

Inspection of safeguarding and looked after children services

Kirklees

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Age group: All

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About this inspection

1. The purpose of the inspection is to evaluate the contribution made by relevant services in the local area towards ensuring that children and young people are properly safeguarded and to determine the quality of service provision for looked after children and care leavers. The inspection team consisted of four of Her Majesty's Inspectors (HMI), one additional inspector and one inspector from the Care Quality Commission. The inspection was carried out under the Children Act 2004.
2. The evidence evaluated by inspectors included:
 - discussions with 36 children and young people and eleven parents receiving services, front-line staff and managers, senior officers including the Director of Children's Services and the Chair of the Local Safeguarding Children Board, elected members and a range of community representatives;
 - analysing and evaluating reports from a variety of sources including a review of the Children and Young People's Plan, performance data, information from the inspection of local settings, such as schools and day care provision and the evaluations of serious case review undertaken by Ofsted in accordance with *'Working Together To Safeguard Children'*, 2010;
 - a review of 30 case files for children and young people with a range of need. This gave a view of services provided over time and the quality of reporting, recording and decision making undertaken;
 - the outcomes of the most recent annual unannounced inspection of local authority contact, referral and assessment services undertaken in July 2011;
 - interviews and focus groups with front-line professionals, managers and senior staff from NHS Kirklees PCT, part of Calderdale, Kirklees and Wakefield PCT Cluster and Calderdale and Huddersfield NHS Foundation Trust, Mid Yorkshire Hospital NHS Trust, South West Yorkshire Partnership NHS Foundation Trust and Locala.

The inspection judgements and what they mean

3. All inspection judgements are made using the following four point scale.

Outstanding (Grade 1)	A service that significantly exceeds minimum requirements
Good (Grade 2)	A service that exceeds minimum requirements
Adequate (Grade 3)	A service that only meets minimum requirements
Inadequate (Grade 4)	A service that does not meet minimum requirements

Service information

4. Kirklees comprises a mix of urban communities and rural areas. The resident population of Kirklees was 430,197 in July 2010, based upon General Practitioner (GP) registrations; this is an increase of 10.6% since 2001. Kirklees has more young people than the average across England and Wales (21% aged 0–15 years compared to 18%); the number of 0–15 year olds is almost to the same as in 2001. Nearly one in four of the Kirklees population was aged less than 19 years (101,505) in July 2010.
5. Kirklees has an ethnically diverse population including people of Pakistani, Indian, Irish, African-Caribbean and Black African heritage. The African-Caribbean population is mainly located in Huddersfield. More than one in eight people are of South Asian heritage, Pakistani and Indian. More than one in three young people in the north of Kirklees are of South Asian heritage, especially in Dewsbury and Batley, higher than in the south of Kirklees as set out in the Joint Strategic Needs Assessment.
6. Kirklees Children's Trust Board (CTB) is chaired by the lead member for children's services and comprises representatives from the council, health services, the Police, schools, colleges and the voluntary and community sector. A Children's Trust Executive, also chaired by the lead member, supports the work of the CTB, overseeing the transformation work taking place across children's services and underpinned by the Children and Young People's Plan.
7. The Kirklees Safeguarding Children Board (KSCB) was formed in April 2006. An independent chair was appointed in April 2010. The KSCB brings together the main organisations working with children and families including the local authority, West Yorkshire Police, NHS partners, schools and the voluntary and community sector. It provides strategic oversight of

safeguarding through quality assurance, reviews of operational performance and learning from serious case reviews.

8. At the end of March 2011, Kirklees had 131 approved fostering households and had 147 children and young people placed with independent fostering agency carers. The local authority has four residential care homes for looked after children (one home for disabled looked after children), providing 26 beds in total, a eight bedded semi-independent unit for 16–18 year olds preparing to leave care and an eight bed respite care unit for children with disabilities. On 31 October 2011, a five bedded children's home opened in Batley. The local authority currently has access to a further four placements provided by the independent sector.
9. The Directorate for Children and Young People is responsible for ensuring that the full range of the council's statutory responsibilities for children and young people are met and ensuring the cooperation of the council and partners in providing efficient and effective services to improve outcomes for children and young people.
10. The Learning Service provides strategic leadership for the education system, ensuring diverse provision across the full age range and fair access to it. It provides support for schools and early years settings and the development of the wider role of education within communities and families. It delivers a wide range of specialist learning support services for vulnerable children including those who are looked after.
11. Family Support and Child Protection bring together the statutory elements of social care provision and a wide range of family support services into one overall management arrangement. The service provides targeted interventions within a context of integrated assessment and service provision. It also brings together family support and children's centre provision and is responsible for the establishment of a new Integrated Youth Support Service, drawing together the Youth Offending Team (YOT) with the former Young People's Service. Commissioning and Safeguarding Assurance is responsible for strategic commissioning, planning, and independent review and advocacy. Management and support for the KSCB and the CTB are provided by this group.
12. The local authority looks after 599 children and young people (Oct 2011), of whom 353 (59%) are of compulsory school age and 396 (66%) are living in foster care placements. The number of looked after children has continued to rise since 2006. However, the rate (per 10,000 of population) in 2010 was about the same as the national average and just below statistical neighbours, with Kirklees ranked ninth lowest of eleven authorities.
13. Kirklees has 32 Sure Start children's centres located in the most disadvantaged areas of the Borough. There are 180 maintained schools comprising three nursery schools, 147 primary schools, 18 secondary

schools, six middle schools and six special schools. The local authority also maintains three pupil referral units (PRUs) and has seven Academies (six secondary, one primary).

14. Commissioning and planning of child health, young persons' services and primary care are undertaken by NHS Kirklees. Universal services such as health visiting and school nursing are provided by Locala (formerly Kirklees Community Health Care Services). Paediatric therapy services and children's Community Nursing Services are provided by Calderdale and Huddersfield Foundation Trust (CHFT) in South Kirklees and Locala in North Kirklees. Mid Yorkshire Hospital Trust (MYHT) provides physiotherapy services in North Kirklees. South West Yorkshire Partnership Foundation Trust provides learning disability services for children across Kirklees.
15. Safeguarding services are provided by all health providers across Kirklees. The acute hospitals providing children accident and emergency (A&E) services are CHFT in South Kirklees and MYHT in North Kirklees. There is a nurse-led walk in centre in the North which is open from 09.00 until 19.00 seven days a week. School House practice offers unregistered patients access to a GP. Out of hours services are provided by Local Care Direct and they have bases in South and North Kirklees.
16. Maternity and newborn and community maternal health services are provided by CHFT and MYHT. Children and families access primary care through one of 72 general practices and a walk in centre as detailed above. Child and adolescent mental health services (CAMHS) are provided by CHFT through a commissioned service under a standard NHS contract. There is no Tier 4 provision within Kirklees and access to this provision is commissioned from a number of NHS and private providers. Jointly commissioned services with Kirklees Borough Council include CAMHS Tier 2 services, substance misuse services, speech and language services, looked after children's services, services for vulnerable children and placements for children with complex needs.
17. Looked after children health services are provided by Locala. They are co-located with the Kirklees looked after children team to deliver statutory health requirements for looked after children. They provide consultation and support for staff as well as direct work with children and young people in residential and foster care.

Safeguarding services

Overall effectiveness

Grade 2 (Good)

18. The overall effectiveness of services in Kirklees for safeguarding children and young people is good.
19. The strategic leadership of the council and its partners are ensuring safeguarding has the highest priority and services have been consistently judged to be effective. Highly effective workforce planning has ensured a stable workforce which is closely aligned to the needs of the service, including the number of qualified social workers. This performance has been developed and sustained through highly effective target setting which has ensured performance in some key areas has improved. The recent unannounced inspection of the contact, referral and assessment arrangements did not identify any areas for priority action and swift action has been taken to tackle the areas for development which were identified. Partners know and understand the threshold for access to child protection services and this is implemented effectively. Safeguarding concerns are identified and addressed quickly to ensure children are safe. However records of strategy discussions do not always include evidence that decisions have been agreed by a social work manager or whether other agencies were consulted.
20. Performance on the timely completion of initial and core assessments is improved and is now good. Agencies contribute very well to the assessment process. The quality of initial and core assessments is improving and those completed within the children with disabilities team are of consistently good quality. However core assessment records entered on the electronic integrated children system (ICS) do not differentiate between the statutory work of the local authority and the common assessment process causing the potential for confusion.
21. The quality of child protection plans is at least adequate, leading to effective work with the most vulnerable children who are in need of protection to safely reduce risk. The rate of children on a child protection plan for two years and over has reduced and the percentage of children subject to a child protection plan for a second or subsequent time has significantly improved and is now below the national average. The dissemination of outline child protection plans and conference minutes is good. Although child protection minutes are detailed they do not always sufficiently record risk and protective factors. Core groups are held on time, they are well-attended but the quality of recording is too variable.
22. The culture of management at all levels is positive and supportive to front-line staff. The partnership uses its resources very well and the children's service budget is managed effectively. Performance management is good; however some aspects of quality assurance are not yet sufficiently robust.

