

# Joint area review

**Stoke-on-Trent Children's Services Authority Area**

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Review of services for children and young people

Audit Commission  
Healthcare Commission  
HM Crown Prosecution Service Inspectorate  
HM Inspectorate of Constabulary  
HM Inspectorate of Prisons  
HM Inspectorate of Probation  
Ofsted

**Age group:** All

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## Introduction

1. The 2007 Annual Performance Assessment (APA) for Stoke-on-Trent judged the council's children's services and its capacity to improve as adequate.
2. This report assesses the contribution of local services in ensuring that children and young people:
  - at risk or requiring safeguarding are effectively cared for
  - who are looked after achieve the best possible outcomes
  - with learning difficulties and/or disabilities achieve the best possible outcomes.
3. The first joint area review published in February 2006 judged children's services overall as adequate, and staying safe and social care services for children as inadequate. As a result of the findings of the review, the council employed Serco Ltd on a three-year contract from April 2007 to provide the senior management of children's services. The 2007 APA judged staying safe as inadequate and the overall effectiveness of children's services as adequate.
4. This is the report of a second joint area review which assessed the contribution of the council and its partners to improving outcomes for children and young people in the three areas identified as particular weaknesses in the previous inspections. It also assessed the management of children's services in these areas, and their overall capacity to improve. The review found that significant and rapid progress had been made in all these aspects.

## Context

5. Stoke-on Trent was established in 1910 when six pottery towns became a single council. In 1997 the city became a unitary authority responsible for education and social services. The city has an estimated population of 238,000 and an estimated 9% from Black and minority ethnic groups (BME). There are 55,000 children and young people under the age of 18. Approximately 10.4% of pupils in secondary schools and 15.4% in primary schools and nursery classes are from BME communities. Sixty different languages are spoken by children and young people in Stoke-on-Trent.
6. The city ranks as the 18<sup>th</sup> most deprived local authority in England and the third most deprived in the West Midlands. Approximately 30% of the population live in some of the 10% most deprived wards in England and 121,000 live in some of the 20% most deprived. Employment is in line with the national average but household income is more than 20% below. Just over 33% of Jobseekers Allowance claimants are aged 16-24. Against this background of poverty there has been a substantial investment in a regeneration programme for the city and there are strong partnerships between the different statutory

and voluntary agencies to develop services for families, children and young people.

7. There are seven nursery schools in Stoke-on-Trent. Three are co-located with primary schools and one with an infant school. There are 71 primary schools including five infant and four junior schools; 63 have nursery classes and 17 are aided schools. The city has 17 secondary schools, five special schools and two pupil referral units, one of which services those with medical needs and the other supports schools, children and young people at risk of exclusion.

8. The Learning and Skills Council operates across Staffordshire and Stoke-on-Trent and the 14-19 Strategic Partnership plans 14-19 training.

9. Post-16 education and training is provided by two further education colleges, three sixth forms, one sixth form college and a range of work-based learning providers. Entry to employment provision is planned by the Learning and Skills Council. Adult and community learning, including family learning, is mainly provided through Stoke-on-Trent City Council and Stoke College by the joint vehicle of College in the Community.

10. Primary care is provided by the Stoke Primary Care Trust. Acute hospital services are delivered by University Hospital of North Staffordshire NHS Trust. Mental health services for children and young people are provided by North Staffordshire Combined Healthcare NHS Trust.

11. Children's social care services are provided by a duty team, three children in need teams, two children in care teams, two fostering teams, a children with disabilities team, an adoption team, a young people's team, a placement support team and an emergency duty team. The council has 105 in-house foster carers and 14 contracted through an independent agency, seven small group homes and one larger home, and 13 children's centres. Children with disabilities receive short breaks and longer-term care provided by 26 carers. The council has 401 looked after children.

12. The police service is provided by the Staffordshire Constabulary. Services for young people who are at risk of offending or who have offended are provided by the Stoke-on-Trent Youth Offending Service. There are no young offender institutions in the area.

