

Inspection of safeguarding and looked after children services

Redcar and Cleveland

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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 three of Her Majesty's Inspectors (HMI) 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 61 children and young people and 22 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 a serious case review undertaken by Ofsted in accordance with '*Working Together To Safeguard Children*', 2010
 - a review of 72 case files for children and young people with a range of need. This provided 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 November 2010
 - interviews and focus groups with front line professionals, managers and senior staff from NHS Tees, South Tees Hospitals NHS Foundation Trust and Tees, Esk & Wear Valley NHS Foundation Trust.

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. Redcar & Cleveland is the largest Borough in the Tees Valley and has the second highest population of approximately 137,400. Children and young people age 0-15 years make up 18% of the total population and those in the 16-24 age group 11.5% of the population. Those classified as belonging to an ethnic group rather than White British form 1.1% of the population and are represented in every ward in the Borough. However, the largest ethnic community has a south Asian heritage and live in the South Bank ward.
5. In June 2011 it was estimated that there were 7,520 children and young people living in poverty in the Borough. Approximately 11% of families are headed by a lone parent and nearly all (96%) were female. The unemployment rate in the Borough rose from 3.5% to 6.5% in January 2011.
6. Redcar and Cleveland Borough Council provides education for approximately 21,720 children and young people from 60 establishments. This includes 45 primary schools (one junior and one infant school) and 11 secondary schools (two academies, and three with sixth forms). There is also one all age primary/secondary pupil referral unit. In addition three colleges provide education to approximately 3000 students aged 16–19 years and up to 24 years for those with learning difficulties and/or disabilities.
7. The Redcar and Cleveland Children and Young People’s Trust was originally established in 2007; the membership and priorities were revised in 2010. The Trust, which now has an independent chair, is responsible for delivering improved outcomes for children, young people and their families. The Trust membership comprises representatives from the council including the Director of Adult and Children’s Services and elected members, one of whom is the Children’s Champion. Other representatives include the voluntary and community sector, South Tees Hospitals Foundation NHS Trust, health partners, Cleveland Police, the youth offending service, the probation service, schools and colleges and a representative of the Local Safeguarding Children Board.
8. The Redcar and Cleveland Safeguarding Children Board (RCSCB) was formed in April 2010. This brings together representatives from all of the key agencies and professionals in the borough responsible for helping to safeguard children and young people.

9. At the time of the inspection there were 182 looked after children and 68 care leavers. Of the looked after children, 28% are less than five years of age, 59.3% are of school age (5-15), and 12.6% post-16 young people. There were 166 children and young people who were the subject of a child protection plan. This represents a small increase of 2.5% since 2009-2010.
10. Redcar and Cleveland Borough Council has 65 foster carers providing care to 71 children and young people and independent foster agencies providing care to 68 children and young people. There is one children's home for children and young people, providing short break care to children with disabilities.
11. The council's services for children and young people are delivered, wherever possible, through locality working arrangements. Other services, such as the access team (dealing with initial contacts and referrals), the disabilities team, fostering and adoption and the independent reviewing unit are delivered on a borough-wide basis. There are six social work teams across three localities (Central, East and West) together with dedicated borough-wide children in care team. The leaving care team (TARGET) which is based in central Redcar provides a range of support services to young people in the borough. An in-house outreach service focusing on directly provided emergency support to families in immediate crisis is also within the borough.
12. The youth offending service is delivered through a joint arrangement with Middlesbrough Council. Children and adolescent mental health services (CAMHS) are also shared jointly with Middlesbrough Borough Council and have recently been reviewed. The council commissions the out of hours service with four neighbouring authorities in the Tees Valley. Stockton on Tees is the provider of the service.
13. Young carers are provided with support through The Junction and a range of short break services are available to all families who care for a disabled child or young person through local children's centres. If more tailored support is needed, this can be obtained through the Short Breaks Centre at St Margaret's Way.
14. Early years childcare service provision is delivered predominantly through the private and voluntary sector in over 22 settings as well as through nine local authority children's centres. Family support is provided by a range of services which are categorised into four levels of need, universal, targeted, intensive and statutory.
15. The integrated youth support service provides universal provision through its youth service and more targeted support such as teenage pregnancy, substance misuse and support to young people to reduce anti-social behaviour via the targeted youth support team. There is also additional support in place through extended services.

16. NHS Tees commissions all health services for the borough. Middlesbrough and Redcar and Cleveland Community Services has transferred to the South Tees Hospitals Foundation NHS Trust which now provides most local community services. This includes health visiting, school nursing, physiotherapy, occupational therapy, child and school health administration; the dedicated looked after children's nurse, speech and language therapy and the James Cook University Hospital which is the main hospital facility, plus the Tees, Esk and Wear Valley (TEWV) NHS Trust which provides services for mental health and learning disabilities.

Safeguarding services

Overall effectiveness

Grade 3 (Adequate)

17. The overall effectiveness of safeguarding children and young people in Redcar and Cleveland is adequate. The Children and Young People's Trust and RCSCB is well established with clear safeguarding priorities set out in the Children and Young People's Plan (CYPP) and the RCSCB business plan. A key priority is to improve and deliver good quality safeguarding services to children and young people. There is demonstrable and continued improvement in child protection services such as the action taken to strengthen the front line access service and good performance on the rate and timeliness of assessments. However, some issues of service provision are yet to show sustained improvement. For example, the quality of initial and core assessments remain too variable and risk and protective factors are not always clearly identified, the views of children and young people are not sufficiently recorded in assessments and cultural and diversity issues are not always considered and effectively addressed.
18. Good arrangements are in place to help safeguard children and young people that attend the accident and emergency (A&E) department at James Cook University Hospital, South Tees Hospitals NHS Foundation Trust. However, there is no named general practitioner (GP) for safeguarding in post and there is no formal representation from primary care on the RCSCB.
19. A range of early intervention and prevention services are helping to support some families. However, these services are not yet fully developed and a high number of children are referred for social care intervention when other support may be appropriate. The use of the common assessment framework (CAF) is not well coordinated and not all agencies are engaged in the process.
20. Although well coordinated performance management and quality assurance systems are in place, there has been insufficient challenge from front line managers regarding the variable quality of initial and core assessments. Audits, including RCSCB thematic audits, take place and areas for development are identified for staff to take forward. Supervision takes place on a regular basis, but the quality is variable and reflective aspects of case work are not clearly recorded.
21. Workforce planning is effective. There is a stable workforce and this helps to ensure continuity for children and young people. Safe recruitment practices are well embedded across the partnership. There is clear evidence of children and young people's involvement in planning and shaping the development of safeguarding services. The Joint Strategic Needs Assessment is informed by the views of children and young people. The views of 500 children and young people, including those with learning

disabilities, have made a good contribution to determining the five key priorities set out in the CYPP.

22. While there is no overarching strategic commissioning strategy in place, good arrangements between the voluntary and community sector and the council ensure that safeguarding services are delivered effectively.

Capacity for improvement

Grade 2 (Good)

23. The capacity to improve safeguarding services is good. The Children and Young People's Trust and RCSCB have effectively prioritised core safeguarding services. Additional financial commitments have been made to increase the children's social care budget over the next five years, despite efficiency savings being made elsewhere in the council. There is effective leadership across the partnership and strengths and weakness in services are known and action is being taken in a number of areas to improve services. This includes a refocus and re-launch of the CAF. There is a good track record of improvement with most key performance indicators that are good or better, such as the timely completion of initial and core assessments and timeliness of child protection conferences and reviews. Good action has been taken to improve and strengthen the front line access service with increased capacity of staff to enable a swift response to contacts and referrals and in ensuring consistency in the application of thresholds for access to children's social care services.
24. Staff are provided with a good range of training and development opportunities to enable them to deliver safeguarding priorities. This is supported and underpinned by a comprehensive workforce strategy. Staffing capacity has grown to address the increase in demand for services. Learning from serious case reviews is used to improve safeguarding activities, for example, the reporting and monitoring arrangements of those children whom are educated at home.