The KSCB provides good oversight of safeguarding issues. Multi-agency arrangements for auditing the effectiveness of safeguarding and child protection services across partner agencies as required by Section 11 of the Children Act 2004 are good. However, the KSCB has not yet agreed a multi-agency data set to measure the performance of all partner agencies. Although children's social care have a case file auditing process which has driven improvement it does not focus sufficiently on the quality of practice and team managers do not have the capacity to routinely complete case file audits.

23. The partnership demonstrates a strong commitment to learning from the views of service users and using this to help influence the shape of services on the broad safeguarding agenda through schools' councils and effective links with the youth council. Progress to engage children and young people and their parents/carers in child protection work is good but low numbers of young people are attending child protection conferences. The partnership's first priority is concerned with addressing aspects of inequality and there are some excellent initiatives across the area which have made a difference to children's lives. The impact of services to address equality and diversity is judged outstanding. Although there are a wide range of good early intervention services the partnership is reviewing these services with a view to making them even better and to further increase the use of the common assessment framework (CAF).
24. Schools perform particularly well in the area of safeguarding. Staying safe outcomes have been judged good or better by Ofsted in nearly all schools. School attendance has improved and is now good. Arrangements in children's centres and PRUs to keep young people safe are good. The arrangements to identify and support children who are home-educated are also good. Young people who have responded to the Year 9 and 11 school survey have a clear understanding about how to stay safe. The arrangements for managing allegations against people who work with children are good. However it is not clear why there are considerably low levels of self-reporting to the local authority designated officer (LADO) from health and the Police. Although effective arrangements are in place to identify and monitor children missing from home, care and education, there is no over-arching policy across the partnership. The provision made for the health visiting and school nursing service to undertake key developmental checks for children over one-year-old is limited. The creation, quality and review of health plans within schools is too variable across Kirklees, with responsibility for health plans remaining with education staff in the south of the district and no oversight provided by school nursing. The YOT provides a range of interventions which are highly effective.

Capacity for improvement

Grade 2 (Good)

25. The capacity for improvement is good.

26. The local authority has a track record of good performance on safeguarding and child protection services. This performance has been sustained and improved in some key performance areas. The strategic and political leadership of the council and partner agencies give safeguarding the highest priority. Although the council and its partners face considerable challenges associated with poverty, inequality and unemployment there are many examples of improvements to safeguarding for children, particularly to ensure the most vulnerable children who need protection are safe. Strategic priorities have been aligned across the CTB, the KSCB and the council and this ensures a strong focus on tackling known areas of weakness and monitoring progress against key priorities. There is a good level of transparency in the arrangements for reporting performance.
27. Highly competent senior officers across the partnership provide clear strategic direction and respond effectively to the changing demands for safeguarding and child protection services. The council's workforce strategy has ensured sufficient numbers of staff are in post to meet the demand for safeguarding services. Effective action has resulted in considerable improvements in the recruitment and retention of qualified social work staff to ensure child protection services are delivered to a good standard. However the capacity to support contact arrangements for children and their parent/carers is not always sufficient to meet demand.
28. Social workers and managers have good access to a wide range of high quality training courses which is helping to consolidate and improve practice. Social workers have access to good quality, reflective supervision but there are some delays in entering supervision records on the ICS. Overall, the quality and timeliness of case recording is too variable and practice does not ensure records are maintained consistently. The ICS does not provide effective support for social workers and their managers.
29. Multi-agency partnership working to safeguard children and ensure the most vulnerable children who need protection are safe is effective. The KSCB provides effective community and professional leadership in relation to universal, targeted and specialist services. The KSCB provides a comprehensive range of good quality child protection training. The KSCB's management and oversight of the serious case review process is good. Lessons learned from serious case reviews are disseminated very well and this is helping to shape service improvements.
30. Good arrangements are in place to safeguard children and young people who attend the A&E departments at Dewsbury Hospital and Huddersfield Royal Infirmary. The paediatric liaison through Huddersfield Royal Infirmary is outstanding; however paediatric liaison at Dewsbury Hospital is less well-developed. Arrangements to safeguard and support children when they visit their parents who are adult mental health in-patients are good. Clear processes are in place to identify vulnerabilities in pregnant

women. However there is an inequity of access across the area in the provision of face to face interpreters for community based appointments which is impacting on the quality of some assessments. Arrangements to identify and support men, women and children affected by domestic violence are good. Multi-agency Public Protection Arrangements (MAPPA) have been evaluated as outstanding by the Youth Justice Board. There are some effective joint commissioning arrangements between health and the local authority to promote safeguarding. This is supported by some highly effective work by schools to promote community inclusion.

31. Policies are in place and good progress is being made to ensure all health practitioners have access to supervision in safeguarding children practice. However systems across all four health trusts do not provide sufficient assurance that staff are receiving supervision. Meetings do not take place between the named nurse for Calderdale and Huddersfield NHS Foundation Trust and the trust executive board lead for safeguarding as required by national guidance. The support provided by health visitors and school nurses to families with a child protection plan in place or child in need plan is good. Where a CAF assessment is in place this is being used effectively. Although, overall, young people have good access to effective drug and alcohol services arrangements at the A&E department, some aspects of work involving CAMHS and the alcohol service Crime Reduction Initiative (CRI) are underdeveloped. There is a lack of a coordinated partnership approach to support the care of young people who are misusing substances and who also have mental health problems. Teenage conceptions remain high.

Areas for improvement

32. In order to improve the quality of provision and services for safeguarding children and young people in Kirklees, the local authority and its partners should take the following action.

Immediately:

- ensure strategy discussions include consultation with other relevant agencies involved with the family wherever possible and that records of strategy discussion decisions are endorsed by a social work manager

Within three months:

- improve the consistency of the quality of initial child protection and core group minutes so that they are always sharply focused on risk and protective factors
- accelerate plans and progress made by partner agencies on the use of the CAF to ensure children and families receive the support they

need early to prevent cases escalating into the child protection system

- establish the reasons for the significantly low levels of self reporting to the LADO from health and the Police and determine if further action is required
- ensure that key developmental checks for children over one year old are routinely carried out and health plans in the south of the district are completed by, or effectively supported by, a suitably qualified experienced health professional
- ensure that arrangements are in place to support young people who attend A&E following an episode of substance or alcohol misuse
- review the working practices between CAMHS and CRI to ensure that young people with a dual diagnosis receive a coordinated approach to their care
- ensure there is sufficient capacity to support the contact support arrangements for children and their parent/carers.

Within six months:

- strengthen the current social care case file audit arrangements and processes to focus on quality and capture service users views to drive improvement. Ensure these arrangements are adequately resourced and findings are widely reported
- evaluate the current arrangements for young people to attend their child protection conferences and ensure they are properly advised and supported
- improve the functionality of the ICS to support social workers and managers to effectively maintain case file records for children and families. Ensure social workers and managers use the ICS consistently and improve the timely completion of records
- strengthen arrangements to tackle the high rate of teenage conceptions in Kirklees.

