

Inspection of safeguarding and looked after children services

City of York Council

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About this inspection

1. The purpose of the inspection is to evaluate the contribution made by relevant services in the local area towards ensuring that children and young people are properly safeguarded and to determine the quality of service provision for looked after children and care leavers. The inspection team consisted of four of Her Majesty's Inspectors (HMI) 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 more than 45 children and young people receiving services, 23 parents and carers, 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
 - interviews and focus groups with front-line professionals, managers and senior staff from NHS North Yorkshire and York, York Teaching Hospital NHS Foundation Trust, Harrogate and District NHS Foundation Trust and Leeds and York Partnership Foundation Trust
 - analysing and evaluating reports from a variety of sources including a review of the Children and Young People's Plan, performance data, information from the inspection of local settings, such as schools and day care provision and the evaluations of serious case reviews undertaken by Ofsted in accordance with '*Working Together To Safeguard Children*', 2010
 - a review of over 90 case files, assessments or reports 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 on 16 and 17 November 2010.

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. York is a distinctive city with an impressive history and heritage and a strongly performing economy. The city has successfully adapted from being a railway and confectionery manufacturing city into an international destination and hub for science and technology, and a national centre for financial and business services. Average incomes are just below the national average. The unemployment rate has risen since 2005, although it is lower than the national average. While 40% of York's population live in areas that are in the least deprived 20% in England, 7% of York's population live in areas classified as being in the 20% most deprived areas in the country.
5. There are approximately 37,700 children and young people aged 0 to 18, which is 19% of the total population of the area. In 2012, 9% of the school population was classified as belonging to an ethnic group other than White British compared to 22.5% in England overall. Some 5% of pupils speak English as an additional language. Polish, Chinese and Turkish are the most recorded commonly spoken community languages.
6. At the time of the inspection there were 250 looked after children. This comprises 61 children less than five years of age, 148 children of school age and 41 young people aged over 16. Some 164 children were the subject of a child protection plan, 41% of whom were aged five or younger.
7. The YorOK Children's Trust was set up as a national pathfinder in 2003. The trust includes representatives from the council, schools, health agencies, the police, voluntary and community sector, early years, further and higher education and other independent organisations.
8. The City of York Safeguarding Children Board (CYSCB) was established and became independently chaired in 2006, bringing together the main organisations providing safeguarding services for children, young people and families in the area.
9. Early years provision is delivered predominantly through the private and voluntary sector in over 84 settings including school nurseries, nurseries, playgroups, 208 childminders and 56 out-of-school clubs. The nine children's centres are all based on school sites. There are 65 schools comprising 52 primary schools, 10 secondary schools, including two academies, two special schools and an all-age pupil referral unit which includes an outreach service and work-based learning provision. Post-16 provision is made through five school sixth-forms, the secondary special

school and two further education colleges. Looked after children's education is overseen and coordinated through a virtual school system.

10. Social care services for children and young people and their families are provided by six practice units as well as the children's advice and assessment service, adoption and fostering teams, the pathway service for care leavers and the health and disability team. The North Yorkshire and York emergency duty team provide the out of hours services. There are 126 local fostering households and two children's homes, one of which provides short-break care. Other family support services are delivered through children's centres and extended services in schools.
11. The police service is provided by the North Yorkshire Police. Services to children and young people who are at risk of offending or who have offended are provided by the council's multi-agency youth offending service.
12. The planning and commissioning of health services and primary care are carried out by North Yorkshire and York Primary Care Trust (PCT). The main provider of acute hospital and community child health services is the York Teaching Hospital NHS Foundation Trust. Emergency services for children are provided by York Teaching Hospital NHS Foundation Trust, and for minor ailments, the GP practice or the walk-in centre. Community-based and in-patient child and adolescent mental health services (CAMHS) are provided by Leeds and York Partnership NHS Foundation Trust. Maternity and newborn services along with universal health services, such as health visiting, school nursing and paediatric therapies are provided by York Teaching Hospital NHS Foundation Trust. Children and families access primary care services through one of 21 GP practices and one walk-in centre.

Safeguarding services

Overall effectiveness

Grade 2 (good)

13. The overall effectiveness of the council and its partners in safeguarding and protecting children in the City of York is good. Safeguarding requirements are met and often exceeded; no child was found to be at risk of significant harm during the inspection. Visible, child-centred and effective leadership by senior managers is sustaining and further improving already good outcomes. Almost all performance indicators are better than the averages for similar areas and nationally. The quality of strategic and operational partnership working is exceptional. The YorOK Children's Trust and the City of York Safeguarding Children Board (CYSCB) work well together. An embedded culture of support and challenge is also reflected in excellent joint commissioning arrangements. The council has sustained its financial commitment to the most vulnerable children in challenging financial circumstances and resources are very well used to underpin this priority.
14. Demonstrable improvements in the quality and range of provision have been secured in relation to early intervention with vulnerable children, including those whose emotional health and well-being gives cause for concern, and children experiencing domestic abuse. Good progress has been made in developing a workforce strategy and offering access to high quality training. However, the strategy does not as yet reflect the changing ethnicity of York's communities.
15. Children's social care services have been effectively reorganised to improve continuity of social work support as children progress through the system. Front-line capacity within children's social care has been strengthened and this has supported well an effective children's advice and assessment service. Children at risk of serious harm are promptly identified and enquiries are thoroughly undertaken. The overall quality of assessments is good. Staff across all agencies receives good support.
16. Child in need and child protection planning contributes to improved outcomes for children and young people but practice is not yet fully consistent. In particular, some written plans are underdeveloped. The records of multi-agency meetings to review plans do not always reflect discussions that have been held. Quality assurance, including the use of regular case audits within children's social care, is effective.
17. The council and its partners have a good understanding of any shortfalls in practice and in the vast majority of instances have implemented plans to address these. The council is aware that the quality of elected members' engagement in the child protection agenda, including their involvement in scrutiny, is an area for development. Supervision within social care has been strengthened. However, in relation to safe

recruitment risk assessments, in respect of a small number of local authority employees do not meet the standards contained in the council's policy.

Capacity for improvement

Grade 1 (outstanding)

18. The capacity for improvement is outstanding. The good outcomes achieved in relation to performance against national indicators and planning for individual children, together with very high levels of critical self awareness across the partnership and a strong track record of improvement, result in an excellent capacity for further improvement.
19. Children's views are keenly sought and inform strategic planning and service development very well. Children, young people and their parents seen by inspectors, along with those completing the council's surveys all felt safe and were highly appreciative of the collective efforts of all agencies to improve their lives.
20. Over a number of years very ambitious leaders have created and sustained excellent partnerships at all levels so that there is a high degree of shared ownership of York's vulnerable children. This is equally applicable to the YorOK Children's Trust and the CYSCB. Consequently quality of provision is good and safeguarding judgements across inspected provision are all good or better.
21. The council has an excellent track record of identifying areas for improvement and using the expertise of all partners to tackle these. There are numerous examples of the council and partners collectively committing the necessary resources to ensure and successfully sustain change with evidence that this has improved outcomes for children and young people. Thus numbers of young people not in education, employment or training are low and focused effort is improving engagement of young people with a learning disability. The relatively recent innovative children's advice and assessment service has significantly increased the numbers of vulnerable children receiving support packages and has appropriately reduced referrals to children's social care which has released capacity to undertake more in-depth assessments. This is a very significant contribution to ensuring that the safeguarding and protection needs of all children are recognised and responded to effectively. The CYSCB rigorously responded to the learning emerging from serious case reviews through an excellent thematic review of neglect which has identified crucial areas where local practice will be strengthened.
22. Very robust action has been taken to respond to the findings from external inspection. The two areas for development arising from the last unannounced inspection of contact, referral and assessment have been addressed well. The council commissioned a peer review during 2011. All the findings from this have been turned into a detailed action plan and

inspectors were able to identify that this work had produced further improvements in a range of areas. The council and partners are not in any way complacent and are fully aware of those areas in which further progress is needed, such as offering children and young people a stronger voice in child protection planning and increasing their involvement with the CYSCB.

Areas for improvement

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

Immediately:

- review risk assessments for children's services staff employed for longer than three years to ensure that these have been completed and are recorded on staff files
- ensure that social workers who are suitably qualified and experienced in child care work are consistently available to deal with emergencies arising out of hours and at weekends.