Areas for improvement

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

Immediately:

- ensure that all assessments of children and families include risk and protective factors and the steps required to reduce risk

Within three months:

- ensure that assessments reflect the views of children and young people and how issues identified by them are taken forward

- ensure that reflective discussions and progress on tasks identified are clearly recorded in social work supervision records
- ensure that assessments, core group meetings and child protection plans take account of children's ethnicity, culture and identity and the action to be taken to support the assessed identity needs
- NHS Tees, police and children's social care ensure that public health nurses are informed of any domestic violence incidents where children have been present.

Within six months:

- NHS Tees should recruit to the post of named GP for Redcar and Cleveland to ensure that primary care are represented at the RCSCB
- evaluate early intervention and prevention services across the partnership to ensure that the right families are being targeted for services.

Safeguarding outcomes for children and young people

Children and young people are safe and feel safe

Grade 2 (good)

26. The effectiveness of services to ensure that children and young people are safe and feel safe is good. The RCSCB provides good leadership in monitoring and ensuring that partners and professionals are aware of their safeguarding responsibilities. Good action is taken through the partnership to respond to the safeguarding needs of children with disabilities and those with complex health needs.
27. When child protection concerns are referred to children's social care swift action is taken to ensure children who need protection are safeguarded. In cases seen during the inspection, no child or young person had been left at, or exposed to, risk.
28. Opportunities for children and young people of all ages to give their views and to influence and shape safeguarding services are good. They are consulted on a range of topics, for example, the police have consulted with children and young people about types of crimes that impact on their lives. This highlighted concerns from children and young people about substance misuse within the community. This has resulted in drugs awareness training being delivered by partner agencies to children and young people. A high proportion of all schools in Redcar and Cleveland have achieved the anti-bullying charter, schools use a range of approaches and programmes to develop pupils' resilience through training them to become peer mediators and mentors. Young people spoken to during the inspection said they believed bullying is tackled well in schools and that there is always someone they can turn to. Young people with disabilities have access to a lively well attended 'Join Us' youth club, where they can access a good range of activities. There is good work to help them keep safe including sessions on e-safety. Young people said they felt confident in talking to youth workers who would advocate on their behalf.
29. The council's adoption service and the one children's home is judged outstanding and the fostering service good. All children's centres inspected by Ofsted are judged good or better. Monitoring of private fostering arrangements is good and priority has been given to ensure that these arrangements are understood across the area through training and promotional activities, including increasing the awareness of the public.
30. Inspection and survey findings indicate that children and young people feel safe in their schools. Most schools inspected are judged good or better for safeguarding and behaviour management. Performance on the

rate of fixed term exclusions in secondary schools is good and primary school attendance is better than the national average. Safeguarding arrangements for those pupils educated at home is good with effective monitoring arrangements in place. Lessons learnt from serious case reviews have been used well to ensure the safeguarding of home educated children and young people.

31. First time offending has reduced significantly from 2009 and although performance on reoffending has fluctuated, the most recent figures demonstrates a good reduction from the 2008/09 baseline. Successful targeting of services is helping to engage young people who are in the criminal justice system, in education, employment and training (EET), resulting in performance that is better than both national and regional comparators. There has been consistent improvement in the rate of young people who are not in education, employment and training (NEET). Although the gap has closed between other comparators, this remains a challenge for the area.
32. Good arrangements are in place to identify and monitor children missing from home, care and education. Comprehensive procedures are understood well and implemented effectively by partner agencies. When children return the police routinely undertake safe and well checks with a focus on assessing risks. The links to, and risk of, children and young people being sexually exploited are well understood.
33. Arrangements for managing allegations against people who work with children through the Local Authority Designated Officer (LADO) are good. Regular awareness training is provided by the RCSCB across the partnership and agencies, including the private sector, are actively engaging the service for advice.
34. Processes for safe recruitment within children's social care are robust with clear reference to, and implementation of, safer recruitment policies and good practice guidance. Regular audits are carried out to ensure consistency. Decision making about concerns identified on Criminal Records Bureau (CRB) checks is held at senior manager level within children's social care and this adds additional rigour to the process of keeping children safe.
35. There is a well established, effective statutory children's complaints service. Most complaints are resolved at an early stage and the number of complaints is relatively low. There are good mechanisms to ensure lessons learned from complaints lead to service improvement supported by a robust action plan.

Quality of provision

Grade 3 (Adequate)

36. The quality of provision of safeguarding services for children and young people is adequate. Swift action has been taken since the unannounced

inspection to address some of the identified areas for development. The front line access service has been reorganised to increase capacity and sharply focus the service operation on initial contact and referral decisions. Thresholds for referrals to social care have been revised in consultation with partners and they know and understand how to access children's social care services. Referral information received from partner agencies is generally good. Contact and referrals to the front line access service are effectively screened by qualified social workers. Observations of practice in the access team confirmed that social workers provide good quality advice and information for other professionals.

37. There are several effective early intervention and prevention programmes which are helping to support families, including the Troubled Families Project. However, insufficient priority is given by children's social care to track cases which are signposted to other services in order to ensure that parents obtain the help they need.
38. There has been a strong drive by the partnership to implement the CAF, but early success has not been sustained. The number of CAF assessments completed is low and there are examples of parallel processes of assessment being used by agencies. Some schools, for example, do not engage with the CAF, they reported to inspectors that the current arrangements for the completion of CAF assessments are too cumbersome. The council have acknowledged this problem and resources have been made available to strengthen coordination of the CAF and this includes the appointment of CAF administrators.
39. Children and young people at risk of harm are promptly identified and cases are allocated to suitably qualified, trained and experienced social workers. Child protection investigations are timely and always conducted by qualified social workers. Strategy discussions are held appropriately between social care, police and other agencies, but the records of discussions do not always clearly state the name of the other professionals involved.
40. Initial and core assessments are completed in a timely way. However, the quality of assessments seen, including those in the children with disabilities team, are too variable. The most recent assessments seen by inspectors show some improvement, but action to improve the overall quality of assessments has been too slow to progress. The quality of assessments was identified as an area for development at the previous unannounced inspection. There remains inconsistency in the quality of analysis, which lacks a sharp focus on risks and protective factors, the views of children are not being recorded in assessments and cultural and diversity issues are not sufficiently considered and addressed. For example issues around a child's identity needs as a result of their mixed heritage are not well focused, explored or considered in any depth.