13. Stoke-on-Trent has an elected mayor who works with an executive and members board comprising 10 councillors in a cabinet-style arrangement. The chief executive and council manager works alongside the mayor to form the executive. Following the implementation of the contract with Serco Ltd in April 2007, to provide the senior management of children's services, there has been significant restructuring of children's services.

## Main Findings

14. The main findings of this joint area review are as follows:

- The contribution of local services to improving outcomes for children and young people at risk, or requiring safeguarding is adequate. The council and its partners have made good and rapid progress in many areas and are working effectively to further the improvements. Multi-agency arrangements and sound referral and assessment processes effectively protect children most at risk. However, there are insufficient preventative services for families in need of more targeted and intensive support needs. The Local Safeguarding Children Board (LSCB) has focused its activity well to protect children most at risk and has yet to take on its wider safeguarding remit. Core assessments vary in quality. Good action is now being taken to reduce the rate of teenage pregnancy but the numbers remain too high. Access to Child and Adolescent Mental Health Services (CAMHS) is generally good but is currently poor for 16 and 17 year olds who are not in education.
- The contribution of local services to improving outcomes for looked after children and young people is adequate. The council's commitment, and the support of partners, are driving improvements well and leading to improved outcomes. Other areas for development have been identified and work is underway to address these. Care plans and personal education plans vary in quality. The council has started to take action to strengthen placement options but choice remains limited for some groups in particular children from BME groups. The council has recognised that arrangements to improve the educational attainment of looked after children require strengthening.
- The contribution of local services for improving provision and promoting inclusion for children and young people with learning difficulties and/or disabilities is adequate. Good strategic leadership and effective local, multi-agency working are having a demonstrable impact on improving outcomes. The recently established Parents Forum provides a good vehicle for parents/carers to become more involved in service design and delivery; however, some families of children with disabilities are yet to experience the benefit of recent changes. Too few secondary schools ensure children with learning difficulties and/or disabilities make good progress. Although improving there continue to be high numbers of young people aged 16-19 with learning difficulties and/or disabilities not in education, employment or training.

- The management of services for children and young people in respect of safeguarding, children in care and children with learning difficulties and/or disabilities, and the capacity to improve in these areas are both good. Senior politicians, managers and staff in the council and partner agencies have good ambitions for these groups and effective leadership has resulted in rapid improvements. Partners have identified areas requiring development, including the size of the Schools Forum, increased delegation of funding for special educational needs and the use of financial management to drive further improvement. Joint commissioning is being implemented although it is slow to develop at a strategic level and there is a risk of duplication or underprovision at a neighbourhood level.

## Grades

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

|  | <b>Local services overall</b> |
|--|-------------------------------|
| <b>Safeguarding</b>                              | <b>2</b>                      |
| <b>Looked after children</b>                     | <b>2</b>                      |
| <b>Learning difficulties and/or disabilities</b> | <b>2</b>                      |
| <b>Service management</b>                        | <b>3</b>                      |
| <b>Capacity to improve</b>                       | <b>3</b>                      |

## Recommendations

### For immediate action

The local partnership should:

- ensure that an appropriate way is found for the successful dissemination of the findings of this report to children and young people in the area.

### For action over the next six months

The local partnership should:

- implement the Family Support Strategy to increase services for families in more challenging situations
- improve access to CAMHS for 16 and 17 year olds.

The local authority should:

- improve the quality of care plans and personal education plans for looked after children and reinforce the arrangements to improve their educational attainment
- increase the range of placement choice for looked after children and young people
- challenge secondary schools to promote inclusive provision and increase the proportion where school inspection judgements identify good or outstanding progress for children and young people with learning difficulties and/or disabilities
- promote further the work of the Parents Forum to inform service delivery and increase awareness of the growing range of services
- delegate funding for special educational needs to reduce the requirement for additional funding to link to statementing
- reduce further the number of young people with learning difficulties and/or disabilities not in education, employment or training
- ensure that school cluster arrangements and the development of neighbourhood working do not duplicate or create gaps in provision
- review the size and composition of the Schools Forum to ensure it operates as a representative body and that it is fit for purpose as a decision-making body.

