Box scheme. Although substance misuse services are based in Barnsley, outreach services are provided to the more remote areas and are now focusing on reaching vulnerable, high risk children and young people. The Barnsley Alcohol Reduction Strategy identifies appropriate actions to reduce the harmful effects of alcohol use in young people. Over half the local retailers have signed up to the Responsible Retailer Strategy, but to date there is little evidence to show any improvement and rates of alcohol abuse are higher than the national figure.

50. There is a comprehensive child surveillance programme. Waiting times for assessment clinics are scored positively by young people and are within national standards, with the exception of the Genito-Urinary Medicine Clinic which has insufficient clinical capacity. More specialised hospital services are provided in Sheffield, with outreach clinics in Barnsley. The proportion of under-18s registered with a dentist is higher than the national average and there are a number of initiatives in hand, but dental health remains poor, albeit improving. Health services are largely age appropriate, although the hospital out-patients environment does not fully meet the needs of children and young people.

51. There is a good range of support available in schools for children and young people with emotional difficulties. The introduction of primary mental health workers in some schools is improving provision through early intervention, counselling, training and a help line. A range of services that promote the mental health of children and young people is available but not all of them are fully developed. Specialist CAMHS provide a good service but waiting times to tier 3 services are long. Access to services is improving through revised referral protocols and improved skills of front line staff. CAMHS provide for young people up to the age of 16. Current arrangements for transition to adult services for 16 and 17 year olds are unsatisfactory: a start has been made to address this situation. A specialist nurse has been appointed to liaise with adult mental health services in supporting young people with attention deficit/hyperactivity disorder to access appropriate adult services. There is good joint working across agencies and the Youth Offending Team, and direct access is provided for the substance misuse service. Access to specialist tier 4 in-patient and day care facilities in Sheffield is good, although travel can be difficult for some families.

52. Health indicators for looked after children are good. The majority have their statutory health checks and are supported well by the designated nurse. On admission to care, there are good follow-up arrangements to ensure that children are registered with a GP and dentist. Innovative arrangements have increased the number of older looked after young people attending an annual health check. Health assessments are more accessible and less formal, including the use of drop-in sessions in children's residential homes, advice and support to carers, as well as visits to young people in out of area agency placements.

53. Health needs of children with learning difficulties and/or disabilities are met. Their access to the community paediatric service and hospital services is generally good. Access to tertiary care for children and young people with complex needs is good and facilitated by some local joint clinics. However, there is no dedicated CAMHS or child psychologist service available for these children and young people, and access to speech and language therapy services is limited. The team working with children with epilepsy includes a specialist nurse who ensures fast access to advice and support.

54. Multidisciplinary working is generally good but currently there is no child assessment centre to provide a focus for joint working. High levels of inclusion are supported by a specialist nurse and the disability team who are working with children with complex needs in mainstream schools. Transition arrangements to adult services are generally good, with the majority of young people having a personal plan started at age 14. However, transition arrangements between paediatric and adult medical services are less well developed.

Staying safe

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

56. The impact for almost all children is good, with an established culture of safeguarding. For a minority of children at risk, there are delays in allocating a social worker, although arrangements have been put in place to ensure these children are safe.

57. Good quality information is provided to inform children, young people and their families about key risks to their safety. Schools effectively raise children and young people's awareness on how to keep safe. Health visitors and midwives provide good advice to parents on safety in the home. Successful road safety schemes have led to a reduction in road accidents at a rate greater than the national average.

58. Children generally feel safe, particularly in schools, which all have anti-bullying policies. A good range of multi-agency work to tackle bullying in Barnsley is being undertaken through the new LSCB. Good multi-agency approaches for tackling domestic violence also impact positively on children's lives.

59. A good range of services designed to identify need and promote success are located in areas of identified need such as Dearne South. Early identification of difficulties and good support to families promote improved health, educational achievement and safety of children and young people. Children's centres provide good early support to parents to keep children healthy and safe, and intensive parenting programmes improve their skills in developing constructive relationships. The Intensive Prevention team provides a valuable service. An integrated family support service has been identified as a priority to build on the current service provision.