41. Child protection plans help to manage risks to children effectively. Although the rate of children subject to a child protection plan is increasing, and is significantly higher than comparators, these decisions on cases seen are appropriate. There is good multi-agency work to support child protection work; initial child protection conferences, core groups and child protection reviews are well attended.
42. No children are on a child protection plan for longer than two years. Step down arrangements to support children who have been on a child protection plan are good with a low rate of children subject to a repeat plan. Performance on the timely completion of initial child protection conferences held within 15 days of the strategy discussion is good. The timeliness of child protection reports completed by social workers for initial child protection conference and child protection reviews is good and child protection conferences are held within timescale. The quality of child protection plans is generally good. They focus on the needs of the child with clear actions and timescales identified for conference members. Legal support continues to be a strength and is good.
43. Social workers routinely chair core groups, but there are examples where actions have not been sufficiently targeted, leading to drift. The views of children and their diversity and culture are not always considered by the core group.
44. There are examples of good social work intervention leading to reduced risk for children. Social workers ensure children are made safe and their outcomes improve as a result of these interventions. Key features of this work are; good step down arrangements and planning to support the child; the use of research to unlock abusive and corrosive relationships and the consistency of allocated social worker, helping to sustain relationships over a significant period of time to effect change for children.
45. Effective joint working arrangements are in place between the police and children's social care to prioritise domestic violence referrals. Successful programmes are delivered from children's centres to support the victims of domestic violence to build resilience. Well coordinated provision delivered through the Harbour Project is engaging perpetrators of abuse. The strategic domestic violence partnership forum acknowledges that there is a lack of service provision to support children and young people who have experienced domestic violence. Firm plans are in place to re-commission this service to increase capacity from July 2012.
46. All GP practices in Redcar and Cleveland have safeguarding leads and there are opportunities to share good practice. Most GPs regularly contribute to child protection conferences through submitting child protection reports which continue to improve in quality. Partnership working to safeguard unborn children is good. There is an effective shared protocol in place between midwifery and children's social care services

that has explicit timescales for completion of key interventions such as initial case conference and pre-birth assessments. This means that when vulnerable babies are born, appropriate arrangements are in place for their protection.

47. Parents are encouraged to attend child protection meetings and their views are fully considered but the involvement of children and young people in the child protection process is at an early stage of development. Where this has occurred it is well managed. Parents who met with inspectors report that they have received the services they need and want from children's social care. They said that social workers treat them with respect and they feel listened to. Importantly, they say that services have made a real difference leading to improvements in their lives.
48. Case records are generally up to date and demonstrate appropriate levels of multi-agency communication and partnership working. The quality of case recording overall is, however, too variable. Examples of poor records included little analysis of any observation made of the family or child and poor evidence of the outcome of visits or any further action being recorded. It is not always clear if children were seen or seen alone.

The contribution of health agencies to keeping children and young people safe **Grade 2 (good)**

49. The contribution of health agencies to keeping children and young people safe is good. There are well established clinical governance arrangements for safeguarding practice. The clinical quality monitoring meetings effectively identify concerns in performance. Trust Board assurance within the South Tees Hospitals NHS Foundation Trust and Tees, Esk & Wear Valley NHS Foundation Trust are based on appropriate governance structures within their respective organisations. Arrangements for the designated and named professionals in safeguarding children across South Tees Hospitals NHS Foundation Trust and Tees, Esk & Wear Valley NHS Foundation Trust are appropriate and meet the requirements of *Working Together To Safeguard Children, 2010* and the intercollegiate guidance 2010.
50. Good arrangements are in place to help safeguard children and young people that attend the A&E department at James Cook University Hospital, South Tees Hospitals NHS Foundation Trust. A computerised casualty card is generated for each attendance that includes details of any previous attendances at A&E and whether a child protection plan is in place or if the child is looked after. A senior medical clinician reviews all attendances of children under five to check that appropriate action has been taken.
51. Over the last few months a liaison worker has begun to effectively engage with vulnerable young people aged 16 and over who present for services at A&E department to help engage them with appropriate statutory and

voluntary services. The service is not available for young people under 16 and this means that some vulnerable young people are not offered this invaluable support. An alcohol and substance misuse service has been re-commissioned with advice and early support on substance misuse now provided by the targeted youth support. The substance misuse team, CREST, provides support to those young people who require more intensive intervention. It is too early to comment on the impact of this new model of service delivery.

52. Sex and relationship education and advice is primarily provided to schools and colleges by organisations accessing a local roadshow on risk taking behaviours. The roadshow has been positively evaluated by young people who find it both useful and informative. Recently commissioned integrated contraception, sexual health and genito-urinary services are delivered through clinic based appointments, drop-in sessions and outreach work into multi-agency drop in clinics. The number of under 18 conceptions continues to decrease, although the rate of improvement is below that of comparators. The number of conceptions by young women aged under 16 is high and rising.
53. Effective arrangements ensure that women attend ante-natal care and any missed appointments are followed up promptly. This includes those pregnant women who move home across boundaries into neighbouring authorities. Pregnant women who require additional support for their mental health needs, who misuse alcohol or other substances and pregnant teenagers are supported well as part of a community midwife's generic caseload. There is good multi-agency working for those women who misuse substances through a multi-agency care pathway which means that an agreed care plan is in place to support the mother during the pregnancy and safeguard the unborn child.
54. School nursing supports the health of school age children well. School entry screening questionnaires are sent out to all families and parents and carers are contacted to chase up any that are not returned. For those children with additional health needs, school nurses carry out initial health assessments and with their education colleagues contribute to appropriate health plans which are regularly reviewed. Multi-agency drop-in clinics are available across Redcar and Cleveland and are a good example of partnership working to increase risk resilience in school age children.
55. Children, young people and families have good access to effective core children adolescent mental health services (CAMHS). CAMHS practitioners use a variety of outcome measures to formally evaluate the impact of their intervention with families and these show good overall progress is being made. There is appropriate specialist in patient care for adolescents and no young people are inappropriately admitted into an adult mental health ward. Effective arrangements are in place for young people to transfer from CAMHS into adult mental health services.

56. An effective CAMHS learning disability service has close links with core CAMHS. Most children with disabilities and complex health needs are supported well, though some parents we spoke to felt that there was insufficient therapy support by trained professionals.
57. Families are experiencing unacceptable delays in accessing the diagnosis and assessment panel for Autistic Spectrum disorders. Commissioners are working closely with providers to look at how the delays can be reduced as well as making sure that the assessment and diagnosis pathway complies with NICE guidance.
58. Adult mental health practitioners have a good understanding of the impact of parental mental health on children in families. Following a recent serious case review a revised multi-agency parental mental health protocol is being developed to support adult mental health workers to use when working with parents. Existing arrangements for identifying children of adult mental health service users continue to provide initial and ongoing opportunities to assess any risk and to record the details of any children in the family. However, the current pathway does not require the practitioner to record the details of children on the IT system unless a risk is identified. This is not good practice and could mean that in crises the full details of any children are not readily available.
59. There is good support offered to children and young people who attend the local A&E following an incident of self harm. All children under 16 are routinely admitted onto the paediatric ward following an incident of self harm. Admission criteria for young people between 16 and 18 is less rigorously applied, though all young people leaving hospital do so with a follow up appointment with CAMHS.
60. Child protection medicals are carried out by suitably experienced and qualified community paediatricians. Good arrangements with the child friendly specialist forensic service in Newcastle ensures that children and young people who require an urgent medical for suspected acute sexual abuse are seen quickly by experienced staff.
61. Good progress is being made in the number of GPs and other independent practitioners accessing appropriate training in safeguarding children practice. Involvement and contribution of primary care in safeguarding and child protection continues to improve and is now well developed. Health visitors and school nurses confirmed that they receive notifications from A&E on all children and young people who have attended the department, as well as notifications from the acute trust on children who have not attended health appointments. These notifications provide good information on families and allow the public health nurses to target interventions effectively.

Ambition and prioritisation

Grade 2 (good)

62. Ambition and prioritisation of safeguarding services are good. There is a well articulated vision for children and young people by partners and within the council which is set out in the CYPP and RCSCB business plan. Redcar and Cleveland Children and Young People's Trust Partnership made the decision in 2010 to continue with the Trust, which has restructured, and the CYPP, which has been refreshed to reflect the changes required. Consultation on the changes to the CYPP has taken place with children, young people, carers, staff and partners. The plan is also informed by the outcome of the Strategic Needs Analysis.
63. Lines of accountability between the Chief Executive and Director of Adult and Children Services (DCS) are clear and effective. The Lead Member has good links with children's services through a cycle of regular meetings. A scrutiny committee provides robust challenge to ensure that outcomes for children and young people are progressed. Elected members demonstrate commitment to championing the needs of vulnerable children and families and there is strong cross political support to ensure that services to children and young people and families are secure. The increased demand for children in need and child protection services has been recognised and capacity of children social care has been increased to meet this demand while efficiency savings are being made elsewhere in the council.
64. Weaknesses in services are identified and action is taken to rectify these, for example the refocus on services to provide support to families who experience domestic violence. Service provision ensures that the most vulnerable children who need protection are effectively safeguarded. Effective action planning has ensured that the front line child protection service is now robust and children subject to child protection plans are effectively safeguarded. However progress on the implementation of some key areas has been too slow, for example improving the quality of initial and core assessments.