Safeguarding outcomes for children and young people

Children and young people are safe and feel safe

Grade 2 (Good)

33. The effectiveness of services to ensure that children and young people are safe and feel safe is good.
34. The safeguarding and child protection needs of children and young people are identified and responded to effectively and in a timely way to ensure children are safe. This work is supported by a thorough multi-agency approach to Section 47 child protection investigations which ensures children are seen and where appropriate seen alone during the assessment process. The KSCB multi-agency training on child sexual exploitation and the use of the risk assessment framework matrix has resulted in better targeting and has increased the number of referrals to the Police. The partnership is exploring new ways to strengthen the inter agency response to vulnerable children and young people at risk of sexual exploitation, forced marriage and domestic abuse, such as the co-location of social workers in the Police safeguarding unit.
35. Schools perform particularly well in the area of safeguarding, and staying safe outcomes have been judged good or better by Ofsted in nearly all schools. Effective work is undertaken by schools on anti-bullying, prevention of violent extremism, alcohol and drug misuse. School attendance has improved and is now good. Arrangements in children's centres and the PRUs to keep young people safe are good. Arrangements for the identification of and support for children who are home educated are good. Young people have a good understanding about staying safe and are able to contribute to their own safety. The children and young people seen by inspectors report that agencies keep them safe and this is supported by the school survey. Young people are helping to shape services in schools to tackle the high rate of children involved in road traffic accidents but it is too early yet to measure improvement.
36. The local authority fostering service and local authority adoption service are judged outstanding for safeguarding by Ofsted. Private fostering is judged good by Ofsted. Safeguarding provision in children's homes is judged as good or better by Ofsted. The complaints procedures and the management of responses to complaints are robust. The arrangements for managing allegations against people who work with children are good. However it is not clear why there are low levels of reporting to the LADO from health and the Police. Safe recruitment procedures meet statutory requirements. The arrangements for screening and the approval of Criminal Record Bureau checks are very good. The introduction of a new information technology system to support this area of work ensures

records relating to safe recruitment are good and easy to access. Procedures ensure that appointment decisions are signed off by a senior officer and decisions are recorded appropriately. The Equality and Disability Act 2010 has been implemented well.

37. While good arrangements are in place to identify and monitor children missing from home, care and education procedures and practice are not set out in one comprehensive policy across the partnership. The YOT provides a range of interventions which are highly effective. Although the number of children and young people who enter the criminal justice system for the first time is similar to the regional average, performance on reducing the rate of re-offending by the YOT is good.
38. The partnership's first priority is concerned with addressing aspects of inequality and there are some outstanding initiatives across the area which have made a difference to children's lives. This includes work undertaken by the local authority with interfaith groups on keeping young people safe such as staff who undergo safeguarding training at the Sikh Temple and at the 60 Madrassahs. The local authority has produced a good guidance document to support this work.

Quality of provision

Grade 3 (Adequate)

39. The quality of provision, which includes service responsiveness, the quality of assessment and direct work with children, young people and families, and case planning, reviews and recording, is adequate.
40. The local authority contact, referral and assessments service ensures safeguarding concerns are identified and addressed quickly to ensure children are safe. The threshold for access to child protection services is clearly set out in the KSCB child protection procedure and understood by partner agencies. Once children are identified as being at risk of significant harm, Section 47 child protection enquiries are prioritised. Multi-agency partnership working to safeguard children and ensure the most vulnerable children who need protection are safe is good. All Section 47 child protection enquires and initial and core assessments are undertaken by suitably qualified and experienced social workers. Social worker caseloads are manageable and transfer arrangements between duty and assessment teams and care management teams are timely and effective.
41. Although there is a wide range of good early intervention services the partnership has recognised that they are insufficiently coordinated and targeted. The partnership is undertaking a comprehensive review of these services which has not yet been completed. Thresholds for access to children's social care child protection service are known and understood by all the partner agencies. However there is a lack of clarity by some staff and agencies about the thresholds for children in need within the meaning of Section 17 of the Children Act 1989 and for those children who may have a lower threshold of need under CAF arrangements. The use of the

CAF is insufficiently developed. Although work is being undertaken by the local authority to support the use of the CAF and the numbers of common assessments completed by partners has increased, the numbers of completed common assessments remains low.

42. All initial assessments and those core assessments undertaken where there are child protection concerns are conducted by qualified social workers. The local authority also has a dedicated team of unqualified community care officers who following an initial assessment provide support and further assessments for children in need cases. This team also provides appropriate support for cases being stepped down following the successful completion of a child protection plan. The local authority is reviewing the work of this team. They have identified that the additional support provided by the unqualified workers has reduced the numbers of re-referrals. Inspectors saw cases being quickly allocated to qualified social workers if the circumstances change. Senior managers monitor the work of this team closely and acknowledge, correctly, the need to manage this work on the edge of statutory services robustly to minimise risk. The overall performance and impact of a dedicated team of this nature will be considered as part of a planned wider review of work in the region.
43. Currently the assessments cared out by this team are recorded using the core assessment documentation and are placed on the ICS, in the same way as core assessments undertaken by qualified social workers. Although this enables good case tracking, the ICS does not differentiate between the statutory work which requires a core assessment to be completed by a qualified social worker and these assessments. The potential for confusion regarding the status of these assessments was identified at the recent unannounced inspection as an area for development.
44. Targeted work to improve the timeliness and quality of initial and core assessments is good. The most recent local management information demonstrates that performance on the completion of initial assessments within 10 days and core assessments within 35 days is improved and is now good. Although the quality of initial and core assessments is improving, overall the quality of those seen by inspectors remains too variable. However, initial and core assessments completed within the children with disabilities team are of a consistently good quality.
45. Agencies contribute very well to the assessment process and there are good arrangements in place to ensure that children and families whose first language is not English are able to participate fully in their assessments and plans. Good examples seen by inspectors include the lessons learned from serious case reviews about the need for thorough consideration of significant males in the household, and issues of diversity and ethnicity. Children and young people are routinely seen and seen alone as part of their assessments but this is not always recorded consistently on the ICS.

46. The local authority has improved its response to domestic abuse referrals. Out of hours duty arrangements work well with daytime services to safeguard and protect children. Performance on initial child protection conferences held within 15 days of strategy discussion has improved and is better than similar councils. This work is supported by a good level of involvement with parents and carers in initial child protection conferences and review conferences. However the capacity of the contact support arrangements for children and their parent/carers is not always sufficient to meet demand, such as to support care proceedings.
47. Effective work to safely reduce risk has been undertaken with the most vulnerable children who are in need of protection and are subject to a child protection plan. The rate of children on a child protection plan for two years and over has reduced and the percentage of children subject to a child protection plan for a second or subsequent time has significantly improved and is now below the national average. The timeliness and quality of initial contacts between parents and front-line social workers are good. Parents who are engaged in the child protection system report that they are treated with sensitivity and respect.
48. Overall, the quality and timeliness of case recording is too variable. Social work and management practice does not ensure records are maintained consistently. There are delays entering some records on the ICS. The ICS does not provide effective support for social workers and their managers in the delivery of contact, referral, assessment and child protection services. The recording of chronologies is not consistent. They are often records of processes rather than statements or summaries of significant events or summaries at key stages in a child's life. The reasons for managers' decisions, including analysis of risk factors and history, are not always clearly recorded. The recording of strategy discussions is poor and does not always evidence management decisions. The council has developed new templates to assist social workers in undertaking and recording assessments. Although they appear to be more user friendly and a much better way to share outcomes of assessments with families, they have not yet been introduced and are about to be launched.
49. Strategy discussions routinely constitute a telephone consultation between the social worker, rather than the social work manager, and representatives of the Police, with little evidence of consultation with other agencies. The dissemination of outline child protection plans and conference minutes is promptly undertaken. Although child protection minutes are detailed they do not always sufficiently record risk and protective factors. Child protection plans are adequate but insufficiently focused on timescales and outcomes. Core groups are held on time, they are well-attended but the quality of recording varies and practice does not ensure records are located on the ICS consistently. This makes monitoring by core groups more difficult. However all child protection plans are reviewed on time.

50. Social workers have access to good quality, reflective supervision. However records are not entered on the ICS promptly. Hard copy written records do not clearly show what actions were agreed in all cases or the follow up of outstanding actions, or focus on the quality of practice to demonstrate effective case management.