60. There is an established culture of safeguarding which is evident in the routine work of individual agencies, including the key partnerships of the CYPSP and the LSCB. There are good and developing arrangements between social, education and health services and the voluntary sector to ensure a multi-agency approach to safeguarding and care. Established and well coordinated multi-agency public protection panel arrangements are in place to protect children from dangerous offenders. There are also good multi-agency approaches in place to establish the whereabouts of children who go missing.

61. Appropriate and prompt action is taken when children are referred to social services and there are effective working relationships with other agencies to identify children at risk of significant harm. Management oversight of referrals is effective and significant and sustained improvements have been made in completing assessments within good timescales. All child protection cases are reviewed on time. The arrangements for involving parents are good, and formal agreements for working with social services and multi-agency

colleagues are used effectively. Casework demonstrates well organised and well managed multi-agency approaches to the management of complex cases, including effective work from schools, health visitors, social workers and, when involved, CAMHS. However, whilst case files are up to date, recording of decisions and actions taken in some is poor.

62. Arrangements for joint interviews with the police when children report allegations of abuse are not adequate in that they do not follow national guidance. Some children are inappropriately being interviewed more than once for evidence gathering purposes.

63. Although at the time of inspection fieldwork there were no unallocated child protection cases, 47 (approximately a quarter of those on the child protection register) had at some point over the previous two months not been allocated a social worker. The majority of this group had, however, only remained unallocated for a short period and arrangements had been put in place to carry out basic 'safe and well' visits and core group meetings. Risk management arrangements were also in place for approximately 100 children in need, a few of whom had not been allocated for over a year. These arrangements, whilst ensuring children are safe, risk compromising the continuity of support and progression of protection plans. The recent appointment of eight new social workers provides the capacity to address this situation. The current quality assurance system does not ensure that senior managers have sufficient information about the level of risk and the consistency of compliance with standards.

64. Good supervision and support is available for staff across agencies. Practitioners have access to a good range of advice to help them identify and respond to safeguarding issues in accordance with national guidance. Safe recruitment arrangements are in place across agencies, with progress being made in health services to ensure that Criminal Records Bureau checks are carried out for relevant staff who have been employed for a number of years and have previously not been checked.

65. Systems set up by the LSCB for the coordination of cases relating to professionals alleged to have abused children reflect good multi-agency practice. However, agencies and individuals do not always adhere to locally agreed protocols for recording and reporting to the LSCB and to the Assistant Director for Children's Services.

66. Children with a physical and/or learning disability are safeguarded well and their families have access to a range of support services, including respite care, family aid and day care. Most children and families receive good packages of care as a result of good multi-agency coordination and information sharing at an early stage. The council has a clear vision and strategy to provide co-located key services to improve access to services and reduce duplication of assessments.

67. Looked after children receive a good standard of service from agencies. The number of children in care is lower than the national average as the council supports families well, helping them to continue caring for their children. Good use is made of extended families and friends. Most looked after children are living in stable placements, although some children who have been in care for a long time do not have the same level of stability. A recent successful recruitment campaign for foster carers increased the choice of placement for looked after children, but often demand outstrips places. The council is very successful in relation to children who are adopted and most children are placed with prospective adopters within good timescales. A small number of looked after children are not allocated a social worker due to current staff shortages; however, their reviews are carried out on time.

68. The council has commissioned a children's rights service from the NSPCC which provides good support to children and young people and they have good access to Independent Reviewing Officers, senior staff within social care and the independent visitor service. Children in residential care are safeguarded well and all homes meet national minimum standards. A clear strategy and plans are in place to improve residential accommodation and improve choice, with the acquisition of new premises and closing down old units. Young people leaving care are well supported by the BACKUP leaving care service provided by NCH. There is good access to advice, counselling and independence training. The Connexions personal adviser ensures that there is regular contact with young people and monitoring of their whereabouts.