## **Equality and diversity**

15. The council has achieved Level 2 in the equality standard for local government and demonstrates a good awareness of diversity. Priorities, policies and procedures address diversity well. Overall, there is a range of good initiatives and multi-agency mechanisms are developing. The partnership does not yet have a sufficiently strategic and coherent approach to equalities and diversity in the areas inspected in this review.

16. The council has taken effective steps to increase the diversity of its workforce and managers are trained in equalities impact assessments. The BME forum in the voluntary and business sector feeds in to the council at a strategic level. Specific targets are in place to improve educational outcomes for underachieving groups. Schools' awareness of racist incidents has improved as a result of targeted work with them and this has led to a significant increase in their reporting of incidents. Partners demonstrate strong ambitions for young people with learning difficulties and/or disabilities and for looked after children.

## Safeguarding

Inadequate Adequate Good Outstanding 

17. **The contribution of local services to improving outcomes for children and young people at risk or requiring safeguarding is adequate.**

| Major strengths   | Important weaknesses   |
|---|--|
| <p>Safe and effective duty and assessment services manage referrals to social care well.</p> <p>Staff are well led and supported by clear procedural frameworks which have resulted in greater confidence and improved performance.</p> <p>High proportion of initial and core assessments undertaken within prescribed timescales.</p> <p>Good implementation of the Common Assessment Framework.</p> <p>Good range of quality assurance systems leading to service improvements.</p> <p>Good reductions in first-time offending and re-offending rates.</p> | <p>The range of preventative services for families in need of more targeted and intensive support.</p> <p>The LSCB has yet to take on its wider safeguarding remit.</p> <p>The variable quality of core assessments.</p> <p>The rate of teenage pregnancy is too high.</p> <p>Mental health services for 16-17 year olds not in education.</p> |

18. The APA in 2006/07 judged the systems to safeguard children as inadequate citing a number of areas of weakness including the LSCB arrangements, the insufficient numbers of timely initial assessments completed, and an insufficiently robust approach towards serious case reviews. The council and its partners have made rapid and significant improvements in all of these areas and others, and there is a clear focus on further improvement.

19. Generally children and young people feel safe in Stoke-on-Trent particularly in school and travelling to and from school. Effective action has been taken to reduce the number of road traffic accidents through programmes of road safety awareness, pedestrian training aimed at 7-11 year olds and cyclist training using both on and off-road instruction. The significant reduction in children killed or injured in road traffic accidents from 26 in 2003 to seven in 2006 is considerably better than the national average.

20. Action taken to ensure children and young people have a safe environment is adequate. Regulatory inspections report that early years settings are mostly good or satisfactory, safeguarding procedures in schools are good, the fostering service and adoption services are satisfactory and the small group homes are good or outstanding. The Connexions Service has a range of information leaflets advising young people how to stay safe. All schools have anti-bullying policies in place. In surveys most young people said that they felt safe at school and in the local community with 74% reporting they did not feel bullied, and 35% of young people stated that incidents of bullying were dealt with either very well or quite well which matches the national average.

21. There is a strong commitment across agencies to promoting healthy lifestyles for children and young people. When recently surveyed the majority of local children and young people reported they felt healthy and took regular exercise. Good action is being taken to tackle obesity, particularly among primary school children, and is a key target in the local area agreement, although there is no evidence available yet about the outcomes.

22. The rate of schools achieving Healthy School status is good at 63%, above the 55% national milestone for December 2007, and progress to the December 2008 target of 65% is well on track.