The contribution of health agencies to keeping children and young people safe **Grade 3 (Adequate)**

51. The contribution of health agencies to keeping children and young people safe is adequate.
52. Health partners are well-engaged with the CTB and the KSCB. There are clear links between the comprehensive joint strategic needs assessment and the Children and Young People's Plan which are translated into clear organisational priorities across the partnership. Adequate governance structures provide health trust boards with assurance about the arrangements to safeguard children within their organisation.
53. An increasing number of staff across health care trusts, including GPs, have access to appropriate training. Policies are in place and good progress is being made in ensuring that all health practitioners have access to supervision in safeguarding children practice. However the monitoring mechanisms in place within all four health trusts do not provide sufficient assurance that all child protection and child in need cases are discussed in supervision whilst part of an active caseload. Adequate line management and supervision arrangements are in place for the safeguarding designated and named professionals across Kirklees. However the named nurse for Calderdale and Huddersfield NHS Foundation Trust does not have regular timetabled meetings with the trust executive board lead for safeguarding, as required by Working Together 2010.
54. An effective child death overview panel has raised awareness on the dangers of co-sleeping and importance of family history. Effective partnership working has resulted in a reduction in the number of infant deaths in the most deprived area of Kirklees. Good arrangements are in place to safeguard children and young people who attend the A&E departments at Dewsbury Hospital and Huddersfield Royal Infirmary. The paediatric liaison delivered by Huddersfield Royal Infirmary is outstanding; however paediatric liaison at Dewsbury Hospital is less well-developed.
55. Care pathway support for young people who attend A&E and require care and assessment following an incident of self harm or who are in mental health crisis is good. The arrangements to support young people attending A&E through alcohol or drug use are not well-established and the young people's substance misuse service, CRI is not used effectively. Children and young people have access to a limited range of emotional health and

wellbeing services and provision to meet the needs of the children and families in Kirklees is poor. This has been recognised by commissioners for the local authority and the PCT.

56. Access to health support for families with children who have disabilities is adequate. An effective nurse led service works well with families and education to support young people with a learning disability. However there is limited support for children with autism and there is a developing CAMHS for children with learning difficulties and/or disabilities. There is an inequity in the provision of speech and language therapy to young people, with the service in the north of Kirklees discharging young people once they enter mainstream secondary education whereas in the south of the district young people are seen until they leave education.
57. Adult mental health services identify and risk assess well where service users have children or have child caring responsibilities. Effective arrangements are in place to safeguard and support children when they visit their parents who are adult mental health in-patients. Good processes are in place to identify vulnerabilities in pregnant women. The process for midwives to refer safeguarding concerns to children's social care is clear and supported by a comprehensive safeguarding care pathway that midwives use to safeguard the unborn child. Midwifery staff in the north of the district report that concerns about budget constraints mean they cannot always access face to face interpreters for community based appointments. This has the potential to compromise thorough risk assessments.
58. Delivery of the healthy child programme across Kirklees is poor. The capacity of the health visiting and school nursing service is not sufficient to ensure that key developmental checks for children over one year old are routinely carried out. Practice has developed so that health visiting and school nursing activity is risk assessed to ensure child protection and safeguarding work is prioritised. The creation, quality and review of health plans within schools varies too much across Kirklees, with responsibility for health plans remaining with education staff in the south of the district and no oversight provided by school nursing.
59. There is good support provided by health visitors and school nurses to families with a child protection plan or child in need plan. Where a common assessment is in place this is being used effectively. Overall, young people have good access to effective drug and alcohol services. However the partnership's approach to support the care of young people who are misusing substances and who also have mental health problems is insufficient to meet demand. The provision of sex and relationship education is too variable. There has been no authority wide evaluation by young people on the quality of sex relationship education. There is limited progress in reducing teenage conceptions which remain high.

60. Adequate arrangements are in place to ensure that children who require a child protection medical or an examination following alleged sexual abuse receive a responsive service. Effective partnership working ensures that, where possible, families are protected from domestic violence. Health partners are well-represented on the Multi-Agency Risk Assessment Conference (MARAC). Locala regularly audit action taken by public health nurses on the notifications of domestic violence to ensure that appropriate action is taken.

Ambition and prioritisation

Grade 2 (Good)

61. Ambition and prioritisation are good.
62. The partnership has a track record of good performance on safeguarding and child protection services. This performance has been sustained and there is improvement in key areas of service. The strategic and political leadership of the council champion the needs of children, and partner agencies give safeguarding the highest priority. The council budget for its contact, referral, assessment and child protection service is ring fenced. Ambitious targets to improve services further are backed by new resources identified over three years to ensure continuity of service in line with demand. Although the local authority and its partners face considerable challenges associated with poverty, inequality and unemployment there are many examples of good impact to improve safeguarding outcomes for children and particularly to ensure that the most vulnerable children who need protection are safe. However early intervention and prevention services across the partnership are insufficiently coordinated and targeted. Managers are aware of this and a review is underway.
63. The partnership knows itself well. Safeguarding priorities are clearly identified in the Children and Young People's Plan and in other strategic documents. Knowledge of the make-up of the local population and their needs is good and set out in the Joint Strategic Needs Assessment. Strategic priorities have been aligned effectively across the CTB, KSCB and council and this ensures a strong focus on tackling known areas of weakness and monitoring of progress against key priorities. Kirklees Council was one of the first areas in the country to achieve a Level 3 rating for its performance on the Equality Standards Framework.
64. There is a good level of transparency in the arrangements for reporting performance and effective challenge across the partnership by the council through its Scrutiny Committee, the KSCB and the CTB. Competent senior officers across the partnership provide clear strategic direction and respond effectively to the changing demands for safeguarding and child protection services. The local authority has taken swift action to tackle areas for development identified in the unannounced inspections of its front-line child protection service. Workers report that senior managers

are visible, inclusive, accessible and respond effectively to issues. Operational staff demonstrate clear and focused child centred work with children and young people.

Leadership and management

Grade 2 (Good)

65. The leadership and management of safeguarding services across the partnership, including workforce development, user engagement and the effective use of resources, are good.
66. The partnership demonstrates a strong focus on issues of diversity and tackling inequality across its strategic and operation policies and plans. These are supporting the effective assessment and provision of appropriate services to children and families. The local authority's corporate workforce development strategy focuses on the need to retain and recruit a workforce that represents its diverse community. It is a testament to the long term impact of these policies that the make-up of the council's workforce is reflective of the demography of the communities that it serves. This important aspect of leadership and management is outstanding.
67. Effective action has resulted in considerable improvements in the recruitment and retention of qualified social work staff. Staff turnover and vacancy rates are low and this has created a stable workforce. There is a very low level of dependency on social work agency staff and a good balance of experienced and newly qualified social workers (NQSWs) who are well-supported by their managers. NQSWs receive appropriate training and have a protected caseload that enables them to develop their confidence and skills. NQSWs who spoke with inspectors report that they receive good support from their managers.
68. Social workers and managers have good access to a wide range of high quality training courses that meet regulatory requirements, address national and local priorities and meet their developmental needs. There are good systems in place to evaluate the impact of training and report progress on the workforce development action plan. This is reported to a group of senior managers every two months. Good use has been made of the Social Work Improvement Fund to resource social worker secondments to the Police, to screen domestic abuse notifications and to strengthen the links between partner agencies.
69. The partnership demonstrates a strong commitment to learning from the views of service users and using this to help influence the shape of services. Despite the comprehensive participation strategy still being in draft, good work is being undertaken at all levels. Most schools have school councils with elected representatives. Good systems to gather the views of children and young people in schools, including those children with a disability, are helping to shape strategy and policy. For example,

the target to reduce the number of children and young people who have experienced bullying was achieved.