Enjoying and achieving

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

70. There is a clear commitment to raising standards and the policies and procedures the council has put in place are bringing about good improvements. Under the influential and pro-active leadership of the Executive Director for Education, the council has been particularly effective in communicating its drive and vision to schools and well coordinated and focused work is successfully engaging all partners. Actions to improve the quality of teaching and learning and leadership and management are central to improvements. School managers value the clear leadership, challenge and support they receive and feel empowered to continue to raise standards.

71. Provision for children in early years settings is good. The Early Learning Goals are covered particularly well in nurseries where there are good outcomes seen on inspection. Improved use of data and a stronger focus on moderating the assessments teachers make is helping to promote more accurate assessment for children in this age group. The increase in the range of childcare places, effective multi-agency working and targeting of vulnerable groups all support improved early education outcomes. An example of responsiveness to the needs of local families is seen in the provision of facilities

to borrow books for pre-school children at a children's centre in an area without a library. The council provides a good range of information for parents, which is available in a range of formats, including the main community languages.

72. There is very good support for parents, carers and other family members to attend courses in their local communities and, in some cases, to gain qualifications. This is increasing aspiration among parents and helping them to support their children to enjoy and achieve. A parent described the impact of these opportunities as "giving children hope".

73. Educational attainment at all key stages is below that of statistical neighbours and that found nationally, except for the numbers achieving one or more GCSEs at A* to G. However, there have been good improvements at Key Stages 2, 3 and 4. Schools value highly the work of the school improvement service and that of consultants for national strategies. The council's support for self-evaluation has been well received by schools and is enabling them to develop and focus their plans. The school improvement policy is clearly understood by schools, and practice shows that the balance of support and challenge is very good. This, along with the improved provision and use of data, enables effective targeting of support to schools, including those required to improve following inspection. A strong programme to improve leadership at senior and middle management levels is in place. There is an ambitious reorganisation and building programme to address identified needs associated with the poor physical quality of some school buildings, and a fifth of primary schools have already been replaced.

74. Most children and young people appear to enjoy school and attend regularly. However, the level of unauthorised absence in primary schools is high and the council is addressing this issue. Good use is made of truancy sweeps, home visits and fixed penalties. Behaviour seen on inspections is largely good. Improvements to teaching and the curriculum are beginning to have a positive impact on children's enthusiasm to attend. The proportion of pupils who receive fixed-term exclusions is low and permanent exclusions are rare. The work of the pupil placement panel has made a particularly good contribution to avoiding permanent exclusions from secondary schools. The behaviour support service provides good support to schools, children and young people and their families. There is a strong network for those involved with learning support units which promotes the sharing of good practice. Recent changes to the provision for excluded pupils and those at risk of exclusion have resulted in good, personalised plans for young people. These address their learning and emotional needs and help them to focus on future opportunities for learning and employment. The behaviour support service has good arrangements for helping young people who are anxious or school-phobic. Schools also make good provision to support the emotional health and well-being of children and young people. Learning mentors, largely funded through short-term initiatives, provide high quality support, particularly in assisting the transition from primary to secondary school.

75. There has been a successful focus on increasing the inclusion of all groups of pupils. This is reflected in the multi-agency approach to school improvement. The cultural diversity service provides a good range of training to help schools better meet the needs of BME groups. The service provides good support to Gypsy and other Traveller groups. However, the service is small and schools report insufficient support for those for whom English is an additional language, particularly to address the recent increase in children and young people from Eastern Europe.

76. The attainment of looked after children is low, as are the numbers sitting at least one GCSE. However, attendance is good and no children in this category have been excluded. There is good educational provision for looked after children and schools value the support they receive from the Life Chances team. However, this team does not have such strong links to the school improvement team as other services supporting vulnerable young people, and is not able to make the best use of data to track the progress of this group.

77. The council has an effective inclusion strategy. The percentage of children with statements of special educational need, at 1.7%, is below that found nationally and the council is the fourth highest nationally for the number of children and young people with statements who are educated in mainstream schools. The preparation times for statements have improved and schools are supported well during the process. Guidance materials to promote inclusion and to help schools to meet the needs of children and young people with learning difficulties and/or disabilities are good and there is an appropriate range of training. Resource bases in mainstream schools help support children and young people. The special school provides a good service for those with complex difficulties and works well with other services to support other young people placed in mainstream schools. The progress of pupils with learning difficulties and/or disabilities is adequate. A recent emphasis on assessment and the use of data is allowing schools to track the progress of this group more accurately. This is also true of other vulnerable groups.