Within three months:

- accelerate progress to ensure that all child in need and child protection plans consistently identify desired outcomes, clear actions and timescales together with the contingency arrangements in place should the desired outcomes not be achieved
- review scrutiny arrangements within the council to ensure that they include a clear and regular focus on safeguarding and child protection management and practice.

Within six months:

- implement systems to ensure that outcomes for children subject to early intervention, child in need and child protection plans are collated and aggregated so that the factors which contribute to successful outcomes are known and fully understood.

Safeguarding outcomes for children and young people

Children and young people are safe and feel safe

Grade 2 (good)

24. Safeguarding outcomes for children and young people are good. The council effectively meets its statutory responsibilities for the management and delivery of safeguarding services. Protecting children from harm or neglect and helping them to stay safe is judged as good or better in Ofsted inspections across all providers, including children's centres, fostering, adoption and youth offending services.
25. The very large majority of children and young people who completed the council's 'Stand up for Us' survey in 2011 said that they felt safe at school. A similar proportion completing the latest 'Tell Us' survey also felt very or quite safe in their local area. Effective action is taken to monitor and deal with instances of bullying in York's schools, including racist and cyber bullying. The 'Stand up for Us' survey indicates that once reported bullying stopped for almost all the children and young people who said they were bullied on a daily basis.
26. Children and young people seen during the inspection were all very positive about the quality of help and support they received. They thought that staff across agencies listened carefully and that their views and feelings were considered well and made a difference when decisions were made. Children and young people have access to a well established statutory complaints procedure and all are offered an advocate to assist them in making representations. Complaints are suitably monitored and themes arising from complaints are identified to support improvements in practice.
27. A good range of provision provides additional support for those children who are potentially vulnerable or at risk and those who are in danger of becoming disengaged from education. This includes a highly valued mentoring scheme which is particularly effective where children and young people are reluctant to engage with services. The Travellers education service has worked well to support young Travellers receiving elective home education and to support young people not in education, employment and training (NEET). Between 2005 and 2011 the overall proportion of 16 year olds that were NEET reduced from 80% to zero.
28. Robust action by children's social care to investigate risk of harm through timely assessment and case planning also ensures that children feel safe and are safe. Out of hours arrangements are provided through a shared service with North Yorkshire County Council and are satisfactory. Communication between day time services is appropriate and in cases

seen during the inspection information was appropriately shared. However, social workers experienced in child protection are not always available to respond to emergencies and the service is currently being reviewed.

29. Multi-agency arrangements to identify and meet the needs of children missing from home, education or care are good. The police rigorously investigate reports of missing children. Information is monitored to identify patterns and trends and known addresses where children may be harboured. Timely 'safe and well' visits are undertaken on their return and children's needs are assessed to determine if additional support is required.
30. Current processes to ensure that safe recruitment practices meet statutory requirements are satisfactory. Each personnel file reviewed during the inspection contained evidence of a police check on appointment. However, there was no evidence of completion of a risk assessment in relation to one long-standing member of staff.
31. The role and function of the local authority designated officer (LADO) in dealing with complaints made against staff working with children is well embedded and effective. Allegations are rigorously and swiftly followed up any learning points arising from these are incorporated into multi-agency training courses. The council effectively promotes the importance of prevention through safe recruitment and safe care training.

Quality of provision

Grade 2 (good)

32. The quality of provision is good. The Early Intervention Partnership is enabling strong strategic and operational cohesion. Each service understands what others have to offer and families and, as a result of clear protocols for information sharing and referral, individuals are quickly directed to the agencies that are most likely to be able to help them. The YorOK and the Family Information Service websites provide good quality information for workers, families and children.
33. Individual early intervention programmes are monitored rigorously. Among the examples of successful practice seen is the strong collaboration between Catalyst (Family Intervention Project) and other agencies in supporting troubled families. Another is the use of the RONI (Risk of NEET Indicator) to ensure a shared focus on increasing the number of young people who progress to education, employment or training.
34. Services work closely together to tackle potential problems that are common across the authority. Notable examples of such work include the recently developed 'Minding the Baby' and 'Building Family Bridges' programmes that are designed to support young fathers as well as mothers and to help separated couples to take a shared responsibility for the upbringing of their children. Another is the close collaboration between

schools, the police and health services in tackling all forms of bullying. The impact of this is regularly reviewed through research conducted in association with York St John University.

35. Multi-agency early support for vulnerable children, young people and their families is coordinated through the common assessment framework (CAF) process which is well understood. All agencies are actively engaged in initiating and overseeing the services provided. Most of the CAF assessments and plans reviewed during the inspection included appropriate analysis, identified relevant sources of support and had led to improved outcomes. However, parents' and children's views are not consistently recorded. Where concerns for children's safety arose while they were receiving this support these were quickly referred to children's social care. Parents who met with inspectors were very positive about the help that they had received and the improvements that had been made to their own and their children's lives.
36. Effective partnership working between key agencies has led to the development of the innovative advice and assessment service which responds to concerns about a child or young person, whatever their level of vulnerability or need and supports other agencies to initiate a CAF assessment if necessary. These activities are recorded using the electronic E-Trak system which builds a full picture of the preventative work undertaken with individual children and young people.
37. The large majority of referrals to the children's advice and assessment service are appropriate and timely. Staff across all agencies reported that as a result of readily available advice from the service they felt more confident to carry out their safeguarding responsibilities. All referrals at the boundary of early help and specialist social care involvement are reviewed in a daily meeting which includes representatives from social care, health, the police and the youth offending team. Multi-agency decision-making in those cases viewed during the inspection was based on a thorough appraisal of risks and was clearly recorded. The impact of this service has been a significant increase in the number of CAFs undertaken from 194 in 2009 to 500 at the end of 2011. Specialist resources have been more precisely targeted, leading appropriately to fewer referrals to children's social care and fewer initial assessments. This has released resources to undertake more in-depth core assessments which increased from 147 to 224 during 2011-12.
38. Effective management in the children's advice and assessment teams ensures that social work assessments are allocated promptly. The majority of initial and core assessments seen during the inspection were of a good quality. Risks and protective factors were clearly identified and the views of staff from other agencies were effectively included. Children are routinely seen during assessments and their views are clearly evidenced but it is not always clear if reports are shared with children and their

parents. Needs in relation to racial, cultural, religious and linguistic backgrounds are appropriately considered.

39. Child protection enquiries are managed well. They are allocated promptly to qualified and experienced social workers. Strategy discussions always include the police and children's social care and often benefit from wider agency involvement. Decisions reached during these meetings are appropriately recorded. Child protection enquiries are effectively undertaken with children routinely seen alone. Decision-making at the conclusion of enquiries is robust and where there is evidence of significant harm timely initial child protection conferences are held.
40. Work with children in need, including those with disabilities, who are assessed as requiring further support is managed effectively by social workers or family support workers who are supervised by experienced practice managers. Children are regularly seen and direct work is undertaken according to need. Other agencies are actively involved in visiting families and provide a good range of support. Information is appropriately shared on a day to day basis and, in most instances, through 'child in need' meetings.
41. Multi-agency child protection planning is effective. Information sharing at well attended initial and review child protection conferences is robust. Reports and assessments prepared for these meetings are of sound quality. Parents receive good support to participate and their views are clearly understood and recorded. However, the voice of the child or young person is not always clearly reflected and this is recognised as an area for improvement. All agencies are actively engaged in implementing child protection plans and most plans progress well through regularly held and well attended core groups. Outcomes for children improve as a result of this work. Child protection planning is appropriately overseen by experienced independent reviewing officers (IROs) who are able to demonstrate that plans are not discontinued until risks have been suitably reduced. Conference decisions are distributed to partner agencies within one working day. However, there are delays in distributing the full records and this has been suitably tackled through the recruitment of an additional IRO.
42. The quality of recording is adequate or better. A small proportion is not produced in a timely manner and some delays in the recording of completed work in the children's social care teams are due to competing work pressures. Summaries of work with children in need are not available on all children's case records. Outline written protection plans are routinely agreed at initial child protection conferences. However, these are not consistently translated into outcome focused plans that identify clearly the required actions, timescales and contingency arrangements should the plan not be successful. Progress against plans is regularly reviewed at core group meetings but this activity is not consistently reflected in the

recording and this means that the child's record contains limited information about the impact the plan is having on reducing risk.