70. The Year 9 and 11 pupil surveys have been used to shape priorities such as those set out in the Children and Young People's Plan. Children with learning disabilities have also made an effective contribution to the Children and Young People's Plan through the well-established youth council. The youth council also has good links with the Scrutiny Committee and effectively coordinates the views of young people across the authority.
71. Good targeting to engage with children and young people and their parents/carers in child protection work has led to a high proportion of parents/carers attending child protection conferences. However not enough young people are attending child protection conferences and their views are not routinely being gathered to drive service improvements in this important area of service operation. The local authority has a positive approach to the investigation of complaints and is committed to the early resolution of complaints. Outcomes from complaints are used effectively to develop and improve service provision.
72. The partnership uses its resources effectively. The KSCB business plan is closely aligned to the core business of child protection work. The KSCB is particularly effective in its oversight of the implementation of action plans resulting from serious case reviews. Lessons learned from serious case reviews are leading to service improvement and some services have been comprehensively redesigned to improve services such as the management of domestic violence referrals.
73. The children's service budget is managed effectively. The budget was balanced last year and is on target this year. The child protection budget is closely monitored by the Scrutiny Committee and the arrangements to review and align the budget to meet the demand for service are good. Additional resources have been allocated to the budget for this area of work in recognition of the growth in demand to support the business plan over the next three years.
74. The arrangements for commissioning, decommissioning and re-commissioning of services are good. Services are subject to continual review to ensure needs are closely matched by service provision and joint commissioning ensures duplication of service is minimised to provide value for money. The local authority has commissioned a contact service to reduce the cost of social workers supervising contact between children and their families. However the capacity of the contact support arrangements for children and their parent/carers is not always sufficient to meet demand, for example to support care proceedings. The local authority has decommissioned the missing children's service provided by a

voluntary organisation and is now providing this internally through the young people's service. This has reduced costs and improved quality.

Performance management and quality assurance

Grade 2 (Good)

75. Performance management and quality assurance are good.
76. The KSCB undertakes a range of multi-agency audits, for example to help inform how pre-birth assessments are completed, which is leading to improvements. Annual reports are received by the KSCB from agencies on a wide range of specific issues such as missing children, child death overview panel and the LADO. This provides the KSCB with a good oversight of safeguarding issues. Robust multi-agency arrangements are in place to audit the effectiveness of safeguarding and child protection services across partner agencies as required by Section 11 of the Children Act 2004. The KSCB has a performance framework but has not yet agreed a multi-agency data set and the data collected is predominately from social care. The KSCB monitors the national indicators in relation to looked after children to benchmark performance but it is recognised by the Board that it has not yet focused sufficiently on the needs of these children.
77. Targeting of key areas of poor performance in the local authority contact, referral, assessment and child protection service operation has resulted in improvement in most areas such as in the timely completion of initial and core assessments. Although children's social care have a good case file auditing process which has supported this improvement it does not sufficiently focus on the quality of practice. Team managers are required to audit two files per month but not all of them have the capacity to routinely complete this work. The arrangements for case file auditing and action planning has effectively driven improvement in some key areas of the local authority child protection service, however progress on improving practice in other key areas has been slow, for example in the systematic use of case file chronologies.
78. The culture of management at all levels is positive and supportive to front-line staff. Social work staff report that their managers are accessible and their leadership is valued and respected. Supervision is provided regularly and social workers have good access to managers for advice between formal supervision sessions. Staff report the quality of supervision is good. Individual performance is well-monitored through annual performance appraisal and staff are well-supported when poor performance needs to be tackled.
79. The ICS does not provide a robust platform for effective management oversight of cases and dual processes for recording on the system make it complicated and difficult to use. The inadequacies of the current ICS are recognised by senior managers and front-line workers and there has been

early discussion at strategic and senior management level to determine how best to proceed. While child protection chairs are able to monitor performance on individual cases they are not systematically monitoring the overall performance of children's social care. Managers are now prioritising this as an area for development.

Partnership working

Grade 2 (Good)

80. Safeguarding partnership working is good.
81. The KSCB meets its statutory responsibilities and provides effective community and professional leadership in relation to universal, targeted and specialist services. The KSCB has a highly respected and experienced independent chair who provides good leadership, effective support and challenge. The chair is a member of the CTB and provides an effective link between the two boards. The KSCB has representation from a wide range of partner agencies and members are at an appropriate level of seniority to make decisions on behalf of their respective organisations. Representation has been strengthened recently through the recruitment of a GP and a lay member and there are good links with adult services and the voluntary sector. However, due to recent changes there is currently no board member to represent ethnic minority communities in Kirklees and little involvement of children and young people. These weaknesses are being addressed.
82. The KSCB provides a comprehensive range of good quality child protection training. Strong links exist between the KSCB and adult services. The KSCB's management and oversight of the implementation of the serious case review process is good. Of the three most recent serious case reviews completed by the Board two were evaluated by Ofsted as good and one as adequate. Lessons learned from serious case reviews are disseminated very well.
83. Arrangements to identify and support men, women and children affected by domestic violence are good. In the last year targeted work to address domestic violence has been effective with improved take-up of services and more cases being identified as high risk and managed by MARAC. MAPPA have been evaluated as outstanding by the Youth Justice Board. There is good attendance by participating agencies and actions are followed up to effectively manage high risk offenders.
84. There is effective multi-agency partnership working to safeguard children. This ensures the most vulnerable children who need protection are safe. Although the thresholds for social care child protection intervention are understood, there is a lack of clarity by some staff and agencies about the differences between children in need within the meaning of Section 17 of the Children Act 1989 and those children who may have a lower threshold of need. Collaboration between the Police and children's social care in undertaking Section 47 child protection enquiries is good.

85. Good joint commissioning arrangements between health and the local authority are helping to promote safeguarding. This is supported by some highly effective work by schools to promote community inclusion such as offering teaching sessions at the mosque, supporting English and maths. Some of the inter-generational work completed by schools and local community special schools to meet the needs of the diverse communities of Kirklees is outstanding.

Services for looked after children

Overall effectiveness

Grade 2 (Good)

86. The overall effectiveness of looked after children services is good.
87. The strategic and cross party political leadership give high priority to the needs of looked after children and services are backed by the necessary financial resources to ensure these children and young people are cared for very well. Leadership and management of the looked after children service are good overall. The design of the looked after children service has been significantly improved to provide a coherent and very well-coordinated multi-agency response. The makeup of the workforce is reflective of the communities of Kirklees. The local authority fostering and adoption services are judged outstanding by Ofsted. The quality of local authority children's homes is judged good or better as is the quality of residential and educational provision for looked after children with learning difficulties and/or disabilities. However support for young people in local foster and residential placements through the CAMHS is under developed. Early intervention and prevention services are good at supporting families helping to prevent family breakdown. This is valued by parents. The guidance for carers of Muslim children is outstanding. The impact of services to tackle aspects of equality and diversity is judged good overall.
88. Although the number of looked after children has increased, numbers have been low historically. There has been a high rate of expenditure on children in need which has helped to reduce risk for children and to prevent them entering the looked after children system unnecessarily. All looked after children are allocated to a qualified social worker but a small number of statutory visits are made by an unqualified worker. Social worker case loads are manageable. Staff including those in the voluntary and community sector have good access to high quality training which is sharply focused on meeting the needs of looked after children and care leavers. Social workers are well-supported in their career development. Although social workers receive regular supervision, records do not always show evidence of reflective practice and there are delays entering these records on the ICS.
89. Good arrangements for commissioning, re-commissioning and decommissioning of services ensures the individual needs of looked after children are closely matched to provide good value for money. Short term and long term stability of looked after children placements is good. Permanency planning for looked after children is good and this is also supported well by the good use of Special Guardianship Orders. However the rising demand for looked after children placements has led to an increased use of out of area placements which is impacting on the

distance children are placed away from where they live and the effective use of resources. The local authority is tackling this as a matter of priority.

90. Although the quality of assessments seen by inspectors is too variable, overall the most recent assessments are improved with some good examples. Assessments and plans for looked after children are sensitive to their diverse needs. Performance on the timely completion and the rate of looked after children attendance at their review is very good. However the rise in the numbers of looked after children has stretched the capacity of independent reviewing officers (IROs). Although this has not impacted on the timeliness of reviews it has impacted on the breadth and depth of their work. The functionality and inherent duplication of the ICS is not conducive to effective record keeping or information retrieval. There are delays in entering assessments on the ICS and records do not always sufficiently demonstrate the wishes and feelings of looked after children. Minutes of reviews are often not being disseminated promptly and it is not always clear whether parents receive a copy of those minutes.
91. Outcomes for looked after children are mostly good. Although education outcomes are adequate, by the time young people leave school and are beginning to enter adulthood, economic well-being outcomes are outstanding. Kirklees has not excluded any looked after child permanently in the last three years. Performance on fixed term exclusions is good, as is looked after children school attendance. The timeliness and completion of personal education plans (PEPs) has improved but the quality of plans remains too variable. There are some excellent specialist projects and programmes being delivered to enhance literacy and numeracy skills. Particularly good work is undertaken by PRUs and the pupil premium is being used well to support young people. A high and increasing proportion of looked after young people progress into further education or training at age 16. Numbers of young people who were not in education, employment or training were previously very high. Targeted support has seen a significant reduction in this number. A comprehensive package of support is available for care leavers going into higher education. Almost all care leavers have a pathway plan which is up to date and reviewed regularly. Plans are comprehensive and of good quality. Young people leaving care and moving into their own accommodation receive good support. The proportion of young people in suitable accommodation is very good.