Leadership and management

Grade 2 (good)

65. The leadership and management of safeguarding services is good. The senior management team provides strong, visible and accessible leadership and management. The team have driven through improvements, such as strengthening gate-keeping processes through the multi-agency family support panel, the reduction in youth offending rates and the reorganised front line access service, to provide a sharper focus on decision making on initial contact and referrals.
66. The council and partners have a good understanding of the needs of the population. Investment has continued to rise to support sharply focused safeguarding programmes to meet the needs of different communities.

Resources are used effectively to ensure that the most vulnerable children who need to be protected and safeguarded are secure.

67. The workforce development plan is comprehensive and is underpinned by a clear workforce strategy. There is a committed and stable workforce with social workers who are enthusiastic and passionate about their work. They feel well supported and listened to by managers. Newly qualified social workers (NQSWS) are supported well with protected caseloads and through a successful induction programme.
68. At the time of the inspection there were no vacancies and teams are fully staffed. Numbers of social workers have increased during the last 12 months and caseloads are manageable. Positive action has been taken to respond to identified future skills gaps in the workforce. For example the 'Rising Star' programme was nominated for the Chartered Institute of Personnel Development, People Management Award in 2010. An effective management development programme provides staff with the opportunity to move into management posts and supports development and improvement in the workforce. The population in Redcar and Cleveland is predominantly white and senior managers acknowledge the challenges this presents in recruiting workers from the wide range of ethnic and cultural backgrounds to reflect the small minority ethnic community in the area. The challenges are identified in the workforce plan and are given appropriate consideration. A workforce action plan also takes account of the need to review the take up of employment of people with disabilities.
69. A good multi-agency approach to training includes collaborative work with neighbouring authorities and Teesside University. Training takes account of RCSCB and Children and Young People's Trust priorities. Voluntary and community sector organisations report that the RCSCB training is of a high quality and is effective. Progress in ensuring staff access appropriate training is variable across health providers in Redcar and Cleveland. RCSCB thematic audits identified poor take up of training, such as sexual abuse awareness training and risk management of adults, by social workers. This has been recognised by senior managers and action taken to address this, including work with line managers to ensure training is prioritised.
70. Opportunities for young people to influence the shape of safeguarding services are good. For example, the 'Tuned in' website which provides information and advice on how to access services which has had over 2000 hits per month since it went live 12 months ago. A high proportion of schools have a School Council which is helping to influence how schools work with young people. However, there is no formal arrangement to coordinate the representative views of School Councils to shape services. Representatives from School Councils who are aged 14 years plus, spoke with inspectors and reported that there are insufficient safe places for

them to go in their communities and they are not able to voice their views with the people who make decisions.

71. Although there is no overarching strategic commissioning strategy, effective arrangements are in place in key areas of service operation to pool resources and deliver services together with partners and neighbouring authorities. Good arrangements are in place to commission and de-commission services which are sharply focused on delivering services which match the needs of the communities of Redcar and Cleveland.

Performance management and quality assurance

Grade 3 (adequate)

72. Performance management and quality assurance arrangements are adequate. The arrangements for monthly reporting on children's social care performance are comprehensive. Managers receive regular data reports on all aspects of performance to identify strengths and weaknesses in the practice of teams. Audits carried out by children's social care and thematic audits carried out by the RCSCB are robust. However, the quality assurance framework is not comprehensive. For example insufficient priority has been given to audit the quality of early intervention and prevention assessments carried out by agencies. The findings of the authority's audit of cases for this inspection are an accurate reflection of the cases read by inspectors. While there is limited evidence of individual audits on some case files, social workers know about the concerns raised by the audits. However, progress to improve the quality of work, including initial and core assessments, has been slow. Social workers report that the new report format on the integrated children's service system does not support the recording of good quality assessments and that managers focus too much on the timely completion of assessments, which together, impacts on their ability to produce good quality work.
73. Monthly practice clinics help improve the quality of assessments but the most recent audits identify that insufficient management oversight has been given to the previous audit findings and progress remains inconsistent as a result. There are missed opportunities for managers to work with social workers during supervision to set out what social workers must cover as part of an assessment. There is insufficient use of assessment champions and work shadowing opportunities to drive up performance.
74. The timescales for social workers' supervision are generally met but practice is not consistent. Although there are examples of good supervision records others lack rigour and are not reflective and it is not always evident that tasks from one supervision session are followed up.

75. Good arrangements are in place for independent reviewing officers (IRO's) to report their looked after children activity in the annual report. Opportunities to learn about child protection service responses from the unique perspective of the child protection chairs are, however, missed.

Partnership working

Grade 2 (good)

76. Partnership working is good. Robust arrangements are in place to ensure the independent scrutiny of services by the RCSCB. The Board has good multi-agency representation including the voluntary and community sector. Lay members ensure the views of service users and members of the public are effectively represented. The views of children and young people are represented very well by the Young Safeguarding Children Board group known as Safe4Us. This group of young people have good working links with the RCSCB. Safe4Us group members who met with inspectors said that they are routinely involved in consultations as well as leading consultations to learn the views of young people. Approximately 1291 Year 6 pupils, including children from special schools, recently took part in workshops to build safeguarding resilience. There is a well developed young inspector programme. Young people with disabilities are helping to shape specific services through the 'make a difference' group.
77. The RCSCB has ensured successful collaborative work with other Teesside authorities to coordinate child protection procedures. These have recently been updated and disseminated effectively through a new web based manual. This development is being supported well, for example through specific briefings for schools.
78. The RCSCB is supported well through the range of sub-groups and has recently appointed an experienced and independent chair. The new chair has a good understanding of the work of the RCSCB and of the improvements in safeguarding practice that is required. The RCSCB business plan is robust and effective action is taken to ensure sub-groups deliver on the priorities. Roles and responsibilities of partner agencies across the RCSCB membership are understood. This has ensured key areas of the business plan are owned and delivered effectively, for example, the police lead the serious case review sub-group.
79. Good arrangements are in place to promote learning from serious case reviews. Single agency action plans from a recent serious case review have been implemented effectively, for example improving communication between multi-agency public protection arrangements (MAPPA), multi-agency risk assessment conference (MARAC) and children's social care child protection service have been strengthened. Lessons learned from serious case reviews regionally and nationally are helping to shape the content of Tier 3 child protection training.
80. The Child Death Overview Panel (CDOP) for Redcar and Cleveland is part of a Tees-wide arrangement covering four local authorities. CDOP

arrangements are managed very well; recent change on how action plans arising from recommendations from child deaths are monitored has strengthened further the impact of the CDOP in improving practice.