43. Management oversight is evident on most case files and decisions made in supervision are regularly recorded on children's files. In some instances the basis on which the decision has been made is not recorded. When children are subject to court proceedings, reports are of a good standard and written care plans are comprehensive.
44. Case transfer arrangements within children's social care are known and well understood. Outcomes of assessment are promptly passed through to the longer-term teams to ensure that children continue to receive an appropriate level of service to meet their identified need.

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

45. The contribution of health agencies is good. Health partners demonstrate compliance with statutory guidance. Robust safeguarding and child protection policies and procedures are in place in commissioning and provider trusts. Health staff at all levels seen during the inspection demonstrated a clear understanding of their safeguarding and child protection responsibilities.
46. All staff have received basic child protection training. Rolling programmes of higher levels of child protection training are in place and are suitably monitored by the safeguarding children teams. All staff have access to individual child protection supervision. Community and key groups of staff in acute services, such as those working in the emergency and midwifery departments, receive formal reflective group supervision, which staff reported as working very well. This system is being introduced for the remainder of acute hospital staff whose work brings them into contact with children and young people.
47. Advice and support provided to health staff, including primary care, from designated and named professionals in both commissioning and provider trusts is strong and very well regarded. Designated and named professionals regularly attend the CYSCB. The safeguarding teams within the two trusts are active in the multi-agency risk assessment conference (MARAC) process.
48. The engagement of GPs in safeguarding arrangements is good and improving. All GPs have enhanced criminal record bureau checks and have received basic training with at least one GP in each practice having received further child protection training in line with professional guidelines. Some GPs attend child protection conferences and guidance is in place to ensure that reports to conferences contain the necessary

information and are consistent. Other primary care staff are trained to minimum requirements.

49. Robust safeguarding processes are in place in the emergency department at York Teaching Hospital NHS Foundation Trust including good quality arrangements to recognise, assess and refer children who may be at risk of abuse. The recording of children's individual attendances is consistently completed. Procedures to ensure parental consent to treatment are appropriate. Health staff demonstrated a good awareness of potential risk indicators. The electronic system alerts staff to those children on a child protection plan and is being developed to include looked after children. Referral pathways are in place to identify safeguarding risks such as domestic violence and substance misuse. The safeguarding children team make daily visits to the emergency department to discuss any issues or concerns in respect of children's welfare or safety that may require further action. Some nursing staff in the department are dual trained for both children and adults but there are insufficient numbers to ensure children's specialists are available on each shift.
50. The emergency department has adequate facilities to treat children and young people including a separate waiting area near to the main reception. There is suitable access to play equipment and play specialists based in paediatrics. Plans to improve the provision are about to be implemented with the addition of children's treatment bays in the urgent care centre/walk-in centre.
51. York Teaching Hospital NHS Foundation Trust has a special care baby unit which is well regarded by parents. Two neonatal outreach nurses visit families at home to provide medical advice and emotional support; good joint working with health visitors is reported. Recommendations following a recent serious case review in respect of staff awareness of risks to babies have been implemented.
52. The Healthy Child Programme is delivered to good effect with improved outcomes for children and young people. Participation in the 'Be a Star' campaign has increased breastfeeding initiation rates in York which are above the regional average. York has achieved 95% coverage of the primary vaccination course by a child's first birthday, which is better than the national average and the average for similar areas. By the age of five, the percentage of children who have received their second dose of the measles, mumps and rubella immunisation is higher than the national average.
53. Health visitors work well with community nurses, nursery nurses and clinic nursing staff to deliver a good range of services to children under the age of five years. Positive feedback has been received from parents along with areas for improvement which the team has acted upon. School nurses provide an effective service to all mainstream schools. Staff numbers in

the school and health visiting teams are sufficient to meet the demands of core and targeted work. Workloads are subject to appropriate management oversight and this is reported by staff as working well.

54. A range of effective sexual health services together with a robust teenage pregnancy strategy have resulted in a significant reduction in under-18 conceptions by 21.7% between 1998 and 2009 which is better than the national average. Sex and relationship education is provided in all schools and as a result of involving parents it has now been adapted for children with disabilities. Effective sexual health services are provided by YorSexual Health which has received the 'You're Welcome' accreditation in February 2011 which is given in recognition of young people's involvement in planning and evaluation. There is very good access for young people to contraception advice and support through the Castlegate Centre, which is held in high regard by young people, and the nurse-led young people's sexual health outreach team. However, although the percentage of young people screened for Chlamydia has improved, it remains below the national average and the work to improve uptake continues.
55. Support for young people who misuse substances is good. The rate of young people under 18 years who were admitted to hospital because they have a condition wholly related to alcohol is similar to the England average. Parents with significant drug and alcohol problems who have children on child protection plans or whose children are in care are effectively supported by the city's drugs and alcohol action team (DAAT). The service is the second most improved DAAT area nationally in relation to adults receiving treatment for opiate use. Young people are supported very well through the Castlegate Centre and through First Base, the young people's drug and alcohol treatment service.
56. Children and young people in York have access to, and benefit from, an exceptional CAMHS that delivers a comprehensive range of high quality services including those for eating disorders, learning difficulties, bereavement and the in-patient facility at Lime Trees. York has a very effective primary mental health team who are able to provide a service to approximately 75% of referrals, which demonstrates an effective use of resources as more specialist CAMHS support can be better directed to more complex work. They are involved in the targeted mental health in schools scheme (TaMHS) which is led by the Educational Psychology Service. Emotional literacy support assistants have good links with schools to ensure that support is swiftly provided and the scheme has demonstrated positive outcomes for targeted vulnerable pupils. Children and young people also benefit from the strong national CAMHS for children and young people who are deaf which is based in York. Staff reported that they exceed performance targets for access to this service.
57. A good range of health services for children and young people with disabilities, including the child development centre, specialist therapy staff

and a valued portage service is held in high regard by parents seen during the inspection. Children with life limiting illnesses have access to a palliative care service that is effectively supported by CAMHS. The two special schools are suitably supported by trained nurses and health care assistants. The co-location of health staff in children's centres enables good communication with school and social care staff. Multi-agency transition to support the move to adult services are very focused on children's needs and include a health passport to assist young people to take control of their health needs. Health professionals are very well integrated into the service.

58. Arrangements for children and young people who have been subject to sexual assault are in place and are excellent. The Acorn Unit is a purpose built sexual assault referral centre that complies with the standards for paediatric forensic medical services. Young people who are looked after were involved in the development of the service and the choice of name.

Ambition and prioritisation

Grade 2 (good)

59. Ambition and prioritisation are good. The well established YorOK Children's Trust has worked very effectively to break down barriers between agencies. Consequently integrated working is well embedded both strategically and operationally. Partners demonstrate a strong shared responsibility for the welfare of all children and young people. The trust board engenders a climate of self critical reflection which is sharply focused on improvement and this approach is also reflected well in the work of the strategic planning groups that report to it. Relationships between the trust and the CYSCB are strong; the independent Chair of the safeguarding board provides effective external challenge.
60. Partners' ambitions for all children are clearly expressed in a strong children and young people's plan (CYPP) and by senior managers across all agencies. The outcome of this ambition is seen in the comments made by children and young people during the inspection who, without exception, highly valued the levels of care and support they receive to make positive progress in their lives.
61. Very child-centred senior leaders provide strong and focused leadership across key agencies. The Director of Children's Services (DCS), along with the Chief Executive of the council drive forward key priorities for the development of early intervention, including the involvement of schools in supporting vulnerable children and young people. Current ambitions form a solid basis on which to develop new arrangements. Plans to implement the new strategic frameworks across health and social care are well advanced and the DCS is a member of the new Clinical Commissioning Group. Children's issues are included in the joint strategic needs assessment. However, it is recognised that there is a need to more explicitly incorporate safeguarding related matters. The needs of all children are championed by a committed and well informed lead member.

Elected members receive regular safeguarding briefings and training. However, the need to strengthen the active engagement of a wider group of members in safeguarding issues is acknowledged by the council.