78. There is a good and varied range of recreational activities, particularly for sport and the performing arts, and extended hours provision. The voluntary and community sector is increasingly working in partnership to provide these activities. However, some parents, children and young people, including those who are looked after and those from BME groups, say there are insufficient leisure opportunities, and both they and their families do not always find it easy to know what is available in their local area. The percentage of young people reached by publicly-funded youth services is in line with the national average. There are youth clubs for young people with learning difficulties and/or disabilities and some have provided particularly good opportunities for them to join in recreational activities, such as membership of the Barnsley Tykes (a football club), and to help them engage in work as Millennium Volunteers.

Making a positive contribution

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

80. Children and young people receive very good local support to help them develop constructive relationships and take responsibility. Early years settings and schools provide extensive opportunities for personal, social and emotional development. Wide ranging opportunities are organised for young people to contribute to the local community through programmes such as Millennium Volunteers, Duke of Edinburgh Awards and National Accredited Training Awards.

81. Mentoring support, including peer mentoring, is highly valued by young people and has contributed significantly to developing confidence, self-esteem and motivation in vulnerable youngsters. Most children and young people receive very good support in managing changes and responding to challenges in their lives. Transition procedures between phases of learning are good, and vulnerable children and young people are given effective additional support through the pupil placement panel and mentors.

82. Good support mechanisms assist the most vulnerable in matters such as sexual health, pregnancy, drugs and alcohol. However, the impact of these initiatives is not fully apparent. Young people from BME groups reported "life changing" support from the Barnsley Black and Minority Ethnic Initiative and schools. Young carers receive good support to deal with problems, although opportunities for them to socialise are limited.

83. Steps have been taken to address bullying and racial harassment through initiatives like the Oasis at Dearne High School, which provides support for youngsters dealing with bullying, and the Open Minds project, which is helping young people value diversity in targeted areas. However, bullying and racial harassment in local communities are still perceived as issues by some young people. Appropriate plans are in place to extend these successful initiatives across the borough.

84. Children and young people are given excellent opportunities to participate in decision making and in supporting the community. There is much innovative practice, led by the youth service and Barnsley Children's Fund and facilitated through coherent and effective partnership working in the Voice and Influence Task Group. Channels through which the voices of young people are heard are well embedded and there are strategies in place to ensure young people continue to take on lead roles. The framework of standards for involving and consulting children and young people (LISTEN) provides an excellent structure for promoting young people's influence in the running of services across Barnsley.

85. Youth councillors, Children's Fund ambassadors and the Multi Cultural Youth Committee provide effective vehicles for young people to make their views and needs known to policy makers. They are rightly proud of their achievements and their contributions to the community. There are numerous examples of young people's views being acted upon, for example, in shaping the CYPP and the development of local facilities. Improvements include access to sexual health clinics in youth clubs and better lighting in parks. Good efforts are made to ensure that the views of vulnerable and hard to reach groups are considered through targeted youth summits, Speak Out events and project work.

86. Very effective support is given to help looked after children and young people to make positive contributions to improving services and to participate in reviews. They are able to meet with officers and members on a regular basis and can make their concerns known through an advocacy service. Their contributions have brought about changes in policy regarding health assessments and accommodation. Care leavers make good contributions as Total Respect trainers, raising awareness amongst professionals and supporting young people new to the care system.

87. There are some good opportunities for children and young people with learning difficulties and/or disabilities to submit their views and participate in positive activities. However, these opportunities are not well known and parents are not fully aware of the support available in the local community. Communication between agencies is not developed sufficiently to enable continuity of support.

88. Agencies work very effectively together to reduce anti-social behaviour by children and young people. Excellent early intervention strategies, positive activities and targeted support, through safer neighbourhood teams, multi-agency action groups and the Youth Inclusion Support Panel engage those most at risk. These initiatives have led to a reduction in criminal activity and in high level anti-social behaviour. However, despite these positive outcomes, parents and carers in some areas feel that low level anti-social behaviour is a problem. Further community-based work is planned to measure the impact of intervention strategies, mediate perceptions of anti-social behaviour and improve relations.