81. Partnership work has ensured that the MARAC process is implemented effectively. The police give high priority to this area of work and agencies are held to account appropriately. Relationships between agency representatives are well developed and this leads to good information exchange and intelligence gathering
82. MAPPA are leading to the safe management of high level offenders. Meetings are effectively chaired by an independent chair and performance issues such as attendance are rigorously monitored. Meetings are well attended by all agencies at all levels and actions are delivered on time. No offenders subject to MAPPA have committed high level offences in the last 12 months.
83. Multi-agency partnership work to support families experiencing domestic violence is effectively coordinated through the strategic domestic violence partnership forum including the voluntary and community sector. The strategic domestic violence partnership forum has effectively reviewed its strategies to support an outcome approach to the management of domestic violence, although evaluation of impact of these services is underdeveloped. Work is currently being undertaken by the strategic domestic violence partnership forum to determine how outcomes and impact will be measured.

Services for looked after children

Overall effectiveness

Grade 2 (good)

84. Overall effectiveness for looked after children is good. The Children and Young People's Trust partnership has high aspirations for looked after children and care leavers and is committed to incorporating their views within strategic planning. At the same time there is recognition of the need to give specific focus to looked after children and young people within the CYPP. The Corporate Parenting Board is well established and enjoys cross party support although there is at present no formal links between the Corporate Parenting Board, Children and Young People's Trust Board and the RCSCB. Elected members provide an appropriate level of scrutiny and challenge with respect to performance for looked children and young people.
85. Performance against national indicators is mostly in line with, or above, that of comparators with the exception of long term placement stability which is low but improving. Robust action has been taken by the council to address the shortage of in-house foster carers to increase placement choice and to reduce the high cost of external placements. The quality of assessments once children become looked after shows significant improvement. Permanence planning is robust and children are placed for adoption within a year of the decision. Good quality care planning ensures that placements meet children and young people's needs, that they make good progress and result in good outcomes. In the results of the Care4Me survey, children and young people report that they are safe. Effective arrangements are in place to monitor those placed out of the area.
86. There is good attention to promoting looked after children and young people's participation and good partnership arrangements ensures that children and young people achieve. The virtual head teacher provides high quality support, advice and effective leadership to designated teachers. Attainment in national tests in Year 6 and in GCSE examinations in Year 11 for looked after children and young people are good.
87. Despite the lack of a commissioning strategy, commissioning arrangements are good, with examples of well organised and monitored services providing good quality care. Performance management and quality assurance is adequate. The tracking of progress of looked after children is taking place but it does not incorporate systematic monitoring of placements at risk of breaking down. Case auditing is taking place but findings from audits are not being used effectively by managers to improve the quality of care plans and case recording which are too variable. The quality of staff supervision is variable.

Capacity for improvement

Grade 2 (good)

88. The capacity to improve services for looked after children and young people's services is good. There is a good track record of improvement in relation to ensuring that looked after children numbers have remained safely lower than in similar areas and nationally. There is good front line quality of provision with multi-agency working and care planning for looked after children and young people whether placed externally or internally and young people are involved well in care planning. Short term placement stability, timeliness of reviews, health outcomes, school attendance and achievement at GCSE and all outcomes for looked after children, young people and care leavers are good. Some high quality services have been developed, such as the outreach overnight support and leaving care service, TARGET. The strategic plan for children in care sets out strategies for improvement in services, priorities, ambition and the Corporate Parenting Board's priority to strengthen the links with the Children in Care Council (CiCC). However, the plan is not yet widely known and owned by all partner agencies and elected members. Financial support for children's social care has been secured with incremental increases projected over the next five years.
89. Elected members demonstrate good support for, and an understanding of, the key challenges relating to looked after children. They maintain good oversight of the current issues such as the high cost of external placements and shortage of in-house foster carers. The council and partners are fully aware of its strengths and weaknesses. For example, the need to refocus the needs of looked after children and young people within the CYPP. Looked after children, young people and care leavers are enabled to be involved in shaping and influencing service development through the use of 'Viewpoint' a web based programme. Action is taken to address issues or themes, such as making sure that looked after children and young people understand their care plan and reasons that they are in care. The CiCC have taken the lead in the development of the pledge known as 'Promises'. Children and young people are involved and are able to influence decisions, for example in the recruitment of staff including senior managers.
90. Effective workforce planning has taken account of the skills gaps within the workforce and recruitment of additional social workers has increased capacity to meet needs. There are sufficient numbers of permanent, qualified and experienced staff to improve continuity and support looked after children and to meet statutory requirements. There is little use of agency staff. There is a good career progression pathway and professional development is in place such as the management development programme.

Areas for improvement

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

Within three months:

- ensure that the strategic plan for children in care is more widely known and shared with partners
- revise the approach to corporate parenting to ensure that it includes strategic engagement with partners, this includes the RCSCB and Children and Young People's Trust Board
- ensure that all care plans are explicit about the reasons for care and that they include any contingency arrangement.

Within six months:

- improve the organisation and management of educational provision for all children in care and care leavers by ensuring that the virtual head has full oversight for all provision
- NHS Tees and South Tees Hospitals NHS Foundation Trust to review the capacity and line management for the designated nurse for looked after children to ensure that these are commensurate with national guidance
- NHS Tees and South Tees Hospitals NHS Foundation Trust to review the capacity and responsibilities of the lead clinician for looked after children as they are not compliant with current guidance.

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

Being healthy

Grade 2 (Good)

92. Services to promote healthy outcomes for looked after children and young people are good. Highly effective arrangements are in place to ensure that the health of looked after children and young people is well maintained. Health needs are clearly identified and met. The number of children and young people who have had a dental check, received a timely health review and are up to date with their immunisation and vaccinations are above those of similar authorities and the national average.
93. Initial health assessments are carried out by paediatricians. Health reviews are carried out by a public health nurse, the designated nurse for looked after children or a paediatrician, depending on individual need. Well established arrangements are in place to quality assure all initial health assessments, health reviews and health plans, including those received for children who are placed outside of Redcar and Cleveland.
94. Health promotion information is given on request or at the review health assessment. The partnership have developed their own health review paperwork which is age specific and provides prompts for discussions around risk taking behaviour, including contraception and sexual health and substance misuse. However, from the files reviewed during the inspection, the recording of the discussion with young people varies and this may contribute to the very low numbers of looked after young people receiving support for alcohol and substance misuse.
95. The resourcing and line management arrangements for the designated looked after children health professionals do not sufficiently support their ability to strategically influence and champion the health needs of looked after children.
96. The designated nurse for looked after children runs regular training courses for health visitors and school nurses on working with looked after children. Sessions include up to date information around what constitutes a quality health review, updates on legislation and any changes to practice, for example working with Strengths and Difficulties Questionnaires (SDQs).
97. Strengths and Difficulties Questionnaires are completed by foster carers and, where appropriate, the young person. Social workers in the looked after children's team lead on distributing and scoring the SDQs which are communicated to professionals carrying out health reviews and should form part of any assessment. However, it is not always clear from the

health reviews whether these are being considered and used effectively as a basis for planning to meet individual needs.

98. Looked after young people have appropriate access to universal provision for advice and support around contraception and sexual health and substance misuse. There are no dedicated link workers identified in either service to work with those looked after young people and to work with the looked after children health team in service development. Pregnant looked after young women who wish to continue their pregnancy are referred to the teenage pregnancy service. The family nurse partnership is just launching in Redcar and Cleveland and links with the looked after children health team are not yet established.
99. The CAMHS for looked after children and young people is being re-commissioned and in the interim looked after children who require additional support for their emotional health and well-being receive a timely service from the core CAMHS team. This ensures that no child or young person is left without the support they need.