Capacity for improvement

Grade 2 (Good)

92. The capacity of the council and its partners to improve services for looked after children and young people is good.
93. The local authority has a track record of good performance on looked after children services. Highly competent senior officers across the partnership provide clear strategic direction and the partnership arrangements ensure

looked after children are given the highest priority. These priorities are based on a robust needs analysis which clearly identifies the partnership's strengths and weakness. Good arrangements are in place to target improvement including single and multi-agency action planning. This ensures key areas of performance have been sustained and improved so outcomes for looked after children are good overall. The outcomes for 'being healthy', 'staying safe' and 'making a positive contribution' are judged good and those for 'economic well-being' are outstanding. Corporate parenting arrangements are good. This work is supported by elected members who champion the needs of looked after children, supported by close links with the Children in Care Council. Although there has been a decline in the numbers of local foster parents and the level of support offered by CAMHS is under developed, the local authority and its partners have made plans intended to improve these services.

94. Looked after children are placed in provision that is good or better. Outstanding arrangements exist through the very good commissioning arrangements for monitoring external placements to ensure children are only placed in good provision. The auditing arrangements for children's services are particularly effective at driving improvement on specific performance indicators and other service priorities; however they are not sufficiently focused on aspects of quality. Significant improvement has been achieved in the timeliness of initial health assessments, and in the attention given to the quality of health care planning. A high proportion of looked after children are up to date with their immunisation and vaccination programme, which exceeds national performance. Nearly three quarters of looked after children have received their annual dental health check-up. While this demonstrates a year on year improvement, figures are still slightly below the national average. The timeliness of health reviews is good. However the school nursing service and the looked after children specialist nurses do not use the CRI screening tool as part of the health review to identify potential substance misuse.
95. Good arrangements are in place for monitoring safeguarding in placements. Social workers' looked after children case loads are manageable although a small number of statutory visits are still being made by unqualified staff. Young people are very well-supported to develop a range of communication skills increasing their self-confidence. The proportion of looked after children who participate in their reviews is good. The council has a very strong track record in ensuring they give children and young people a voice in strategic decision-making and this has been further strengthened by appointing a participation worker who is beginning to make a difference. There are excellent examples where young people have been involved in shaping services. The Children in Care Council is well-established. Although there is a dedicated place for looked after children on the youth council, looked after children's views are not yet sufficiently represented on it. The Pledge of the Director of Children's Services has successfully brought children's views and aspirations into

sharp focus, but it is too early to determine its impact on improving outcomes. Effective action is taken to prevent looked after children offending and reoffending.

Areas for improvement

96. In order to improve the quality of provision and services for looked after children and young people in Kirklees, the local authority and its partners should take the following action.

Within three months:

- improve the support provided by CAMHS for young people in local foster and residential placements
- increase the capacity of local foster care placements to improve placement choice and reduce the need for children and young people to be placed out of the area where they live
- ensure there is sufficient capacity for independent reviewing officers to conduct their work comprehensively
- ensure assessments and other records entered on the ICS demonstrate the wishes and feelings of looked after children and that review minutes are disseminated promptly to professionals, children and young people and their parents/carers and that this is recorded on the ICS
- increase the numbers of looked after children and care leavers attending dental health check-ups
- ensure that the CRI screening tool is used in all initial health assessments and health reviews for appropriately aged young people.

Within six months:

- improve the functionality of the ICS to support social workers and managers to effectively maintain case file records for children and families and ensure supervision records are entered on the system in a timely manner
- ensure all looked after children have a high quality PEP to inform their educational career
- strengthen the current looked after children and care leavers file audit arrangements and capture service users' views to improve the quality of records entered on the ICS and drive service improvement. Ensure these arrangements are adequately resourced and findings are widely reported including to the KSCB

- improve the links between the Children in Care Council and the Kirklees youth council to ensure the views of looked after children are represented.

How good are outcomes for looked after children and care leavers?

Being healthy

Grade 2 (Good)

97. Services to promote the health and well-being of looked after children are good.
98. The looked after children health team carries out effective initial health assessments and prepares good quality health plans. Performance on the timely completion of initial health assessments has improved and is good. The designated nurse for looked after children quality assures health reviews and health plans. The timeliness of health reviews is good. This ensures that most looked after children and young people have an appropriate plan to maintain their health. Most looked after children (89.9%) are up to date with their immunisation and vaccination programme, which exceeds national performance. Nearly three quarters of looked after children have received their annual dental checkups; this demonstrates a year on year improvement, although figures are slightly below the national average. Young people are asked where they want to have their health review, which improves their engagement in the process.
99. Children and young people who are looked after can access good local provision for support around drug and alcohol services. The involvement of health partners in commissioning specialist placements is much improved. However the school nursing service and the looked after children specialist nurses do not use the CRI screening tool as part of the health review to identify potential substance misuse. There are good arrangements for looked after young people who require contraception and sexual health services, either through accessing local universal services or by being supported on a one to one basis by the looked after children health team. Looked after teenagers and care leavers who become pregnant are supported well by the Family Nurse Partnership.
100. The health arrangements for young people leaving care are adequate. The looked after children health team are consulting with young people to ask them what health information they would like when they leave care as they recognise the current arrangements are in need of improvement. The looked after children health team is routinely invited to looked after children reviews or to take part in the pathway planning in preparation for a young person leaving care. Targeted work to ensure that the strengths and difficulties questionnaire (SDQ) is used when young people enter care is leading to good rates of completion which is providing a sound basis for health and well-being work. For example, findings from completed SDQs are being used to proactively seek CAMHS intervention at an earlier stage and to evaluate the effectiveness of any intervention. Although there are currently no looked after children or young people waiting to see a CAMHS

professional, some social workers report a lack of confidence in the current CAMHS which is leading to an increased use of externally commissioned packages of care for young people. The CAMHS is the subject of a comprehensive service review.

101. The health team are co-located with the children and families team and this helps in coordination of care. The appointment of a specialist worker for looked after children with complex care needs has greatly improved the coordination of health care for these very vulnerable children and young people. The health team is engaged well with training social workers, foster carers and staff in local children's homes on the health needs of looked after children. Good care planning and review arrangements ensure that the diverse needs of individual looked after children are met very well. Care leavers who spoke with inspectors report that their individual health needs are met very well, including dentists, opticians, GPs and health assessments.

Staying safe

Grade 2 (Good)

102. Safeguarding arrangements for looked after children and young people are good.
103. Decision making on the assessment of risk is timely and ensures that those children who need to be looked after are provided with placements that meet their immediate needs for protection. The local authority fostering and adoption services are judged outstanding by Ofsted. Looked after children social work case loads are manageable. Although all looked after children are allocated to a qualified social worker, a small number of statutory visits are carried out by an unqualified worker. Good commissioning arrangements are in place for monitoring safeguarding in out of area placements. Looked after children are placed in provision that is good or better. Short and long term placement stability is good. However there is insufficient choice to meet local placement need for family placements.
104. Although the number of unaccompanied asylum seeking children that are looked after is small, specific provision is made to ensure their needs are met very well. Only a very small number of young people are placed in bed and breakfast provision. There are highly effective safeguarding arrangements for looked after children with complex needs including outstanding local education provision. Good procedures are in place for monitoring children who are missing from care which are well-supported by the Police. Care leavers who spoke with inspectors said that they feel safe in their placements and communities. They know who to contact for help and support if they need it. Young people placed out of area say this was a positive choice for them so that they could make a new start and get away from the past.