89. The Youth Offending Team provides consistently good quality services to prevent offending and re-offending by children and young people. Partnership working facilitates a wide range of activities and specialist support to young offenders and their families. The youth service's crime prevention initiative, New Route, for example, provides highly effective support to enable young offenders to gain work-related qualifications and raise their self-esteem. Competition for apprenticeships and training places is great, and opportunities for young offenders are limited. Effective action has led to a reduction in first-time entrants to the criminal justice system and a reduction in re-offending by those in receipt of intervention.

90. Parents and carers have access to high quality parenting skills support through children's centres and the joint consortium, Parenting Together. However, this provision is not well advertised and as a consequence some needs are not met.

Achieving economic well-being

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

92. Parents and carers receive good information and support and this has led to almost all eligible families receiving benefits and tax credits. Childcare facilities have grown considerably, with more places available, particularly in disadvantaged communities such as Dearne South. An extensive family learning programme is offered in local neighbourhoods throughout Barnsley enabling parents to give better help to their children with their school work. A growing number of businesses are involved in initiatives to promote childcare in the workplace. Increasing numbers of young people are supported to continue in education as they are in receipt of educational maintenance allowances.

93. Careers education is adequate and helps young people prepare for making vocational choices and going into higher education. The newly established university centre has helped raise young people's aspirations. All Key Stage 4 pupils have good opportunities for vocational studies and work experience. There is a successful young apprenticeship scheme in business administration and health and social care. The Step-Up multi-agency programme has helped pregnant teenagers and young mothers prepare for their new roles and engage in further education and training.

94. Connexions personal advisers help vulnerable young people engage or remain engaged in further education and training. Support for young people in overcoming personal and social barriers is good. Personal advisers play a key role in helping young people with learning difficulties and/or disabilities and care leavers to plan their educational pathways and with the transition to other institutions. All care leavers have a full assessment of their financial, personal, social and welfare needs. Access to the Workstep programme has enabled some young people with learning difficulties to take up training and work placements. Young people from Greenacre special school are able to work towards entry level qualifications in three vocational areas. Good collaborative work between agencies is particularly supportive to young people at Key Stages 3 and 4 who attend the pupil referral unit.

95. Young people believe they are learning well at school and they are more motivated by the broader curriculum on offer. The number of looked after young people engaged in post-16 education and training is good. Success rates for young people at 16 are improving, particularly in work-based learning. However, in spite of improvements, high numbers of young people, including those from several vulnerable groups including young offenders and those with learning difficulties and/or disabilities, are not engaged in education, training or

employment, by comparison with similar authorities and national averages. Progression rates to higher education remain low. There is an improving but still very low proportion of 19 year olds who acquire level 2 qualifications. Too many males go into jobs not offering training opportunities to level 2. Much better information is now available on the destinations of young people as a result of better tracking systems that have recently been developed.

96. Planning to meet the needs of the 14 to 19 age range is an integral part of the local authority's 11 to 19 strategy and takes account of local and national priorities. Good progress has been made in implementing the strategy. Good collaboration between the local authority and the local LSC, and the shared commitment to improving outcomes for young people, informs ongoing improvements to the provision. Young people were consulted on the new standards that they can expect when taking part in education and training. However, as yet not all young people have sufficient understanding of the curriculum choices open to them. Employer influence on policy is improving, although the recently introduced employers' skills alliance is still underdeveloped.

97. Strong commitment from Barnsley and Dearne Valley Colleges and headteachers has resulted in stronger collaboration in the three secondary school alliances. Two of the alliances have enhanced collaborative learning opportunities to improve learner motivation and attainment, particularly for underachieving groups. The third has focused on developing joint approaches to staff development and improving progression through the Aim Higher initiative. Post-16 collaborative learning is just beginning. A review of post-16 provision has been completed resulting in modifications to the 11 to 19 strategy. The authority's approach to planning for specialised diplomas is good. There are significant gaps in provision in retail and customer services, and in the sufficiency of construction and engineering courses. The post-16 pathways, including for young people who may drop out of education and training or who have learning difficulties and/or disabilities, are not well understood by some stakeholders and some who advise young people about progression.