Staying safe

Grade 2 (Good)

100. Arrangements to safeguard children and young people are good. The overwhelming majority of looked after children, young people and care leavers spoken to during the inspection and completing the 'Care4Me' survey reported that they feel safe or very safe, 87% said that they receive useful advice from adults to keep themselves safe. Most are very positive about the quality of care they receive in their placements. They said that placement or accommodation moves have been in their best interests and are positive about support from their social workers.
101. Senior managers manage risks effectively at the threshold of care. All requests for children to become looked after or to be removed from their families are considered by the multi-agency family support panel and additional resources can be allocated to prevent the need for care. Appropriate consideration is given at the point of becoming looked after as to whether children can safely be placed within the wider family. Where protection plans have not had a positive impact, robust action is taken to ensure that children become looked after. Good quality legal advice is commissioned and available. Following decisions to commence court proceedings, cases are put before the court at the earliest opportunity. As a consequence of good support and suitable risk management the proportion of looked after children and young people are lower than in similar areas and nationally.
102. A higher than national proportion of children (80%) are placed in foster care and just under half of these are placed in placements commissioned

from independent foster care agencies most of which are geographically within the Tees Valley.

103. Arrangements to monitor the care of children in placements, including those placed externally, are robust and thorough. All looked after children are allocated to qualified social workers and those in permanent placements benefit from regular visits from a knowledgeable and stable team of social workers. Improvements in the number of social workers mean the use of agency staff is not required and children and young people can build better relationships with their social workers. Statutory visits are routinely undertaken and children are seen alone.
104. Children and young people placed in Redcar and Cleveland by other local authorities receive suitable health and educational support. Local and external foster carers provide good quality care and support to looked after children. Good commissioning arrangements are in place to monitor those placed out of the area; this includes regular meetings with providers as well as clear expectation that external providers will have detailed safeguarding procedures and safe recruitment processes.
105. When risks to looked after children's safety are identified they are appropriately investigated through the LADO process and appropriate decisions and action taken. Managers across social care, health and education meet regularly to review the progress of individual children. An additional safeguard for children in external placements is provided through an annual audit of safeguarding practice with these children.
106. An independent visitor service is available for children and young people, however no looked after children and young people are linked to an independent visitor. During the inspection, staff explained that although this service is consistently offered to young people they are reluctant to agree to a visitor being provided. The council has not collated how many, or analysed why, children and young people do not engage with this service.
107. Children and young people experience few placement moves within a year, but a significant proportion of longer-term placements are subject to premature endings. Recent local data indicates that this has improved and is being monitored. Action to tackle unplanned placement endings has recently gathered momentum. Management arrangements for staff working with permanent placements have been strengthened and front line staff have received training. There is an increased focus on ensuring that new placements are well planned and that carers receive well focused support from social workers, fostering staff and partner agencies. Problem solving meetings are held when concerns arise. Respite foster placements are regularly provided. If children need to change placements this is carefully planned and very few children have to move as a matter of urgency.

108. Arrangements to respond to the low numbers of children who are absent or missing from care are good. Policies and procedures have recently been revised and a recent development is the requirement for social workers to meet with children and young people following an episode where they have been missing. Children's social care is informed about children placed externally who go missing, appropriate action is taken to minimise the risk of them going missing following contact by ensuring that transport arrangements and supervision is well managed. However, the data overall is not collated and themes are not identified. This gap is acknowledged by senior managers.

Enjoying and achieving

Grade 2 (Good)

109. The impact of services on enabling looked after children and young people to enjoy and achieve is good. All looked after children are placed in schools with a clear track record of achieving at least good inspection outcomes. A high priority is given to a school's effectiveness as well as to their inclusivity and the quality of support, care and guidance before a looked after child is given a placement. Managers use clear protocols about changing schools to guide placements, particularly for older pupils in Years 10 and 11. This practice ensures there is stability and consistency. Managed moves are successfully arranged with good support available for children and young people with challenging behaviour.
110. The virtual head teacher provides good advice, support and guidance to schools, in particular designated teachers and governors. Training is well organised and delivered to increase their understanding of how best to discharge their duties. Consequently, governors hold staff to account in relation to closing the attainment gap and reducing exclusions. Schools are effectively challenged to raise the achievement of looked after children and young people. Looked after children and young people receive well-considered support from staff that are committed and dedicated to them achieving as well as they can in schools. Not all designated teachers have sufficient time allocated to carry out their role routinely and rigorously. The virtual head teacher does not have a remit for overseeing the effectiveness of educational provision for care leavers. Consequently, there is a lack of continuity in coordinating care leavers' engagement in education and training.
111. Attainment in the national tests in Year 6 and in the GCSE examinations in Year 11 for looked after children are good. Based on their low starting points, most make good progress by exceeding their targets particularly at the end of Key Stage 4. While the proportion of looked after children achieving five A* to C has fluctuated over the last three years, the percentage achieving five or more GCSE grades A* to C, including English and mathematics has consistently been above similar authorities and the national average. The performance gap with all students, although wide,

is closing each year. An above average number of looked after children and young people have exceeded their target grades because good quality teaching and a range of strategies such as mentoring and individual support have been used effectively to assist them.

112. The very large majority (94%) of looked after children and young people have up to date personal education plans (PEPS). The quality of PEPS varies and is adequate overall. However, targets are not specific and milestones are not recorded to evaluate the rate of progress. Although looked after children have the opportunity to record their views, the PEPs lack depth. Clear steps have been taken to address shortcomings but it is too early to evaluate the impact of the pilot.
113. Individual schools have good systems in place to track the progress of looked after children over time. The council recognise that the current manual system for tracking progress of all children and young people placed locally and externally is not sufficiently robust. Planned improvements are in place to replace with a new electronic tracking system, due to be launched in September 2012.
114. Attendance levels are average for looked after pupils in secondary schools but above average for those in primary schools when compared with all primary schools nationally and similar authorities. Tracking of the attendance of looked after children and young people is good. The council's newly implemented policy on no exclusion has contributed well to reducing permanent exclusion for looked after children and young people. No looked after child has been permanently excluded from school since the start of the current academic year. However, those with special educational needs who attend local schools are disproportionately given fixed term exclusions. This has been investigated by the council and the very small numbers of schools involved are receiving additional support and training from the behaviour support team (BEST) and the pupil referral unit but it is too early to identify the impact.
115. Good partnership arrangements are in place to ensure that children and young people have access to a good quality range of school-based activities. Some looked after young people access local youth clubs. Young people and care leavers seen during the inspection identified that they have good opportunities to access a range of sport and leisure activities. The weekly football club for children in need, foster carers own children and looked after children is well attended.

Making a positive contribution, including user engagement Grade 2 (Good)

116. Opportunities for looked after children, young people and care leavers to make a positive contribution are good. All looked after children and young

people are supported to give their opinion on issues that matter to them. Their views are sought in a timely manner through the authority's consultation mechanisms although there are no formal links between the CiCC and representative groups of children and young people in the borough. The council has given priority to ensuring that looked after children and care leavers have good opportunities to influence their individual care plans through systematic use of 'Viewpoint', a web based programme, which the majority of young people receive effective support to complete. They are strongly encouraged and are well supported to attend their reviews and many young people choose to do so and feedback gained during the inspection and from the survey indicates that most report that their opinions make a difference. The information gathered through 'Viewpoint' provides the authority with a detailed view of children and young people's opinions on a wide range of issues. Views are aggregated and reported and action is taken to improve provision where themes emerge.

117. The 'Speak Up Be Heard' for young people aged 8 – 16 and the 'Have Your Say' group for those aged 16 – 21 collectively comprise the CiCC. The CiCC have taken the lead in developing the local pledge known locally as the 'Promises'. Young people are well trained and supported to participate in the council. However, the current younger group are at an early stage in their development. The council has demonstrated positive impact, for example the web site for looked after children and the development of a health passport. Members of the CiCC regularly participate in staff recruitment and are involved with other resources for young people, such as the 'Re-loved' project.
118. The CiCC makes regular presentations and reports to the corporate parenting group and plans are in place to further develop this contact. Good attention is paid to obtaining the views of the wider group of older looked after young people through the use of email and text. Foster carers' own children receive good support through the 'Kids who Foster' group which offers social and holiday activities and focuses on the challenges and benefits of living in a foster family.
119. Children and young people are recognised and rewarded for their participation and achievements. These are appropriately celebrated through a range of awards such as the bronze achievement award. Celebrating achievement through an annual awards event is given emphasis and young people were involved in organising the latest event and in making the awards that were presented. This experience enhanced their self confidence.
120. Care leavers have a strong voice within the Target leaving care service. For example, young people's evaluations of group work influences the types of groups offered. Their views make a significant contribution to the service's internal review.