Enjoying and achieving**Grade 3 (Adequate)**

105. The impact of services on enabling looked after children and young people to enjoy and achieve is adequate.
106. The local authority has high ambitions for the education of looked after children. Effective strategic overview of achievement and monitoring of looked after children education outcomes is provided by the head of specialist learning services who undertakes the role of the virtual head. The virtual head is well-supported by a looked after children education manager and a small team of education support staff. Educational outcomes for looked after children are satisfactory overall and at least in line with similar areas on most key performance measures. Results in English for 11-year-olds have improved consistently over the last three years, from below to just below the average for similar areas. Results in mathematics, while showing similar improvement, dipped slightly in 2010/11 but are now improving.
107. The clear improvement trend means the gap in attainment between looked after children and other children in the authority is closing at Key Stage 2. The proportion of looked after children who achieved five or more GCSEs, at A*–C grade including English and mathematics, improved last year but remained very poor at 12%. While young people gained a number of GCSEs and/or equivalent qualifications in 2010/11, very few achieved this higher standard. The proportion achieving one or more GCSE at A*–G grades has improved and is in line with performance in similar areas. Most looked after children and young people make at least satisfactory progress from their starting points. However the local authority has not yet succeeded in significantly narrowing the gap in attainment at Key Stage 4 and results for higher grades remain poor.
108. Kirklees has not excluded any looked after child permanently in the last three years. Performance on fixed-term exclusions is good. The authority is effective in taking action to promote good educational inclusion for looked after children. Comprehensive systems and effective information sharing between the local authority, schools and partners ensure that attendance, behaviour and education placements in the authority are monitored closely and concerns are identified and tackled swiftly. The most recent local data show that attendance of looked after children is good and similar for those attending schools inside and outside the authority. Ensuring that the large numbers of young people attending education outside the authority are effectively supported to achieve to their potential remains a challenge.
109. The timeliness and completion of PEPs have improved. However, the local authority recognises that the quality of these plans is variable. Key education information and data were often missing and academic targets, where they were included, lacked precision and clear timeframes. Data on

the academic progress of looked after children held by schools are not always being used systematically in the PEP process to inform effective planning. The looked after children's education service has recently developed a new PEP and this is beginning to have an impact on improving the quality.

110. A good range of high quality alternative education provision is available for young people when a full-time school placement is not appropriate or breaks down. Particularly good work is undertaken by PRUs. Young people who access alternative provision comment very positively about how it has enabled them to successfully move back into mainstream provision.
111. The partnership places as strong an emphasis on supporting children and young people to enjoy their education as it does on achieving well. A good range of out of school activities are on offer and the partnership has taken positive action to ensure that looked after children have access to the same kinds of opportunities as others in universal services such as play, youth, library and sports facilities. The pupil premium is being used well to support young people. Some excellent specialist projects and programmes are run, for example; the Letterbox project for enhancing literacy and numeracy skills, enabling access to sporting facilities across the authority, and free music lessons.

Making a positive contribution, including user engagement

Grade 2 (Good)

112. Opportunities for looked after children and young people to make a positive contribution are good.
113. Young people are very well-supported to develop a range of communication skills increasing their self-confidence to speak about matters that concern them. Particularly good work is done with looked after children with learning difficulties and/or disabilities to ensure they are supported to make a positive contribution. The council has a very strong track record in ensuring they give children and young people a voice in strategic decision-making and this has been further strengthened by appointing a participation worker. Opportunities for looked after children to influence the shape of services are good. For example, young people have supported the evaluation and commissioning of a new children's home, the commissioning of the substance misuse service, and consultation regarding the review of the CAMHS. Additionally, young people have contributed to a range of interviews for children's social care staff and to the training of independent visitors and foster carers. Young people regularly deliver training on corporate parenting to newly elected councillors and this has now become part of the core induction for new members.
114. The Children in Care Council is well-established and good structures are in place to ensure all young people in care are effectively represented,

including an under-13-year-olds' group. Young people are fully involved in developing the Pledge and this sets out the priorities for the next year. Very effective links are in place between the Children in Care Council and the corporate parenting group, including opportunities to annually revise the priorities set out in the Pledge through a residential conference. The Pledge has successfully brought children's views and aspirations into sharp focus, but it is too early yet to evaluate what difference this has made. These activities build on established practice in universal services where the majority of schools support student councils and work with the youth council helps shape service provision. However, although there is a dedicated place for looked after children on the youth council, young people in the youth council report that looked after children are not represented.

115. The proportion of looked after children who participate in their reviews is very good. The involvement of care leavers in pathway planning is also very good. Children in care and care leavers who met inspectors said they were happy with the quality of the services they received overall. Children's feedback is analysed from an equality and diversity perspective and to bring about improvement. Partners are taking robust and effective steps to prevent offending and reoffending by looked after children and care leavers. Partners work hard at identifying and supporting looked after children and other young people at risk, to develop resilience, self-confidence and a sense of responsibility such as through sharply focused restorative programmes.
116. Complaints about service provision are monitored closely. The council works hard at early resolution and this helps to ensure most complaints are resolved at an early stage. Effective action plans are developed within relevant teams in response to the issues raised by complaints. Care leavers who met with inspectors said they felt involved in decision making about their own life and that the Pledge was important to them.

Economic well-being

Grade 1 (Outstanding)

117. The impact of services to enable looked after children and young people and care leavers to achieve economic well-being is outstanding.
118. A high and increasing proportion of looked after young people progress into further education or training at age 16. Most care leavers have high aspirations and have clear and realistic goals for the future and are confident of the ongoing support of the council. Post-16 education and training opportunities, including vocational and academic programmes, are flexible and responsive to need. Good partnership work between the council, local college, training providers, employers and the Connexions service is helping to extend the range of provision. The partnership has recently developed a data base of 115 employers both within the council and privately and this has resulted in seven young people being engaged

or succeeding on apprenticeships. However the council is aware that it needs to increase the numbers of apprenticeships for looked after children within its own service provision.

119. The numbers of young people who were not in education, employment or training was previously very high. The appointment of a dedicated Connexions advisor for looked after children providing specific and targeted support has seen a drastic reduction in this number. A comprehensive package of support is available for care leavers going into higher education. Eight young people currently on degree programmes are providing excellent role models to the younger people coming through the care system. Almost all care leavers have a pathway plan which is up to date and reviewed regularly. Plans are comprehensive and of good quality. Care leavers who met inspectors described the support they received as excellent.
120. Care leavers have good support to live healthy lifestyles and are actively encouraged to make regular use of primary health care, such as sexual health services, as well as specialist provision such as that for substance misuse. Support for care leavers with disabilities is good, with transition plans carefully supporting independence where appropriate. Carers describe transition planning for this group of young people as supportive and thorough. The care leaving service provides a package of good opportunities for young people to develop useful skills and knowledge which equip them well for independent living. The authority provides good opportunities for young people to learn to drive a motor vehicle and many care leavers take advantage of this additional opportunity.
121. Young people leaving care and moving into their own accommodation receive good support and advice on setting up home. Housing applications to the council and its partners from young people leaving care are given high priority. Effective partnership work ensures that the most vulnerable young people, including those who are homeless or at risk of becoming so, are found suitable supported accommodation as soon as possible. The proportion of young people in accommodation which is deemed suitable for their needs is consistently above national and similar area average for this performance measure. Care leavers who met with inspectors report that they like where they live, the accommodation is suitable and safe and exit interviews completed by young people confirm this.

Quality of provision

Grade 2 (Good)

122. The quality of provision overall in services for looked after children and young people is good.
123. The local authority fostering and adoption services are judged outstanding by Ofsted. The quality of local authority children's homes is good or better. The quality of residential and educational provision for looked after children with learning difficulties and/or disabilities is good or better.

However support for young people in local foster and residential placements through the CAMHS is poor. Looked after children living out of the area are placed in good quality service provision. The majority of looked after children are placed with families. This is supported by good use of adoption placements. Good arrangements are in place to ensure value for money but good practice ensures placement choices are needs led rather than driven by financial concerns.