62. Local priorities are clear, well understood by front-line staff and their impact is examined well. Senior managers collectively plan and manage change effectively. For example, early intervention is a key shared local priority that has been carefully executed to ensure that an increasing number of children who need additional help are identified and supported. The extensively evaluated social care transformation strategy is well owned across key partners. Open and reflective strategic relationships generally lead to problems being identified at an early stage and collective action being taken to address them. Senior managers in children's social care have a good understanding of the strengths and areas for development and acknowledge that further work is needed to fully embed consistently high quality work in some areas of practice.

Leadership and management

Grade 2 (good)

63. Leadership and management are good. Effective planning has ensured that there are sufficient numbers of qualified and experienced social workers and other staff to deliver services. Workloads in children's social care are generally reasonable and a formal management system enables pressures to be suitably monitored. Additional social workers have been appointed so that case loads in the children's advice and assessment service have significantly reduced; this was an area for development at the last unannounced inspection. All children subject to child protection plans are allocated to qualified social workers. Vacancy rates for most health posts are in line with national averages.
64. The 2009-12 workforce strategy is an effective response to a recommendation from the joint area review of 2008. Local priorities in respect of integrated working have been clearly progressed. For example, the commitment to provide good quality learning is reflected in the specialist foundation degree and the 'top up' degree for the children's workforce, including staff from voluntary and community sector agencies, which are delivered in partnership with York St John University. Shared children's induction standards which provide a framework for newly appointed staff across partner agencies to understand their roles are in place, although the use and impact of these has not been evaluated. There is recognition that the children's workforce and plan does not reflect the city's current diversity. The council has produced a new corporate strategy which tackles these issues but making the necessary changes is at an early stage of development.
65. Collectively the CYSCB and the council have developed a good range of well targeted training that reflects the views of front-line staff about their needs as well as strategic priorities. Learning opportunities, including the 'No Wrong Doors' annual event for the children's workforce, are very well

regarded by staff across all sectors. Partners make their training available to staff from other agencies. Gaps in training provision are responded to effectively; for example, the training of lead practitioners in peer supervision methods. However, it is recognised that further progress needs to be made to measure the impact of learning on the quality of practice.

66. Joint commissioning through the integrated commissioning group is excellent and well embedded. It reflects the high quality of partnership working and the robust processes that characterise the strategic approach taken in the city. Needs are very clearly identified and include the views of children and young people by means of a strong engagement strategy with them.
67. Effective joint commissioning has led to a range of positive outcomes for children. The re-commissioning of drug and alcohol treatment services has contributed effectively to protecting children as parents have significantly increased access to drug rehabilitation and their children benefit from direct work to meet their needs. Resources were effectively redirected from the attendance-focused education welfare service into the children's advice and assessment service. The savings made from reducing the number of external placements have been used to strengthen the outcome-based commissioning of early intervention provision. Safeguarding arrangements within this provision are well monitored and the processes are well regarded by the voluntary and community sector as thorough and fair. However, funding has been provided on a year-on-year basis which makes it difficult for providers to forward plan.
68. Agencies also take prompt corrective action through joint commissioning when they collectively identify weaknesses or gaps in resources. For example, although there is a low number of young people not in education, employment or training (NEET), agencies, in partnership with further education colleges, have developed a number of flexible packages to support young people to maintain their attendance. As a result there is a 51% increase in participants taking entry level courses thus reducing their longer term vulnerability. Agencies also responded well to findings from a recent peer review, and strengthened the holistic support for homeless young people by developing the 'Place of Change' residential facility for homeless 16/19 year olds that also supports their re-engagement in education.
69. Resources are managed very well. Compared to other unitary authorities York receives a low level of national funding. Key services have been protected well through the council's budget management process. The recently initiated independent and non political Fairness Commission recommended that social care services for the most vulnerable were protected and this was accepted by elected members. Although savings

have been made across children's services, the council has not reduced expenditure for children's social care in 2012-14.

70. Very strong strategic partnership working and an intelligent use of grant funding has created efficiency savings while improving the quality of provision. For example, the recent re-commissioning of transport contracts produced a saving of £200,000 and a higher quality service with all drivers completing safeguarding training. At a time of national and local budget reductions financial resources have been used very effectively to maintain services such as Catalyst, and children's centre provision for vulnerable children. Resources are redirected from areas where good progress has been made, such as in reducing obesity, to sustain other provision and assets are efficiently used, for example through the co-location of services. Very good multi-agency action to review provision has led to investment in redesigned and highly valued services such as the integrated transitions service and the Castlegate Centre which provides support to 16-18 year olds. Schools, through the schools partnership, have contributed significant resources to support work with vulnerable children.
71. Children's views inform service improvement well. Their priorities are clearly reflected in the CYPP. The youth council's priority to de-stigmatise free school meals is well supported by the YorOK Children's Trust. Parents of disabled children are particularly well engaged in service planning, delivery and training through the parents' forum CANDI (Children AND Inclusion). Feedback from children and their parents is collected by some services, for example by CAMHS and TaMHS and the children's advice and assessment service has improved the process for informing families of what they should expect from an assessment as a result of their feedback. However, partners recognise that further work is needed to systematically collect, analyse and use feedback as the basis for improved service delivery.

Performance management and quality assurance

Grade 2 (good)

72. Performance management and quality assurance processes for safeguarding are good. There is a strong emphasis on using the findings to improve service delivery and front-line practice.
73. Clear and challenging targets are set in relation to performance against national indicators. Progress in service development is systematically monitored by the YorOK Children's Trust and senior managers and has led to significant improvements. For example, information from lead practitioners about the impact of common assessment processes has been periodically collected and the most recent review shows that outcomes for individual children are improving. However, the council and partners recognise the need to identify qualitative indicators to record and

aggregate outcomes across groups of children so that the factors contributing to successful practice may be better understood.

74. The CYSCB maintains a strong focus on monitoring safeguarding performance. The board receives annual reports on specific aspects of the council's and partner agencies' activities including private fostering, and missing children arrangements. Audits conducted in relation to compliance with safeguarding duties across partner agencies were last undertaken during 2008-9 and the board is in the process of repeating these audits.
75. Young people make an important contribution to quality assurance through the young inspectors programme. Using observations, interviews and mystery shopping they have evaluated the quality of provision from the young person's perspective. Agencies, such as Relate, report that the recommendations arising from these visits are invaluable. Young inspectors also identify that their self confidence has increased by taking part in this programme.
76. Scrutiny arrangements undertaken by elected members are adequate. This was identified as an area for improvement following the joint area review and a more recent peer review found it to be still underdeveloped. The scope of the scrutiny function is wide and includes cultural services as well as children and education. Members are updated in relation to safeguarding performance. However, it is recognised that there is a need to further clarify the role of the group and to accelerate the development of priorities and plans.
77. Performance management is well embedded within children's social care including through the use of external challenge. Service plans are robust and reflect well areas for improvement emerging from inspection and internal and external audit and they are well monitored and evaluated. Plans are very well advanced to provide up to date individual performance information to assist front-line social workers in managing their workloads and targets.
78. A monthly cycle of robust case file audits undertaken by service managers is driving improvements in social work practice, for example in recently improving the quality of core group meetings. Where the audits identify practice shortfalls, effective action is taken to address these. However, in the case file audits undertaken prior to this inspection not all the shortfalls in practice were fully identified by auditors.
79. Staff across all key agencies receive regular supervision. Within children's social care decisions are routinely signed off by managers; this was an area for improvement at the last unannounced inspection of contact, referral and assessment. Supervision arrangements in children's social care have been robustly reviewed and the positive impact of this is now evident. Supervision is subject to annual audit, the latest of which found that most staff receive regular case supervision and have access to

management support when needed. This was confirmed by this inspection where front-line staff reported that they highly valued the availability and visibility of managers, including senior managers, and that they receive good quality reflective supervision. However, this level of support was not consistently reflected in the recording of supervision in the files reviewed.