121. There is a well established complaints procedure. The annual report provides an effective summary of the small number of complaints received in relation to looked after children. Outcomes of complaints are systematically reported to senior managers and learning is clearly identified and disseminated. For example, training in relation to completing connected persons assessments has led to improved practice. However, no looked after child or care leaver has made a complaint in the last two years. This is attributed to the early resolution of children and young people's issues at a very early stage through good level of consultation and resolution within care planning arrangements and made subject to review recommendations. There is presently, no formal mechanism to record these early resolutions and to incorporate this information within the complaints system.
122. Independent advocacy is available for any looked after child or young person. However, only a few children and young people use this service in relation to their concerns about their placements, and there is scope to further strengthen local understanding of the provision and to develop joint work between the service and the IROs.
123. Good action is taken to respond to the individual needs of looked after children and young people who offend through careful multi-agency working and good communication. There are a low number of young people who offend and none were in custody at the time of the inspection. The youth offending service provides effective assessment and case management and makes strenuous efforts to ensure that young people placed externally receive the appropriate support. Action to strengthen links between the youth offending service and children's social care has led to staff receiving joint supervision and there is a clear process to review those posing the greatest risks. Effective work is taking place by the youth offending service to identify looked after children and young people at risk of becoming first time offenders.

Economic well-being

Grade 2 (Good)

124. The impact of services in enabling care leavers to achieve economic well-being is good. The council is gradually closing the performance gap between care leavers and the national average for all pupils post-16. Partnership links with Teesside University contribute to raising aspirations in respect of higher education. Currently, five young people in care are at university and two more are expected to enter higher education in September 2012. The numbers of care leavers in higher education fluctuates each year, they are very well supported at university and those spoken to during the inspection are highly ambitious and appreciate the assistance provided.

125. Agencies work well together to meet the pastoral and academic needs of care leavers. Partners such as sixth form colleges, schools and East Coast Training are highly effective in re-engaging care leavers, including teenage mothers, in learning and increasing their confidence because of a sharp focus on developing their well-being. Provision is personalised and sharply focused on meeting individual needs.
126. Transition planning begins at age 14 +, partners are working collaboratively to organise and deliver structured programmes to assist and guide care leavers. Care leavers with disabilities are identified at an early stage in order to secure effective planning for transition to adult services. Good liaison between a dedicated transition worker, parents and partner agencies supports the transition process. Good quality information, care, guidance and support are offered and contribute to care leavers developing a clear understanding of the journey they need to make. The leaving care service TARGET, provides good quality flexible and needs-based support. The service is in contact with all care leavers, including those living out of the area. The service is very committed to offering 'second chances' and takes a creative approach to trying new approaches with those young adults who struggle to successfully achieve independence. A wide range of group work activity supports young people to develop self confidence, facilitate skills necessary to live independently and they are able to acquire employment related skills. This good quality support is highly valued by care leavers seen during the inspection. They described the service as 'brilliant', 'spot on' and that it helps them to 'develop their dream and achieve a goal'.
127. All care leavers have an up to date pathway plan which is completed with their personal advisor and, if they wish, includes other professionals. Pathway plans seen clearly identify needs, achievements and progress made although not all targets are consistently precise or clearly specify what support will be given. Some care leavers spoken to during the inspection reported that the targets did not always assist them in increasing their aspirations.
128. The council has a good track record in relation to promoting opportunities for care leavers to enter employment, education or training. Three quarters of care leavers were in employment, education or training in 2010/11 which is significantly better than in similar areas and the national average. Incentive payments are used well to support continued participation. The leaving care service has been successful in working with partners to sponsor work related learning, such as the positive partnership with a local company that provided opportunity for 10 care leavers to participate in outward bound activities. This was linked to the company's apprenticeship programme which led to increased self confidence and engagement in other formal programmes to prepare care leavers for employment. Two care leavers are employed as apprentices within the council.

129. Care leavers have access to a good range of permanent accommodation options including supported tenancies, a hostel and shared housing. The council has worked well with a range of housing providers to ensure that care leavers are assisted in finding accommodation that is economically viable and matched to needs. Procedures are in place to ensure that supported housing meets the required standards. Through the 'Staying Put' arrangement eight care leavers have been enabled to remain living with their foster carers after the age of 18. A few have successfully had the option of moving in to properties that they have been involved in renovating. Care leavers spoken to say that they are given good quality accommodation. There is no use of bed and breakfast accommodation and this is an improvement since the Joint Area Review in 2008.

Quality of provision

Grade 2 (good)

130. The quality of provision for looked after children and care leavers is good. Arrangements to safely prevent the need for children and young people to become looked after are effective. A good range of services are available for children on the edge of care and for those whose stay in care is planned to be brief. This includes the availability of outreach support available overnight and at weekends for families in crisis, a residential project that works with families with the most complex needs and a comprehensive range of short-break care for children with disabilities. Services are appropriately coordinated through the multi-agency family support panel and services are having a positive impact, for example the family intervention project worked successfully to ensure that child protection plans were safely ended for nine of the 11 children referred to the service.
131. Local agencies work well together to promote the safety and well-being of looked after children and care leavers and to ensure that their work is coordinated effectively. Child-focused staff across all agencies pay particular attention to ensuring that they capture, understand and address children, young people and care leavers' wishes and feelings. On-going support is provided through well coordinated visits from children's social workers and fostering workers. Children and young people have suitable access to CAMHS support for their emotional and behavioural needs and the support from the Bridgeway Project for children who have been sexually abused is highly valued by local workers and carers.
132. Due to the significant shortage of local carers, many children are placed in independent foster care placements (IFA). While there is often a choice of placements for children placed singly, choice is very limited for sibling groups. Foster carers report that careful attention is paid to making planned placements.
133. The quality of assessments completed prior to becoming looked after is variable and some lack a robust analysis of risk. However, once children

become looked after the quality of assessment improves. Assessments in respect of court proceedings and permanent placements seen during the inspection were generally good. Recent action has been taken to improve practice in relation to the assessment of family and friends as short-term carers for children and those assessments seen were satisfactory. Looked after children and young people's needs arising from their cultural, racial and religious identity and in relation to disability are suitably addressed within assessments and advice of professionals from minority ethnic groups is sought where necessary.

134. Placement planning is effective and a relatively low number of children become looked after in an emergency. Care planning is effectively overseen by experienced and child-centred IROs. IRO's routinely meet with children and young people before reviews and provide continuity. Progress in relation to achieving good outcomes is effectively considered and recorded during review meetings. IROs provide a suitable level of challenge where plans are not progressing and all reviews are held within required timescales.
135. Permanency planning is good and child centred. Children move to permanent placements in a timely way and careful thought is given to ensuring that their needs are well matched to permanent carers and that birth families are effectively included in the process. As a result during 2010-11 all children were placed for adoption within one year of the decision that they should be placed. The number of children who achieve permanence through special guardianship arrangements is higher at 11% than compared to national average of 6%.
136. There is a good focus on direct work with children and young people to ensure that they understand the reasons they have become or remain looked after. Careful attention is paid to ensuring that life story work for children who will be adopted or remain in long term care receive good quality information about their birth families. Children and young people have suitable access to educational psychology services in respect of their emotional and behavioural needs.
137. The quality of provision for young people leaving care is good. Social workers continue to oversee care plans until young people leave care and work with the TARGET care leaving service is well coordinated during this time.
138. Attendance at reviews by most agencies is good; all send information prior to the review. Reviews of care plans take place before changes in plans are agreed or where concerns arise for individual children, which is good practice. As a result most children and young people make positive progress and are suitably engaged in education and leisure activities and have access to therapeutic and emotional support. Parents and children seen during the inspection said that they are treated with respect, have

good opportunities to discuss their wishes, feelings and views and that their contributions are clearly represented in the recording of reviews. Parents also routinely receive copies of review minutes.