124. The capacity of the local authority fostering service remains low despite the proactive approach of the council in its campaign to strengthen this. However, they have been slow to respond to the shortfall and only this year increased allowances for foster carers. This has resulted in insufficient capacity to meet the demand for looked after children placements locally and a high proportion of looked after children are placed more than 20 miles from home, particularly teenagers and children with disabilities. There are some examples of effective early intervention and prevention services which are helping to prevent family breakdown which is valued by parents. The guidance provided for carers of Muslim children is outstanding.
125. Transition arrangements for looked after children into the Leaving Care team are effectively managed. The YOT is highly effective at addressing the needs of looked after children who enter the criminal justice system. Numbers of looked after children in custodial settings or secure children's homes are consistently low with no reported placements at the time of the inspection.
126. Although the quality of assessments seen by inspectors is too variable, overall the most recent assessments have improved. Decision making on whether children need to be looked after is effective and appropriate. Short term and long term stability of looked after children placements is good. Children are visited regularly by their social worker and report that they can see their social worker alone. However once a decision is made that a child cannot return home, the case is transferred to a different team which impacts on the continuity of service for looked after children. There is good continuity of IROs which is valued by looked after children.
127. Proactive and innovative approaches are highly effective to keep looked after children in mainstream school wherever possible. Assessments, planning and review processes are sensitive to the diverse needs of looked after children, including race, religion, language and sexual orientation. Looked after children and parents/carers report that they are fully engaged in assessments, plans and reviews. Performance on the timely completion and the rate of looked after children attendance at their review is very good. Permanency planning for looked after children is good and this is supported by good use of adoption and Special Guardianship Orders.

128. Although there are examples of good quality looked after children records, overall the quality is too variable. The functionality and inherent duplication of the ICS is not conducive to effective record keeping or information retrieval. Assessments are not always entered on the ICS promptly and targeted work to improve the use of chronologies is not yet fully embedded. The arrangements for recording the views of looked after children and their parents/carers before a review, and notes on the review, do not always sufficiently demonstrate their wishes and feelings. It is not clear from the ICS if parents receive a copy of their assessments and reviews.
129. The rise in the looked after children population has stretched the capacity of IROs. Although this has not impacted on the timeliness of reviews they are not able to spend enough time with young people before reviews or track and monitor plans. This is impacting on the quality of their work. Minutes of looked after children reviews are often not being sent out promptly to young people, parents and professionals. Targeted work to improve the timeliness and rate of PEPs completed has improved to ensure performance is at least adequate.

Ambition and prioritisation

Grade 2 (Good)

130. Ambition and prioritisation are good.
131. The local authority has a track record of good performance on looked after children services. The partnership arrangements with other agencies give looked after children the highest priority. Highly competent senior officers across the partnership provide clear strategic direction and respond effectively to the competing demands for the delivery of services to meet the complex and diverse needs of the looked after children population. Good arrangements are in place to target improvements, including single and multi-agency action planning which focuses on carefully chosen priorities, leading to sustained performance and improved outcomes for looked after children.
132. The Children and Young People's Plan identifies clear and ambitious targets to ensure key areas of performance have been sustained and improved, so indicators of whether looked after children receive a good service are better than comparators in most key performance areas. Although the fostering capacity has declined and CAMHS is underdeveloped, the local authority and its partners have made a significant investment intended to improve these services. Although looked after children's school attendance is improving the partnership still faces a big challenge in raising attainment beyond current low levels.
133. Priorities are aligned across the CTB, the council and children's services and are reported in the looked after children strategy 2011–13. Corporate parenting arrangements are good. This work is supported by elected members who champion the needs of looked after children supported by

close links with the Children in Care Council who are helping to influence the shape of services. The Corporate Parenting Strategy is clearly set out but the terms of reference for the group remain in draft so roles and responsibilities are not confirmed. This work is supported by highly effective reporting by managers across the partnership and meetings between the Children in Care Council and elected members and special events such as the annual residential.

Leadership and management

Grade 2 (Good)

134. The leadership and management of services for looked after children and young people are good.
135. The strategic and cross party political leadership give high priority to the needs of looked after children and services are backed by the necessary financial resources to ensure these children and young people are cared for very well. Workforce development is based on a thorough analysis of service needs. This has successfully ensured the workforce has been increased to meet the rising demand for looked after children services. The makeup of the workforce is reflective of the communities of Kirklees. Social work case loads are manageable and supported by community care officers who co-work specific children and young people to ensure their specific needs are met.
136. Staff report they feel well-supported by the council and their managers in the delivery of looked after children services. Staff, including those in the voluntary and community sector, have good access to high quality training which is sharply focused on meeting the needs of looked after children and care leavers. Social workers are well-supported in their career development and NQSWs report that they are supported very well. Although social workers receive regular supervision, records do not always show evidence of reflective practice and there are delays entering these records on the ICS.
137. Looked after children partnership work is good. Although the numbers of looked after children is increasing, numbers have been low historically. This is supported by a high rate of expenditure on children in need which has helped reduce risk for children to prevent children entering the looked after children system unnecessarily. The design of the looked after children service has been improved further to provide a coherent and very well-coordinated service with health, education, children's social care and after care services co-located on one site. Good strategic direction is provided by the head of specialist learning support services, looked after children education manager and dedicated education support group leading to effective work across schools to meet the needs of looked after children.
138. Good arrangements for commissioning, re-commissioning and decommissioning of services ensures the individual needs of looked after

children are closely matched to provide good value for money. Joint commissioning of services including pooled and shared budgets has reduced duplication and improved efficiency leading to sustained and improved outcomes for looked after children. For example, joint work with the housing department has ensured that care leavers are able to access good quality supported and independent living accommodation with occasional very low use of bed and breakfast provision.

139. Local authority spending on looked after children is closely matched to key areas of performance, a mix of national and local priorities and the specific needs of individual children and young people. The local authority has recognised that the high rate of looked after children placements with independent and out of area fostering agencies is leading to excessive expenditure. Placements are being closely monitored and wherever it is possible to meet the individual needs of children locally they are returning to the area and this is leading to improved value for money.
140. The ICS does not provide a sound basis for social workers and managers to conduct the looked after children service efficiently. The system has inherent duplication and is wasteful of both social workers' and managers' time. Action to improve how social workers and managers use the ICS is having an impact on issues such as the timeliness of entering assessments but overall practice remains inconsistent.

Performance management and quality assurance

Grade 2 (Good)

141. Performance management and quality assurance are good.
142. Service planning is based on rigorous and robust needs analysis. The partnership knows itself very well. Priorities are based on a clear needs analysis which sets out the partnership's strengths and weakness. Good arrangements are in place to monitor key areas of service operation and priorities for improvement so that performance is maintained and coordinated improvement is made. A comprehensive approach to action planning ensures targets for improvement are tackled very well. For example, lessons learned from serious case reviews are leading to improvements and are a strong feature of the partnership's work.
143. The local authority ensures the findings from inspections are disseminated across the partnership. Excellent arrangements exist through the very good commissioning arrangements for monitoring external placements to ensure children are only placed in good provision. A range of audits support the evaluation of performance across a range of key performance indicators and service specific improvement priorities. The auditing arrangements for children's services have been particularly effective at tackling specific performance indicators and other service priorities; however they are not sufficiently focused on quality. Although targeted

work to improve the number of PEPs has been effective, overall the quality remains too variable.

Record of main findings:

Safeguarding services	
Overall effectiveness	Good
Capacity for improvement	Good
Safeguarding outcomes for children and young people	
Children and young people are safe and feel safe	Good
Quality of provision	Adequate
The contribution of health agencies to keeping children and young people safe	Adequate
Services for looked after children	
Ambition and prioritisation	Good
Leadership and management	Good
Performance management and quality assurance	Good
Partnership working	Good
Equality and diversity	Outstanding
Services for looked after children	
Overall effectiveness	Good
Capacity for improvement	Good
How good are outcomes for looked after children and care leavers?	
Being healthy	Good
Staying safe	Good
Enjoying and achieving	Adequate
Making a positive contribution, including user engagement	Good
Economic well-being	Outstanding
Quality of provision	Good
Services for looked after children	
Ambition and prioritisation	Good
Leadership and management	Good
Performance management and quality assurance	Good
Equality and diversity	Good