Partnership working

Grade 1 (outstanding)

80. Partnership working is outstanding. Effective leaders across all agencies have a clear shared strategic vision. They use collective resources well through very effective joint commissioning of provision. Competent managers have developed clear policies and protocols to support joint working over a wide range of areas. The impact of this is reflected in strongly cohesive service provision and a very strong commitment by staff to multi-agency working. Inspectors found that front-line staff share a very good understanding of each other's services and effectively, and sometimes very imaginatively, undertake a range of successful joint interventions as a result.
81. There are numerous examples of very effective partnership working described in this report. Schools are very successfully engaged in providing support to vulnerable children and those in need of protection. The schools partnership funded the post of safeguarding officer and this has strengthened safer recruitment, responses to allegations against staff and safeguarding training. The pupil premium is effectively used and monitored to extend children and young people's experiences. Young people seen during the inspection highly appreciated the enrichment opportunity provided by the youth services' use of outdoor learning through activities such as wild deer tracking, bush craft and survival skills. The police are particularly well involved in partnership working both strategically and operationally, including in relation to sexual exploitation. Operation Hindsight, a partnership between the police and schools, is well focused on issues of extremism and involves parents well.
82. Local responses to domestic abuse exemplify the very good partnership working that exists in the city. A multi-agency programme supported and overseen by the CYSCB has strengthened provision well. Robust awareness raising, training and the consolidation of assessment and risk management across agencies have resulted in increased reporting rates and a significant fall in repeat incidents from 33% in 2009-10 to an average of 22% in the first seven months of 2011. MARAC arrangements work well to identify high risk cases. Multi-agency service provision has been considerably expanded and innovative work is undertaken including with children and young people and with male victims of abuse. Families affected by domestic violence are offered support to safely rebuild relationships. Advocacy services currently support 49 children aged between five and 13 and evaluation shows that they feel safer as a result of the support. Perpetrators are challenged to change their violent

behaviour and have appropriate access to emergency accommodation through the 'Making Safe' project.

83. Good use is made of the partnership with the voluntary and independent sectors. This is reflected in the current restructuring of the youth service. The authority's own resources are being increasingly targeted on vulnerable children. However, the use of additional resources from partner agencies is ensuring that the universal offer is not eroded as a result.
84. The strategic co-location of partner agencies makes an important contribution to joint working. Social work teams are co-located in children's centres on school sites, alongside health visiting staff. Specialist police officers, education welfare staff and the specialist child protection nurse are well integrated into the work of the advice and assessment service. Inspectors observed a culture of respect operating among staff and managers at all levels across all agencies.
85. This culture of respect is also reflected in the work of the highly effective CYSCB. The board discharges its statutory duties well and provides effective leadership, support and challenge. Partner agencies are highly committed to the work of the board and its sub-groups. Any variation in attendance by agencies is swiftly addressed. The voluntary sector is well represented and exerts effective influence. Two lay members have also been appointed. The thematic review of neglect is an example of the partnership's collaborative and robust approach where complexities are firmly and effectively tackled. It is based on a thorough examination of national research and local practice through case audit and testing the thresholds for responding to neglect.
86. The board retains an effective oversight to monitor developing practice in high risk areas of work. The LADO is responsible for overseeing strategy meetings that consider the needs of children and young people who have been or are at risk of being harmed by other children. Therapeutic needs of child perpetrators are also identified and strategies such as placement changes and exclusion zones are put in place.
87. The work of the CYSCB and its key priorities are effectively communicated and as a result the board's priorities are understood and implemented across the partnership. The lessons from serious case reviews have been very effectively disseminated through a series of briefings and presentations. Front-line staff identify with the work of the CYSCB and some staff were able to explain to inspectors how findings from serious case reviews have been used to improve their practice.
88. Child death overview arrangements are suitably managed through the North Yorkshire and York panel with York well represented on the panel. The annual report is presented to the CYSCB and the findings are analysed to inform practice and interventions. For example, a 'safe

sleeping' campaign to raise awareness of the risks involved was launched following the panel's response to local child deaths.

Services for looked after children

Overall effectiveness

Grade 2 (good)

89. The overall effectiveness of services for looked after children is good. Outcomes for looked after children are good across all areas. Effective care planning and very good multi-agency working benefits children and young people who progress well. All children and young people spoken to reported a consistently high level of satisfaction with their placements. They felt very well cared for by committed and loving foster carers or very well supported in their move to independence. All felt safe in their placements and in the community. Parents seen during the inspection strongly appreciated the support they and their children received.
90. Outcomes from regulatory inspection of adoption, fostering and children's homes are good or better. Performance against national indicators is better than the national average in most instances. The adoption service has delivered some of the best performance in England in 2010-2011 and 2011-2012. Where performance is below what the local authority considers desirable, for example in relation to placement stability, good action is taken to understand the issues and robustly respond.
91. Looked after children and young people's need are prioritised effectively in the children and young people's plan (CYPP) and in the work of the YorOK Children's Trust. Local leaders have an intelligent and in depth understanding of reasons children and young people become and remain looked after and this is reflected in a well articulated plan to reduce numbers safely. The looked after children strategy is an excellent reflection of children and young people's views and priorities and the council's and its partners' ambitions for them.
92. The quality of care planning is good. Front-line staff at all levels work well together to support children and young people in the high number of local foster placements. Sufficient skilled and committed staff from all agencies offer children regular and sensitive support, although it is acknowledged that the ethnicity of the workforce does not reflect the make-up of local communities. Health agencies, including in particular CAMHS and the virtual school are very well involved in sustaining fragile placements. Multi-agency commissioning of the small number of external placements is very good. A particularly positive feature of multi-agency practice is the attention given to offering 'second chances' which is a reflection of what good parents offer their own children.
93. Local resources are used well to make significant improvements in the quality of provision. For example, to enable young adults to live with their foster carers after the age of 18. Resources have been very effectively used so that a significant number of children on the edge of care, including children with severe and challenging disabilities, have been

successfully diverted from becoming looked after. Numbers of children or young people placed externally or living more than 20 miles from the city are very low and consequently individual placement costs have reduced over the last three years.

94. There remain some challenges to improve and sustain aspects of performance and management and senior managers are very aware of these. The involvement of a wider group of elected members in corporate parenting and scrutiny requires strengthening and the impact of this demonstrated. The number of completed personal educational plans (PEPS) is lower than the authority would wish and their quality is variable. Although staff report that they receive regular supervision, the quality of supervision provided for staff within the fostering and adoption service and children's homes has not been audited. Recent improvements have been made to performance against national indicators in respect of timeliness of annual health assessments and the review of children's cases. However, these improvements need to be further sustained.

Capacity for improvement

Grade 1 (outstanding)

95. Capacity for improvement is outstanding. Performance against the large majority of national indicators is good and in the case of adoption is outstanding. Planning for individual children is effective; children, young people and parents seen during the inspection strongly appreciated the care and support they received. Children and young people only become looked after when this is the option most likely to meet their needs. Safeguarding of looked after children is good and the CYSCB takes an active interest in their welfare and protection. The local authority and its partners have a robust track record of improvement together with the leadership, ambition and resources to drive forward good services. Taken together all these factors result in an excellent capacity for further improvement.
96. Very child-centred senior managers set high aspirations for looked after children and young people. Targets are focused on improving already good performance, such as in relation to school attendance and educational achievement. The council has effectively maintained high quality services in several key areas of provision such as the adoption and fostering services, the pathway service for care leavers and the CAMHS for looked after children. The local authority and its key partners have an excellent record of achieving timely permanent placements, including through adoption and special guardianship. Multi-agency partnership working is excellent and partners have worked very well together to strengthen provision including responses to children and young people missing from care. Young people are listened to very well during this process and their voice is strongly reflected in an excellent strategy which sets correct and ambitious priorities for the next three years.

97. Local resources are collectively used very well in commissioning arrangements. Where additional resources are demonstrated as necessary there is strong political support to provide these. Very robust action has been taken to respond to the findings from external inspections which are translated into appropriately detailed action plans. For example, the peer review's recommendations have been or are in the process of being effectively implemented.

Areas for improvement

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

Immediately:

- ensure that every looked after child has an up to date personal education plan (PEP) of high quality and that reviews of these plans are timed so that every young person is able to attend.

Within three months:

- bring together information about the educational progress of individual looked after children and young people that is held separately, to give a clear aggregated picture of trends and priorities and to better understand what needs to be achieved to further improve their achievement
- ensure that the quality of supervision for staff working in the adoption and fostering services and children's homes is included in the local authority's audit arrangements
- York Teaching Hospital NHS Foundation Trust and Harrogate and District NHS Foundation Trust should ensure that the recent improvements in the timeliness of initial and review health assessments are sustained
- NHS North Yorkshire and York should ensure that arrangements are in place to provide timely health assessments for looked after children and young people who live in external placements or whose placement address is outside of the city boundary.