139. High priority is given to ensuring ongoing and safe contact for looked after children and young people with their wider families including siblings and grandparents and their views about contact are taken into careful consideration. The possibility of care leavers living within the wider family is also prioritised when making plans for young people to leave care. Parents seen during the inspection valued these opportunities.
140. The quality of recording is adequate. Case recording is generally up to date but the quality is variable and not all records contain a chronology. Assessment and progress records are not available on all case files. Care plans are up to date but their quality is very variable. Many care plans do not clearly explain why children are looked after, the reasons why they remain in care or the contingency arrangements in place. The reviews of children's care are effectively recorded but there are delays in distributing some minutes of meetings.

Ambition and prioritisation

Grade 2 (Good)

141. Ambition and prioritisation is good. Partners represented on the Children and Young People's Trust Board have high aspirations for looked after children and are very committed to incorporating their voice within strategic planning. There is improved performance against most national indicators, good quality service provision and good outcomes for looked after children and care leavers. The Children and Young People's Trust accepted an outcome of consultation with looked after children that they did not want to be identified as a separate group. As a result the CYPP does not include a specific focus on looked after children. The strategic plan for looked after children does identify clear priorities and ambition for looked after children but this document is not sufficiently well known about and understood by partners. This has been acknowledged by the partnership and senior managers.
142. There is strong cross party political support to prioritise the needs of looked after children and young people and this is well reflected in the protection which has been given to budgets and resources. Senior managers across agencies and elected members have a shared understanding of the key priorities for looked after children. In particular, the pressure on local placements and the need to reduce the gap between looked after children's attainment and all children in the borough.
143. There is a well established Corporate Parenting Board which enjoys good cross-party support and includes 12 elected members. Members show a keen interest in the needs of looked after children. They receive regular issue based reports in relation to key aspects of service provision and pressures such as foster care recruitment and educational achievement

and in doing this maintain a clear oversight of current issues. Elected members have raised the profile of looked after children across the council, for example by the inclusion of corporate parenting in induction training for all new council staff. The Corporate Parenting Board has set itself appropriate improvement priorities to strengthen its existing links with the CiCC and with other council departments. However, formal links between the Children and Young People's Trust Board, RCSCB and the Corporate Parenting Board are under developed.

Leadership and management

Grade 2 (Good)

144. Leadership and management are good. The DCS and senior managers provide strong and child-centred leadership and this has resulted in good quality care planning and support for looked after children and care leavers. Weaknesses in service provision are clearly understood by senior managers across agencies and improvements have been made successfully in relation to providing looked after children with access to effective health and educational support, good quality local and externally provided placements and well coordinated multi-agency support. However, robust action to ensure consistent long term placement stability and action to increase the supply of good quality local foster care placements has, until recently, lacked pace and momentum.
145. The council purchase the majority of children's home placements from external providers with the aim of provision being well tailored to young people's specific needs. The council participates in the Tees Valley consortium to commission placements with independent foster care agencies through an agreed preferred provider arrangement which has achieved a balance between cost and quality. Managers within the council are well involved in the management of these arrangements and in identifying future requirements. Agencies provide regular reports on the progress of individual children and young people and the ongoing quality of placements are monitored well.
146. A comprehensive workforce development plan has ensured that there are sufficient qualified and experienced staff to meet the needs of looked after children. Staffing has recently been increased, for example the development of a placement officer to negotiate external placements. The 'Rising Star' and management development programme is designed to respond to identified skills gaps in the workforce. The population in Redcar and Cleveland is predominantly white. Senior managers acknowledge the challenges this presents in recruiting workers and carers from the wide range of ethnic and cultural backgrounds that are reflected in the small minority ethnic community in Redcar and Cleveland. Workforce action plans also take account of the need to review the take up of employment of people with disabilities.

147. Staff generally receive good quality training to work with looked after children and care leavers. Good partnership working has recently opened up training opportunities across health, education and social care. Multi-agency training has been designed to enhance joint working, for example a focus on providing educational support for designated teachers, social workers and carers along with training on developing life story work. There has been a mutual benefit from social workers participation in recruitment training for foster carers. Foster carers have access to a suitable range of tailored courses including the relatively new 'KEEP' programme which is focused on supporting children with significant emotional difficulties. Foster carers speak very positively about their access to e-learning but some carers report that there is a limited range of training available for more experienced carers. The young people support services provide opportunity to work in partnership to support young care leavers and this is enhanced by creation of job opportunities and apprenticeship for care leavers.
148. Resources are used appropriately to ensure that looked after children live in placements that meet their needs. Financial savings have been realised through joint purchasing of foster care placements which are reinvested in buying other placements. However, the high numbers of external placements continues to put considerable pressure on financial resources and contributes in some measure to the council's 2011-12 overspend.

Performance management and quality assurance

Grade 3 (adequate)

149. Performance management and quality assurance are adequate. Systems which report on performance against national indicators are well established and performance is regularly reviewed by senior managers in the council. Most performance is in line with, or better than, in similar areas and nationally. Performance is regularly monitored but the use of findings to improve aspects of provision is underdeveloped and limited use is made of local data and intelligence to understand the factors that underpin poor performance. The impact of the shortage of local carers and long term placement stability is clearly reflected in the strategic plan. However, this is not underpinned by an in-depth analysis and therefore the authority cannot be fully confident that improvement activity is targeted effectively. Positive practice which is leading to improved outcomes for looked after children and care leavers is not systematically defined and collated to demonstrate impact, for example the impact of good provision for children on the edge of care.
150. Scrutiny arrangements are good and elected members receive regular reports on performance and service delivery briefings from senior managers. As a result they are suitably informed of current achievements and pressures within the service.

151. The progress of all looked after children is regularly tracked by managers who have a good knowledge of individual children. This monitoring is used well as a basis for planning and case transfer. However opportunities to focus this activity to better understand the changing nature and shape of the looked after population and to formally record the actions taken as a result of tracking activity are underused. In particular tracking does not incorporate systematic monitoring of placements at risk of breaking down. The IRO service undertakes regular monitoring of care planning that is routinely recorded and reported to senior managers.
152. The performance of IROs is monitored well. Weekly reports are produced in relation to timeliness of reviews. They receive regular supervision that is supplemented by annual observation of their performance. Most staff working with looked after children receive regular supervision and decisions reached in supervision are routinely entered on to children's case files. Staff, including those working with children in permanent placements, report that supervision enables them to reflect on their work and is supportive especially at times of pressure. However, the quality of supervision and its recording is variable, particularly for those front-line staff working in locality teams.
153. A systematic audit process involving managers at all levels has led to some improvements, such as the timeliness of recording. Nevertheless, line managers' use of findings from audits is not sufficiently robust in challenging practice and securing improvement in the quality of the work. This includes the quality of case recording; care plans, assessment and progress records are not always on case files and not all records contain chronology. In addition, audits do not systematically consider the extent to which practice is improving outcomes.

Record of main findings:

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