98. The quality of provision across the colleges, the school sixth form and work-based learning is now satisfactory. Improvements to the quality of teaching and learning have contributed to steadily improving outcomes for 16 to 19 year olds. Arrangements to monitor the quality of provision are effective. All post-16 providers have appropriate plans to ensure good race relations. Self-evaluation in individual providers is well developed, and the quality toolkit is successfully ensuring consistency in collaborative provision. Self-evaluation at alliance level is not yet established.

99. A comprehensive range of community regeneration strategies and initiatives focus specifically on developing healthier and safer communities. The strong commitment from all agencies to working together to common aims is successfully changing the aspirations of young people and encouraging participation. Regeneration initiatives are targeted effectively at the most

vulnerable groups and disadvantaged neighbourhoods. Through projects in Dearne South, young people are achieving better and enjoy a wider range of childcare, recreational facilities and a safer environment. Residents, including children and young people, have a strong voice in identifying the need for improvements and evaluating the success of regeneration initiatives.

100. Some young people believe that the poor access to reliable public transport is a barrier to their participation in education or training; in some cases this is because they are not sufficiently aware of the services provided. Home school transport arrangements and transport between schools for collaborative provision are identified as a weak area by some schools. There are good initiatives to support the travel of children and young people with learning difficulties and/or disabilities by the use of taxis. The authority recognises the need to improve further services in the most disadvantaged areas and for the most deprived groups of young people.

101. The council has ambitious targets to improve the quality of its housing and is making some progress. A clear strategy is in place to provide for the particular needs of care leavers and other vulnerable groups. There is a commitment to multi-agency working to support vulnerable young people to maintain tenancies and to live in communities of their choice. A survey of gaps in meeting the housing needs of vulnerable groups is currently in progress. The council has recognised the need to increase the amount of supported accommodation available for care leavers, offenders, teenage parents and independent living accommodation for young people with disabilities. Some children do not live in houses that are regarded as decent. Eighty-three per cent of the housing stock now meets the national decency standard and there are plans in place for this to reach 100% by 2010.

Service management

102. The management of services for children and young people is good, as is the capacity to improve further.

103. The ambition of the council and its partners for children and young people in the area is good. An ambitious programme to improve life chances, raise aspirations and deliver better outcomes for children and young people is at the heart of the programme for economic and social regeneration. Community, corporate and service plans, such as Remaking Barnsley and Remaking Learning and the CYPP consistently reflect partners' shared ambitions for children and young people. There are very good arrangements for children and young people to participate in decision making and the running of Barnsley services.

104. Well established, wide ranging partnership and significant formal pooled budget arrangements have provided an effective platform to embrace multi-agency working within Barnsley's children's services. As yet, plans and

initiatives promoting equity and diversity available in both education and social care are not brought together strategically in a coordinated way.

105. Prioritisation is good. Barnsley's number one priority is improving services and outcomes for children and young people. The CYPP provides an accessible and well articulated multi-agency approach to achieving this aim. Priorities are comprehensively detailed, with a good section on resources and a description of how impact will be measured. It is not always clear, however, what is to be delivered in what order. Maximum use is made of pooled budgets arrangements, with over £19 million in the formal arrangement between health and social services relating to children's services. Arrangements for the governance of this funding are good.

106. There are some good examples of resources being targeted to deliver priorities, including the allocation of funds to preventative services, committing additional funding to deliver the Building Schools for the Future programme, and investing funding in the CAMHS service. Good links are made to the corporate medium-term financial plan, and there are good examples of financial planning extending beyond one year in education, social care and health. The council's annual efficiency savings programme has enabled growth to be targeted into education and social services. Both services have also had to contribute towards making efficiency savings, some of which will not be achieved during 2006/07.