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

Being healthy

Grade 2 (good)

99. Health outcomes for looked after children are good. The proportion of children with up to date immunisations and having a dental check is well above the England average and the average for similar areas. Effective

leadership by the designated doctor and designated nurse in partnership with children's social care has led to sizeable improvements in the proportion of looked after children receiving their annual assessment, which was significantly below the national average in the previous year. Robust new processes have improved timely notification of children becoming looked after and the capacity of clinics has been increased to include school holiday periods. Local data for 2012-13 shows that health assessments are now delivered within required timescales. However, this early progress is yet to be sustained.

100. Local audit data shows the quality of health assessments is good; this was also the case for health assessments reviewed during this inspection. The purpose-built Acorn Unit provides exceptional facilities for the completion of initial health needs assessments. In order to reduce duplication, when children are medically examined due to concerns about neglect or abuse, the opportunity is taken to include information that would inform a looked after initial health needs assessment. This is good practice.
101. Quality monitoring systems of health assessments for looked after children placed out of the city have been strengthened. However, these are not systematically completed in a timely way by the relevant health agency. This issue has been suitably raised with the regional commissioning network in order that this issue can be resolved by health organisations within the region.
102. The specialist CAMHS team for looked after children and care leavers provides an outstanding service. Very good support is provided to children and their foster carers that enables local placements to be sustained and children's behaviour to be confident and socially acceptable. Foster carers and social workers can refer children directly into the service and there are no waiting lists for support. Foster carers highly value the support they receive. Looked after children with disabilities benefit well from the joint clinic arrangements between clinicians from CAMHS and paediatricians and from the highly regarded FIRST (Family Intervention Rapid Service Team) programme. FIRST has provided intensive support to a small number of families of severely disabled children whose behaviour is challenging and young people have been supported to remain with their families and have been diverted from out of home placements. The CAMHS is well integrated into strategic planning and placement monitoring arrangements.
103. Targeted health promotion services work well. All young people are screened for substance misuse and a pathway is in place to ensure prompt access. All looked after children and young people have access to sex and relationship education in schools and there are good links with the young people's sexual health outreach team which provides very helpful support to young people. Therapeutic support is provided through the NSPCC to looked after children who have been sexually abused and their carers; as

a result young people's emotional well-being has improved and they perform better at school.

104. It is recognised that the health care provision for care leavers is inconsistent. Young people over the age of 16 all have access to their GP. However, over and above this, care leavers are offered annual health assessments only if they remain in education. This gap has been recognised and has been tackled through new commissioning arrangements that have just come into place.
105. There are very few children living in the city who have not been placed by the City of York as there are no independent foster care agencies or children's homes within the local authority boundary. Those children who have been placed with carers from other local authorities living in the city have appropriate access to the full range of health care services.

Staying safe

Grade 2 (good)

106. The arrangements to safeguard looked after children and young people are good. Those spoken to during the inspection showed a very high level of satisfaction with the support they received. They were unstinting in their praise for their foster carers. Social workers and pathway workers were also described very positively. Of the looked after children and young people completing the 'Care4Me' survey carried out for the purpose of this inspection, nearly all thought they were living 'in the right place', were receiving good or very good care and felt safe or very safe where they lived.
107. Work with children and young people on the edge of care is effective. Over the last year good work with vulnerable children has reduced the number of referrals to children's social care and this has released capacity to undertake more in-depth assessments of need. There is a good range of provision. The Catalyst project works with families in serious difficulty and as a result of high quality multi-agency action 40 of the 199 children supported since April 2010 were prevented from becoming looked after. The council and its partners are further developing targeted services such as the 'Minding the Baby' project which works with vulnerable young mothers and their babies. Drug and alcohol services also make an effective contribution.
108. Risk is managed well at the threshold for admission to care through robust management oversight, good cross-agency understanding of thresholds, and effective liaison with the council's legal services. During the inspection all looked after children whose cases were examined were appropriately looked after.
109. A high proportion (80%) of children and young people, including 74% of looked after 15-17 year olds, are provided with good quality care by local foster carers who have high aspirations for them. The children, young

people and care leavers seen during the inspection gave high praise for the quality of the care they received commenting that carers 'made me feel I belonged' and that they received 'loads of support and love'. As one said: 'I wouldn't be where I am today without them'.

110. The local authority has undertaken extensive research into recent patterns of placement stability. The number of children with more than three moves in the last 12 months is well understood and includes very well planned moves to return children home and care leavers progressing towards independence. It also reflects the council's success in achieving timely permanent placements; 82% of the children experiencing placement moves in the last year are in adoptive placements. Contingency plans are in place for every young person should the additional support offered to and by their second placement prove insufficient to enable them to remain in that placement.
111. The recent stability of longer-term placements, although in line with the national average, has reduced and is not at the level to which the council aspires. The council is vigilant and working hard to improve performance. Senior managers understand well the reasons for recent variations, including the number of teenagers in the looked after population and 'late entries' to care. Robust tracking systems are in place. The multi-agency joint agency panel works very well to provide a good range of additional targeted support to prevent unplanned placement endings for those in local foster homes. In the cases reviewed during the inspection no child or young person was subjected to an inappropriate change of placement.
112. Risk is managed well through good systems to ensure that children and young people are protected. All looked after children and young people are allocated to qualified social workers who see them regularly. Local agencies are very actively engaged in providing support. Good quality mentoring is particularly valuable for young people who find it difficult engaging with some professionals. Suitable consideration is given to ensuring that children's cultural and language needs are met when a link is being made. The independent visitors scheme is effective and held in high regard by those who use it. Children are linked to an appropriate adult and through positive relationships are supported in making representations and having their voice heard.
113. Arrangements for monitoring care placements are good. Statutory visits and care plan reviews for looked after children and care leavers are carried out at least in accordance with statutory requirements. Where circumstances indicate, children's plans are reviewed more often. As a result, in those cases seen during the inspection, children and young people made good progress and outcomes such as engagement in education and emotional well-being were improving. The safety and quality of external placements are extensively evaluated before they are used through the advice and expertise of partners represented on the

joint agency panel. The vast majority of those children placed externally are in provision judged good or better by Ofsted.

114. Agencies work well together to prevent looked after children and young people going missing from care. The protocol was revised in August 2011 and foster carers have been appropriately consulted about this work. The police make regular visits to the authority's longer stay children's home and intelligence is shared well in relation to the risks that young people may be exposed to while missing from care.

Enjoying and achieving

Grade 2 (good)

115. The impact of services on enabling looked after children and young people to enjoy and achieve is good. Almost two thirds of those placed in local provision or externally are in schools that are good or better and none attends an unsatisfactory school. The authority works hard to minimise disruption to children's education, even when there are several changes in their placements. In admitting pupils, schools give the first priority to looked after children. Figures for 2011 show that the large majority stayed in the same school in the year leading up to their GCSE examinations.
116. In 2010/11, the Key Stage 2 results for looked after children were above the averages for their counterparts in similar authorities and nationally. Over the last two years, the gap between the results for looked after children and those for all children locally and nationally has narrowed. Over the same period, there was a considerable rise in the proportion of children in care who achieved A* to C grades in five or more GCSE subjects, including English and mathematics. Results in 2011 were significantly higher than for looked after children in similar authorities and across the country. The achievement gap between 16-year-olds who are looked after and all children locally and nationally is narrowing.
117. Last year, the Key Stage 2 English targets for looked after children were exceeded. The same was true at GCSE. The value added to the performance of looked after children, as they progress through school, is higher than the average for such children nationally. Of the random sample of cases examined on the virtual school's database, the majority were making at least satisfactory progress. Officers and schools recognise the need to define clearer targets and timescales for fulfilling their ambition to raise attainment of looked after children and young people.
118. Through regular visits from improvement partners, all schools, including academies, are challenged to raise attainment. Additional resources and help are provided for schools and individuals when progress is lower than expected. The performance of looked after children placed outside the authority is also carefully monitored.
119. The school attendance of looked after children is better than for their counterparts in similar authorities and across the country and the most

recent figures show that it continues to improve. In the last two years, no child in care has been permanently excluded from school. The number of fixed term exclusions has more than halved over the last three years but is still considerably higher than for all children in the authority. The very strong partnership between the authority, schools and a wide range of agencies ensures that children who are at risk of exclusion receive appropriate and timely support. The Danesgate Centre and other projects have had a clear impact in helping children who have become disengaged with education to resume their learning.