23. Sexual health is well promoted in the area and health services are using text messaging, an innovative approach to improving the take-up of chlamydia screening. In the last year, 98% of young people who attended the genito-urinary medicine clinic were seen within the 48-hour national target. Teenage pregnancy rates are too high but have begun to reduce. The latest data show there has only been a 3.6% reduction in teenage pregnancies compared to the 1998 baseline. This falls short of national targets and the reduction is considerably below the performance of statistical neighbours. A new teenage pregnancy team is working well with the national teenage pregnancy support team in Stoke-on-Trent to improve sex and relationship education in schools.

24. There are clear eligibility criteria for access to CAMHS with no waiting lists. Universal services at tier one and two of CAMHS are good. Referrals to the more specialist tier three of CAMHS are generally seen within four weeks of referral which is a local target; this is good and compares well against the national target of 13 weeks. However, whilst young people in education can access specialist tier three services up to the age of 18 years, those young people aged 16-17 not in education can only access adult services which is inappropriate. A review of services has been commissioned which includes refocusing CAMHS to improve services for children who need more specialist and intensive support.

25. There are effective arrangements to monitor the whereabouts of children and young people who should be receiving education. A database is maintained by the council and includes those children being educated at home. The provision for education otherwise than at school is effective. A pupil referral unit

operates across two sites and has established a good focus on educational attainment. Educational outcomes for children attending that facility are good. A joint protocol between the Police and the council to identify and respond effectively to children missing from care, supported by good performance monitoring arrangements and work by the Police and residential staff, has resulted in fewer incidents.

26. The Youth Offending Service (YOS) performs effectively. It is well represented on the Children's Trust and young people at risk of offending or involved in anti-social behaviour are well safeguarded. Information systems between mainstream children's services and the YOS are aligned, allowing ease of access to information. The YOS has developed strong partnership arrangements with the school clusters to engage young people at risk of offending or anti-social behaviour. The youth inclusion and support panel targets incidents of anti-social behaviour appropriately and family support workers are linked in to the programmes. Good joint work, including the community resolution initiative, has resulted in a significant reduction in first-time offenders and a good reduction in young people re-offending.

27. Support services to children with low levels of need operate effectively and are good. Family support workers are linked to school clusters and are well coordinated. The Common Assessment Framework is based on agreed eligibility criteria, has been put in place effectively and is applied consistently. Large numbers of staff have been trained and the introduction of the framework has been used well to engage partners and to ensure consistency in coordinating support for families where the situation does not require a referral to social care. However, the range of preventative services for families in need of more targeted and intensive support are insufficient, not well defined and require improved coordination. The family support strategy produced in September 2008 is being used to contract services which will address these issues.

28. The Stoke-on-Trent LSCB is in place and focusing its activity well to safeguard children most at risk. The chair of the board is effective and independent of the council and has a clear vision of how the board should develop. The board has prioritised its activity and is clear about its core business in respect of protecting children. A range of effective work takes place in the city to safeguard children, for example the multi-agency approach between statutory and non-statutory agencies to address domestic violence, although the LSCB has yet to fully develop its role in leading on the wider safeguarding remit beyond child protection. Arrangements to deal with child death and serious case reviews are secure. Multi-agency child protection training is based on a needs analysis, and is plentiful, relevant and of high quality with good take-up across agencies. There is an effective training programme which highlights lessons learned from serious case reviews. The use of a student social work theatre group to represent injured or deceased children is a particularly innovative and powerful training tool. The Children's Trust is well established and is now chaired by the Chief Executive of the Primary Care Trust. It provides a central focus for the promotion of children's

issues including safeguarding within the council area. The LSCB is strategically positioned with the Children's Trust Board and the independent chair of the LSCB is a board member which ensures a strong link between the two bodies.

29. The social care duty and assessment service which accepts initial referrals underwent a major audit and reorganisation in January 2008. It is effective and safe with high levels of management oversight including appropriate procedures for opening cases, taking necessary action, transferring and closing cases. Recent improvements in performance, for example in reducing the number of re-referrals to social care need to be sustained over a longer period. Quality assurance procedures are in place and are resulting in service improvement. Staff are competent, confident and well supported by clear procedural frameworks. All children who are the subject of a child protection plan have a qualified social worker allocated to their case and reviews of protection plans are timely.