107. Voluntary sector representation on all partnership forums is good. Work on developing an overall joint commissioning framework and strategy incorporating the voluntary and community sector outside of the significant pooled budget arrangements is ongoing, and the sector reports beginning to feel more engaged.

108. A key priority for the council is to make the school infrastructure fit for purpose to deliver its ambition through the Remaking Learning agenda. Major plans for replacing all secondary schools with eight new schools through the Building Schools for the Future investment programme have been agreed. Private finance initiatives have secured 13 new primary schools to replace those identified as in poor condition. However, there is no overall strategy to tackle the reorganisation of primary schools to address the current and forecasted surplus places.

109. The capacity of the council and its partners to deliver better outcomes for children and young people is good. So, too, is the capacity for further improvement. Very strong political leadership and commitment to improving outcomes for children and young people is provided by the leader of the council and the lead elected member for children's services. The role of corporate parent is fully understood across the wider council. A good track record has now been established in delivering on priorities with, for example, the improvements to education services following the previous unsatisfactory local education authority and 14–19 inspections, improving health indicators, and the

impact of preventive services limiting the number of young people who need to be looked after by the council.

110. There is a good track record of budget management within education and social services. However, social services children's budgets have seen a recent overspend on the pooled budget arrangement. A detailed analysis of the causes of the pressures and proposed changes to the way services are provided has been produced and presented to cabinet and the performance review panel.

111. Good effective leadership from senior officers is driving further improvement. The responsibilities of the Director of Children's Services, up to this point, have been effectively discharged by the close working of the Executive Directors for Education and Social Services. This was a deliberate decision to maintain a strong focus on educational attainment. The Executive Director of Education has recently been appointed as designate Director of Children's Services; she will be formally appointed to the post in April 2007. Good partnership working is enhancing capacity. Despite separate management structures, front line multi-agency working including the voluntary and community sector is well advanced. There are good examples of teams working together across health, social care and education.

112. Capacity is enhanced through effective monitoring of school budgets, and balance control mechanisms have been used successfully. A very good brokerage service has encouraged schools to become more effective purchasers of services. In turn this has challenged council provided services to remain competitive and informed improvements to the council's procurement arrangements.

113. Value for money is good and the procedures for consistently assuring this are adequate, confirming the external auditor's position. Senior managers are striving to improve value for money in procurement, examining different ways to provide services and looking for efficiency savings. Benchmarking data is used to target areas for investigation, including areas of high cost such as residential care. However, this is not consistently the case at middle manager or team manager level where there is limited evidence of comparative financial data being used other than by finance staff. There is also insufficient clarity on charges made to education and social services for management and support services provided by central services.

114. There is a draft workforce strategy for children's services, and good work, including the implementation of national initiatives, is having a positive impact on recruitment and retention and extending staff skills in both social care and education services. However, this is not yet sufficiently focused on promoting common skills and identifying gaps or competencies for multi-agency working across an integrated children's services.

115. The council has a comprehensive corporate management framework. Performance management within the council is good and this is driving improvement in priority areas. There is good involvement of children and young

people in elements of the performance management of services. This includes giving evidence to the council's scrutiny committee and securing specific improvements to services they receive, such as ensuring access to information technology in children's homes. Current and future performance against key indicators, including financial performance against efficiency savings, is challenged effectively by elected members. The Education Partnership Board includes external representatives and is a key driver in challenging performance and securing improvements in educational attainment. This board reports directly to the Leader and cabinet members and to the CYPSP, providing them with an accurate analysis of performance. Performance information is starting to be shared across the CYPSP, with examples of specific information presented recently on teenage pregnancy.

116. Financial and service planning is integrated at senior manager team level. Service plans are aligned well to corporate plans and include detailed activities to be achieved during the year to contribute to overall priorities. Some include resources information and performance indicators but this is not consistent. Staff are generally well managed, with decisive action taken where necessary. Performance monitoring on the use of staff appraisals and sickness absence management shows a mixed picture across education and social services staff.

117. A new core management information system will be implemented in children's social care by December 2006. This will improve the quality of some of the existing case management procedures referred to in the staying safe section of this report, particularly the monitoring of cases not allocated to a social worker.