120. The proportion of looked after children with an up to date PEP has fluctuated over the last four years. In 2010/11 the figure was 78.8%. The PEPs examined during the inspection did not consistently include full information on educational attainment and action plans did not always give precise details of targets and timescales for their completion. The timing of PEP reviews during the school day means that young people are sometimes reluctant to participate because they do not want to miss lessons or to be identified as being looked after.
121. Looked after children are provided with a wide range of leisure activities. They have free entry to the city's leisure centres and sports clubs and through the restructuring of the youth service they have access to an increasing variety of activities specifically designed for them. The provision made by the authority is further enhanced through close collaboration with the voluntary sector. Those providers who have clear safeguarding and quality assurance systems are allowed to advertise their activities in the 'Shine' magazine which is distributed to all schools. As a result, young people, including those looked after, have the opportunity to experience a wide range of artistic, sporting and cultural activities that help to enrich their lives.

Making a positive contribution, including user engagement

Grade 2 (good)

122. Opportunities for looked after children and young people to make a positive contribution are good. They are helped to present their ideas clearly and succinctly and a memorable aspect of this inspection was the quality of the contributions that they made. They are provided with several means of speaking out on issues that matter to them. These include PEP and care plan reviews, membership of school councils and authority-wide fora. The most recent figures show that 98% of looked after children over the age of four contribute to the reviews of their care plans although, in most cases, this is done indirectly.
123. Appropriate opportunities for looked after children to influence decisions made by the local authority are provided through the children in care council, 'Show Me that I Matter', and the 'I Matter 2' group for 12- to 15-year-olds. Members of both groups liaise with senior officers and elected

members and the children in care council reports directly to the YorOK Children's Trust. The groups made an important contribution to the development of the Pledge. A concerted effort is being made to increase the participation of young people who have learning difficulties and/or disabilities. There is no formal link between the children in care council and the youth council.

124. The effect of these groups on the shaping of services is reflected in a number of ways. For example, through extensive consultation with young people, parents, carers, GPs and other health care representatives, the children in care council succeeded in bringing about a reduction in the number of formal medical examinations that looked after children have to undergo. They persuaded the Mayor to make the Mansion House available for the care leavers' Christmas party and were responsible for planning a major event which celebrated a very wide range of achievements by looked after children, in order to combat negative images in the press. They have also organised events to celebrate the work of their carers.
125. The 'I Matter 2' group recently conducted a survey of young people's experiences in care. The results are used by officers and elected members to identify areas for improvement, such as increasing young people's understanding of the role of independent reviewing officers. This group helped to revise the format of the PEP and is preparing a DVD to help young children understand the council's Pledge.

Economic well-being

Grade 2 (good)

126. The impact of services in enabling children and young people in care to achieve economic well-being is good. The proportion of care leavers in education, employment and training has fluctuated over the last five years. It has been consistently lower than the averages for care leavers in similar areas and nationally. The most recent in-year figures indicate there has been a significant improvement to 81.3%, which is higher than the authority's target of 77%. The authority is able to identify precise reasons for non-engagement by any young person.
127. In close collaboration with a range of employers and other agencies, the Danesgate Centre has devised a wide range of programmes for young people who are disengaged from education. Case studies show that these are having a considerable impact in re-kindling care leavers' interest in learning and improving their life chances.
128. There is a strong 14-19 partnership which includes the academies, as well as schools maintained by the authority. A two-year pilot programme provides young people, including care leavers, with personalised programmes that include significant work placements. The council's own apprenticeship and pre-apprenticeship programmes give priority to care leavers and are proving popular with young people.

129. Four care leavers are currently at university, each of which has a kite mark for care. These students are provided with appropriate financial support. They are also supported emotionally through regular contacts from their social workers. Close liaison with pastoral care providers within the universities ensures that the needs of these young people are recognised and met. There are similar protocols for sharing information with further education colleges attended by care leavers. A voluntary post-16 PEP is being developed to strengthen this work.
130. The pathway team provides an effective integrated service for care leavers. A single point of access in the city centre ensures that all services are readily available. Different levels of support and an extensive range of information and advice are available to help care leavers deal with issues in their lives. Those who choose not to engage with services are provided with a 'continuous offer letter' which identifies the range of support which would be most beneficial to them. If the young person eventually contacts any one of the named services, information can be shared and a coherent programme of inter-agency support quickly put in place. Young adults over the age of 21 not in education or training continue to be supported if there is a need for this. All the care leavers who met with inspectors had a pathway plan to which they had contributed. The plans seen were of a good quality and young people make an important contribution to their development and review.
131. All care leavers are suitably housed. The young people who spoke to inspectors were happy with where they lived and felt safe there. The pathway service provides access to a wide range of accommodation and the 'Staying Put' scheme ensures stability in the lives of young people, especially those who wish to continue with their education or who are in the armed forces.

Quality of provision

Grade 2 (good)

132. The quality of provision for looked after children and care leavers is good. All local agencies are actively engaged in promoting their safety and well-being. This reflects the high priority accorded to looked after children by the council and its partners. The council's fostering and adoption services together with a children's home are judged as good in the latest inspections. The short breaks care unit for children with a disability is outstanding.
133. The majority of assessments completed in respect of looked after children are of good quality, take appropriate account of their history and contain a clear analysis of risk. Children are routinely seen during assessment and their wishes and feelings are established. Risks to siblings posed by looked after young people are assessed well. Assessments prepared for the Family Proceedings Court in respect of family members' parenting abilities and their capacity for protecting children from further risks are of a high quality. Written agreements are used effectively for children at risk of

entering care due to abuse or neglect after discussion at legal planning meetings and following family group conferences which have discussed the extent to which children could remain within their wider family network.

134. Changing needs of children and young people are routinely monitored and support to placements is effectively harnessed. There are a significant number of front-line staff and managers in children's social care who are able to provide consistency and a historical perspective about the children. The virtual school, local health services, CAMHS and family support workers all contribute well to meet the needs of looked after children and young people. The inspection found examples of outstanding direct work with looked after children and young people.
135. Children's racial, cultural and linguistic identity are considered well overall through work tailored to individual needs. Work with looked after children who have a disability is of a high standard. Examples were seen of sensitive life story work with birth fathers to enable children to understand their heritage and of effective work with disabled parents. The needs of the small number of non-White children in York's care population are suitably taken into account in care planning.
136. The good quality support is appreciated by the children and young people seen by inspectors. All children and parents reported that they are treated with dignity and respect. They explained that they are very well listened to and their views make a difference most of the time. Parents were also very appreciative of the quality of care and support given to their children and to themselves. One commented that the intensive support offered had 'saved my life'.
137. Care planning is soundly undertaken. The majority of care plans reviewed during the inspection were of good quality. Reviews of children's care are appropriately attended by professionals with a meaningful connection to the child. The independent reviewing officer (IRO) team are strongly committed to overseeing the quality of care and to listening to looked after children and young people's voices. They make appropriate challenge to care plans, act to halt emerging delay and effectively ensure that actions to manage risk are followed through. The inspection found clear evidence of listening and taking seriously the views and wishes of parents and children, even if the plan for the child was not in accord with those wishes. Appropriate action has been taken to tackle a lack of capacity in the IRO service due to the increased number entering care. Their caseloads are now as recommended and they have recently been able to undertake the full range of duties as required by statutory guidance.
138. There is very effective consideration of plans to enable children and young people to live in permanent placements or to return home safely. Specialist fostering and adoption staff meet children's social workers very

regularly and the progress of plans is diligently tracked by managers. As a result of this work younger children who cannot return home are speedily placed in permanent placements by means of adoption or placement with connected persons subject to a special guardianship order. The council's adoption performance is very strong. During 2008-11, 19% of children were adopted from care compared to 12% nationally. Additionally the number of children who waited less than 21 months between entering care and moving in with their adoptive family is very significantly higher at 83% than the national average of 58%.