30. The numbers of both initial and core assessments completed within prescribed timescales have risen significantly since 2007/08 according to data provided by the council and are now demonstrating very positive performance. However, the quality of core assessments is variable. The numbers of re-referrals to the service are too high. Recent action to redefine referrals and appropriately sift out simple contacts and those requiring signposting to other services has resulted in a significant downward trend in re-referrals from a position of 33.8% in August 2007. Recent figures from the council show that this has been reduced to 26.3% in the first quarter which is in line with statistical neighbours.

31. Arrangements for safely recruiting staff in partner agencies are in place and secure. All council staff are checked through the Criminal Records Bureau and a rolling programme of three-year checking is in place. Specific groups in contact with children such as taxi escorts are appropriately checked. Multi-agency public protection arrangements are in place and secure. The Police Child Abuse Investigation Unit provides an effective lead and agencies work well together both at an operational and strategic level.

## Looked after children and young people



32. **The contribution of local services to improving outcomes for looked after children and young people is adequate.**

| Major strengths   | Important weaknesses  |
|---|---|
| <p>Council and partners prioritise looked after children and young people.</p> <p>Rapid improvements in the number of children placed more than 20 miles from their home and the timeliness of reviews.</p> <p>Development of small group homes resulting in improved outcomes for young people.</p> <p>Arrangements to consult young people.</p> | <p>Variable quality of care plans and personal education plans.</p> <p>Placement choice, particularly in relation to BME groups.</p> <p>Arrangements to improve educational attainment.</p> |

33. The council and its partners are taking concerted and effective action to improve the outcomes for looked after children. There is ample evidence of good progress and rapid and more recent improvement from what was often a low base. The council has used management information well to identify underperformance and to make improvements and good use has been made of external consultants over the past year to review a range of services for looked after children. The subsequent commissioning of the consultants to implement some of the necessary improvements has been effective in increasing the council's capacity and the speed of change.

34. Councillors are committed to looked after children, and the corporate parenting panel and scrutiny arrangements are challenging and proactive in requesting reports. Inspections of children's homes are undertaken by councillors whose findings result in changes.

35. The number of children looked after by Stoke-on-Trent has been significantly higher than in similar authorities since 2004/05 and the council has made good progress in the 12 months to August 2008, reducing the number from 457 to 401. Strategies have included a good increase in placements with family and friends in 2007/08 to 18%, increasing the revocation of care orders where these were no longer appropriate, and increasing the use of special guardianship orders with 10 currently being actioned. There has been an improvement in the number of looked after children allocated to a qualified social worker, from 89% in 2006/07 to 99.5% in 2007/08. This figure had risen to 100% in July 2008 according to data provided by the council.

36. An external audit of case files in 2007 found poor quality work and inconsistent practice and while the council has taken good action in relation to proposals made by the audit team, case-tracking during this inspection found that the quality of care planning remains variable.

37. A well-considered programme has led to phased closures of the council's larger children's homes and the appropriate development of smaller two and three-bedded group homes leased from the council's housing stock. The resulting outcomes for young people have been good, as evidenced by individual case-tracking and Ofsted inspection reports which judged the smaller homes good or outstanding. Proceeds from the sale of the larger homes have been ring-fenced to the Children's Services Department.

38. The fostering service has been the focus of scrutiny from Ofsted, which graded it satisfactory, and from the council's consultants. A number of areas for development were identified and the council has taken appropriate action. This includes strengthening capacity in the fostering and adoption teams and in-house provision, and increasing the training for carers linked to a newly developed payment for skills scheme. It is too early to judge the full impact of these actions on the outcomes for children. Action to develop a list of preferred providers is being taken.