118. Barnsley's self-assessment prepared for this review demonstrated a good awareness of strengths, weaknesses and the appropriate priorities for future work, although it did not contain enough detail on the relative position of performance against other authorities.

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

1. The council's contribution to delivering outcomes for children and young people is good. The leadership and direction from elected members is very good and a shared vision and commitment to improving outcomes for children and young people informs planning. Priorities are clearly identified through effective use of data and wide consultation, and challenging targets are set for service development. There are very good and established systems for young people to have a meaningful and active role in influencing the running of services across Barnsley.
2. The integration of services for children is being managed effectively. The Executive Directors for Social Care and Education have worked in partnership to drive developments forward, maintaining well-established multi-agency working whilst ensuring rapid improvements to education services. The Director of Education Services has been appointed as Director of Children's Services (designate) to formally lead the development of Barnsley's Children's Service from April 2007. She is providing very strong leadership for these developments. Partnership working is well advanced, with extensive use made of pooled budgets to support the better integration of front line services. Formal management structures to reflect working arrangements are to be in place by April 2007. The capacity of council services to improve is good.
3. The CYPSP provides an effective multi-agency forum involving all key services and partners in planning and delivery. The CYPP provides a common understanding of the agreed priorities, direction and actions to improve services and outcomes for children. Areas of high deprivation have been targeted.
4. The combined work of all local services in securing the health of children and young people is good. A good range of information for parents and carers is available in the main community languages and all schools are engaged in the healthy schools programme. Clinics for genito-urinary medicine are insufficient as are resources to ensure all children and young people with mental health problems can quickly access appropriate levels of support.
5. Children and young people appear safe and arrangements to ensure this are good. Many aspects of the services to safeguard children and young people and protect those at risk of abuse and neglect are good, with effective arrangements between social, education and health services and voluntary and private sectors to ensure a multi-agency approach. Good quality information is provided to inform children, young people and their families about key risks to their safety. Schools effectively raise children and young people's awareness on how to keep safe. A good range of preventative services and early intervention reduces the number of children in local authority care. Services for children who are looked after by the authority are good. During a period of recent staff shortages appropriate arrangements were put in place to ensure children were

safe however the continuity of support and completion of protection plans were compromised. Whilst staff shortages have been addressed successfully the current quality assurance system does not ensure that senior managers have sufficient information about the level of risk and the consistency of compliance with standards. Joint interviews with the police, for children reporting allegations of abuse do not follow national guidance due to insufficient police resource.

6. Improvements to education services, identified as unsatisfactory in 2004, have been rapid. Under the highly effective leadership and challenge from the Executive Director of Education services are now good and have won back the confidence of schools. The council has been particularly successful in making use of both its school improvement service and national strategies to raise attainment. Data are used well to monitor, challenge and support schools. Attainment across the age range is improving at a faster rate than nationally, but remains below the national average. Provision for children in early years settings is good. Good alliances have been made between partners offering provision for 14 to 19 year olds increasing the choices and relevance of the curriculum. Services for children and young people not attending school and those for vulnerable groups, such as those with emotional and behavioural difficulties, asylum seekers and BME groups are good. There are still too many young people aged 16 and over who are not in education, training or employment and too many who do not complete programmes of study post-16.

7. The combined work of all local services in helping children and young people to contribute to their communities is outstanding. Effective work by the youth service, schools, Children's Fund Ambassadors and others helps young people to make a positive contribution. The Youth Offending Team provides good quality services to prevent offending and re-offending by children and young people. Safer neighbourhood campaigns are having a positive outcome in reducing anti-social behaviour and providing appropriate alternative activities for young people. Bullying is being tackled robustly and children and young people report feeling safe in school.

8. The council is pro-active in attracting external funds to ensure strategic plans can be delivered in the short and long term. Well-established pooled budget arrangements promote effective multi-agency planning and commissioning. Performance management is comprehensive but staff shortages in social care have had a negative impact on the quality assurance processes. The draft workforce strategy for children's services illustrates good specific work within education and social care services but further work is required to promote multi-agency terms and conditions.