139. Case recording is generally up to date. Overall the quality is satisfactory and a proportion is of good quality. Training to improve the quality of records as a tool for practice and for care planning is on offer for all social workers.

Ambition and prioritisation

Grade 2 (good)

140. Ambition and prioritisation is good. Partners across all agencies have high aspirations for looked after children and care leavers which are demonstrated in the priority accorded to narrowing the achievement gap between looked after children and all children in York. The Children's Trust has developed a well established culture of integrated working within which the needs of, and performance in relation to, looked after children is well embedded and sharply focused on improving already satisfactory or good performance.
141. Priorities are well articulated within the CYPP 2009-12 and are clearly focused on fluctuations in performance such as placement stability. The council and its partners have achieved good success in some key service priorities such as consistency of social work support before, during and after children become looked after. There is an increased number of good quality local foster care placements, fewer children are placed externally and a recent improvement in the timeliness of reviews of care plans is reflected in the performance against national indicators which is generally in line or better than similar authorities.
142. Senior managers within the city council provide strong direction and leadership in relation to the looked after children's agenda. For example, in understanding the make-up of the looked after children population and how their needs may be best met. This robust management is illustrated by the current exceptionally good multi-agency strategy. It is child-focused, well informed by local and national research and, most importantly, by the views and concerns of children and young people. It explains how the council and partners will respond positively to their wishes and feelings in practical ways. Children and young people met during the inspection confirmed that they felt heard by senior managers.
143. There is good cross-party support for corporate parenting. The recently appointed lead member is well informed of current pressures and

challenges. A very small number of elected members meet regularly with the 'Show Me that I Matter' group. Other members visit the two children's homes and sit on the fostering and adoption panels. All members have access to training in relation to their responsibilities as corporate parents. However, it is recognised that further work is needed to increase elected members' understanding of and involvement in corporate parenting and a new corporate parenting group has been developed although it is yet to have its first meeting. It is also recognised that there is scope to develop the involvement of other departments in the city council within the corporate parenting agenda.

Leadership and management

Grade 2 (good)

144. Leadership and management are good. The rate of looked after children has increased and is above the national average and the rate in similar areas. The reasons for this rise are well understood as arising from young children who require protection along with the outcome of effective work to ensure that a higher than average proportion of older young people remain in care between the ages of 16 to 18 and beyond. Twelve young adults have remained in their foster placements after the age of 18. The council is predicting a reduction in numbers as young people who have been looked after for some time move on from their care settings. Inspectors found no examples where children who should have been looked after did not enter care.
145. In recognition of this, key local priorities are to reduce the rate of looked after children and increase placement stability. Senior managers have invested significant resources in developing and commissioning effective early intervention and edge of care services. Commissioning processes are well regarded by local voluntary and community sector agencies.
146. Joint commissioning and review of external placements by the joint agency panel is excellent. It is exceptionally well managed and monitored by managers who understand the needs of each individual child and young person in depth. Due to a good supply of local foster carers there are few children needing commissioned placements so that these are individually agreed on the basis of specific need. Only seven children are placed externally in independent foster care placements compared to 178 placed with local carers. Good attention is paid to safeguarding needs when seeking placements and a robust process of checking against inspection outcomes and other available information takes place prior to placement. Despite significant recent financial pressures the council took the decision to ensure children remain in external placements if these continue to meet their needs.
147. Weaknesses in services and resources are very well understood and effective action is taken to address these. Strenuous efforts to expand the number of local foster carers have produced a good recent increase in the number of fostering households from 95 in January 2010 to 126 in March

2012. Forty four 'special scheme' carers offer placements to children and young people with challenging behaviour. As a consequence the council can meet the statutory sufficiency duty. Clear improvements in service delivery have been made using the skills of voluntary and community sector providers. For example, providing additional accommodation and one to one and group support to strengthen emotional resilience and self esteem as care leavers move into independence.

148. The workforce strategy clearly prioritises the development of an integrated children's workforce and training. For example, the introduction of induction standards and the opening up of training opportunities within partner agencies to the wider children's workforce. The workforce plan does not yet reflect the diversity of the local population and action has been taken at a corporate level to tackle this. Foster carers are highly valued in York as members of the children's workforce and are included in key strategic planning fora. The local foster care association is also used well by the council to canvass the views of a wider group of carers. Carers enjoy access to the same local benefits package as council employees. Although parents' views are effectively taken into account in care planning for their own children, opportunities for them to be connected to strategic and service planning are limited.
149. Training and learning opportunities for staff across all agencies and carers are varied and well targeted; this was confirmed by staff seen during the inspection. Care planning training is offered annually and there is a regular programme of in-depth training on attachment delivered by local CAMHS as well as training in relation to PEPs and briefings about educational attainment. Foster carers' learning is enhanced through the development of the accredited foundation certificate in partnership with York St John University.
150. All looked after children's cases are allocated to qualified social workers. Senior managers have prioritised the reduction of workloads and have developed a workload weighting system to assist in this. As a result caseloads are generally manageable and have resulted in a greater equity of work across teams. However, balancing the competing demands of child protection, court work and care planning for children in stable placements is reported by social workers to be challenging on occasions.
151. Financial resources for looked after children have been used very effectively. Average placement costs per child have reduced between 2007-8 and 2011-12 by £299 through increased use of local foster carers, including for older children, and a low use of independent agencies and children's home placements. As well as reducing costs this has been beneficial for looked after children by the greater use of family placements and local resources. At a time of financial stringency the council has increased the budget for children's social care by an additional £500,000 for 2012-13 in recognition of the additional demands placed on services by

increased numbers of looked after children. Strong commissioning and effective service delivery has also produced savings while significantly improving the quality of services to families where children are at risk of entering care. For example, the FIRST project has avoided a projected expenditure of around £500,000 against placements that would otherwise have been made.

152. Statutory guidelines in relation to the small number of complaints made by looked after children and young people are followed well. The complaints process is well managed and child-focused. However, the quality of work is not reflected in a separate complaints report that focuses on children's issues. The service works effectively with the children's rights and advocacy services and IROs. All complaints are resolved at the earliest stage. Children can make complaints using a variety of media and each child making a complaint is personally visited by the children's rights service. There is a close working relationship with IROs who are effective advocates for children. Statutory guidelines in relation to complaints made against staff working with children are followed effectively.

Performance management and quality assurance

Grade 2 (good)

153. Performance management is well established across the partnership and agencies are effectively held to account through the work of the strategic management group, the joint agency panel and the CYSCB. Recent work using an external consultant to clarify the roles and responsibilities of practice managers and service managers is helping to improve the efficiency and effectiveness of front-line performance management.
154. Performance against national and local indicators is systematically and comprehensively monitored by the YorOK Children's Trust and by senior managers within children's social care. Most performance targets are met. Service plans are robust. The progress of action to tackle weaker areas of performance is monitored closely and this information, together with national and local research, is used effectively to inform improvements to practice. The outcomes achieved by looked after children are appropriately identified and recorded in individual care planning but the local authority recognises that there is further progress to be made in developing outcome-related evaluation measures of children's progress and in aggregating outcomes for the whole looked after population.
155. Audits of looked after children's cases are routinely undertaken in children's social care and are used well to improve practice. Audits include work undertaken in the fostering and adoption services. Senior managers have a limited role in auditing although they have a good detailed knowledge of individual children whose situations are causing concern. The multi-agency audits undertaken in connection with this inspection did

not consistently deliver a holistic picture of the work audited and the outcomes of the auditing process were not specified.

156. Social workers overseeing the case of looked after children and care leavers benefit from regular management oversight and supervision. Management decisions are routinely evidenced on children's case recording. Inspectors identified some good examples of the appropriate intervention and oversight by senior managers in very complex cases. The quality of supervision is audited annually but does not include staff working in the adoption and fostering service and in the children's homes and this is an omission.

Record of main findings:

Safeguarding services	
Overall effectiveness	Good
Capacity for improvement	Outstanding
Safeguarding outcomes for children and young people	
Children and young people are safe and feel safe	Good
Quality of provision	Good
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	Good
Partnership working	Outstanding
Equality and diversity	Good
How good are outcomes for looked after children and care leavers?	
Overall effectiveness	Good
Capacity for improvement	Outstanding
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	Good
Equality and diversity	Good