39. The council recognises that placement choice remains an issue particularly in relation to children from BME backgrounds, older children and those remanded to the care of the local authority. Case-tracking evidenced that while staff make reasonable efforts to address children's needs when unable to match placements, the council's own figures on disruption show that children from ethnic minority groups are the most susceptible to placement breakdowns. The rate of adoption has been good and continues to be so. An inspection of the adoption services in July 2008 judged the service as satisfactory but not sufficiently proactive.

40. Outcomes for looked after children and young people have improved in a number of areas. There has been a steady reduction in the percentage of children newly placed more than 20 miles from home from 11.4% in 2007/08 to none in September 2008 according to council data. The number of children moving more than three times in the year has reduced from 19% in 2006/07 to 16% in 2007/08 which places the council in the good performance banding, however this remains higher than statistical neighbours at 12%. The number of older children looked after in family placements was considerably below similar councils in 2006/07 and improved in 2007/08 although it remains lower than comparators. Effective action has been taken to improve the timeliness of reviews and local data show an emerging improvement from 80% in 2007/08 to 97% in September 2008.

41. Partner agencies work well together to meet the health needs of looked after children and young people. The number of health assessments completed has risen to 87% and is in line with similar councils. The looked after children nurse provides individual advice and support, for example on smoking cessation and healthy lifestyles. There was a good example of effective work with a young person to reduce his weight significantly. Looked after children and young people receive prompt access to mental health services. Yellow House psychology and therapy services provide advice to carers, and services are

being refocused to provide more help directly to the young people following a recommendation in a recent review of services.

42. Over 50% of looked after children and young people of school age are subject to school action, school action plus and statements of special educational need. Educational outcomes remain low but are broadly in line with similar councils although the small cohort results in fluctuations. The number of children missing more than 25 days of schooling remains consistently better than in similar areas, and the council report further improvements as a result of the move to small group homes. In 2007, 51% left care with between one and four GCSEs at grade A\*-G or an equivalent. The number achieving five or more GCSEs at grade A\*-C was 10.3%. The council identified the low number of looked after children with a personal education plan, and this position has improved significantly to 96.1% in July 2008 according to the most recent local data. However it is acknowledged that these plans vary in quality. The council recognises that more focused work is needed to drive improvements in the education of looked after children, including plans to employ a virtual headteacher but the post has not yet been filled.

43. The council demonstrates a strong focus on listening to looked after young people and encouraging their participation in decision-making. The number of young people taking part in their own reviews in 2007/08 was, at 83%, well below similar councils but there has been good recent improvement according to local data. Looked after young people have accessed advocacy services from two voluntary agencies on a spot purchasing basis and although the agencies provided a good service to individuals, the council recognised that overall arrangements required strengthening. The National Youth Advocacy Service has recently been commissioned to provide a more comprehensive and accessible service. The achievements of looked after children and young people are celebrated in an annual awards ceremony. Young people particularly value the service they receive from their participation worker, who supports them to participate in twice yearly Special Congresses for looked after young people and in the 'Changes' group where they can make their views known, both of which also contribute to building their self-confidence. Some young people have been trained to participate in interviewing staff.

44. A review of leaving care services by external consultants in July 2008 concluded that they were of a good standard with committed staff although there was considerable scope for improvement in the provision, including the quality of accommodation and support for careleavers. The number of care leavers involved in education, employment or training in 2007/08 was below statistical neighbours at 69% but this has now risen to 78% according to data provided by the council. When commissioning a private company to maintain its housing stock the council included a requirement for them to provide apprenticeships and three careleavers have so far benefited from this arrangement. While the council reported a very high number, 97%, of careleavers living in suitable accommodation in 2007/08, some external agencies and young people reported during this inspection that not all young

people, including careleavers, were accessing appropriate accommodation or receiving the necessary level of support. The leaving care team has been refocused and restructured with new management, and new policies and procedures. The action plan is being implemented by a well motivated staff team with the support of housing services, Connexions and partners from the statutory and voluntary sectors.

## Children and young people with learning difficulties and/or disabilities



45. **The contribution of local services to improving outcomes for children and young people with learning difficulties and/or disabilities is adequate.**

| Major strengths  | Important weaknesses   |
|--|--|
| <p>Good strategic direction and long-term planning to promote inclusive practice.</p> <p>Multi-agency working in localities to provide early support to families with young children.</p> <p>Good inclusive early years provision.</p> <p>Good provision in pupil referral units and special schools.</p> <p>Collaborative working between schools in local clusters.</p> <p>Arrangements for involving children and young people with learning difficulties and/or disabilities in local decision-making.</p> | <p>Too few secondary schools ensure children with learning difficulties and/or disabilities make good or outstanding progress.</p> <p>High numbers of fixed-term exclusions from special schools.</p> <p>Some parents/carers experience inconsistency and delays in accessing short breaks and recreational activities for their children.</p> <p>Improving but continued high numbers of young people aged 16-19 with learning difficulties and/or disabilities not in education, employment or training.</p> |

46. A clear strategic direction and good understanding of the best ways to promote inclusive practice are having a demonstrable impact on outcomes. Although some developments are recent they build on secure and effective statutory arrangements for identifying and meeting the needs of those with learning difficulties and/or disabilities.

47. Following intervention in 2007 restructured services have promoted inclusive practice, increasing flexibility and responsiveness of services and improved coordination of multi-agency working. An agreed four-year strategy plan to bring about further improvements is appropriately incorporated into planned developments to universal services. Priorities for further action are well understood by partners including schools and health services. Good developments in local areas increase the impact of early intervention and support to families/carers.

48. Children's Centres provide good, local multi-agency support. Effective arrangements target home-based support to families with very young children with learning difficulties and/or disabilities. Multi-agency assessments of need are undertaken in a timely way, and involve children and their families to plan support. A Portage Service has recently been established with positive impact for the families involved. The council promotes inclusive provision through effective early identification and prevention. For example, a council-wide initiative, 'Stoke Speaks Out', provides a shared and effective strategy for working with settings, parents and carers, promoting improvements for children with communication delay and speech and language difficulties.

49. Provision is good in early years provision and nursery schools and the youngest children do well. All nursery schools are judged by Ofsted as ensuring children with learning difficulties and/or disabilities make outstanding progress. Successful nurture groups in some mainstream primary schools are having a positive impact in meeting needs early and reducing the need for formal assessment leading to a statement.

50. The good focus on multi-agency intervention including therapy services in early years is impacting on outcomes in primary schools. Good identification of needs and supported transition provide appropriate support and successful inclusion in mainstream schools. Ofsted primary school inspection reports illustrate that progress for children and young people with learning difficulties and/or disabilities is adequate or better in almost all schools and in 68% it is good or better. However, this continues to be below similar councils where 75% of schools are good or better.

51. School improvement services make good use of performance data to identify schools requiring targeted work to improve provision. Good use is made of individual pupil progress data to monitor and challenge schools. Progress in all secondary schools is judged as adequate or better by Ofsted inspection. Although none are judged outstanding the impact of improving provision is seen in the increase from 29% in 2007 to 36% of schools in 2008 where inspection reports identify good progress. However, this continues to be below the 43% of similar councils and 58% of schools nationally where progress is good or better. Good provision and progress is reported in four of the five special schools. Two special schools provide outstanding provision. The REACH pupil referral unit enables young people to make good progress and provides outstanding care, guidance and support.

52. There continues to be a higher number of statements of special educational need (3.3%) than found in similar councils (2.7%) or nationally (2.9%). The proportion of children and young people with learning difficulties and/or disabilities educated in special schools (43.8%) continues to be higher than found in similar councils (36.3%) and nationally (34.9%) with a higher number being educated out of the local area than found in similar councils. Current funding arrangements for learning difficulties and/or disabilities are based on a traditional formula which limits the rate of progress in promoting mainstream inclusive provision. However, the council is addressing this by an appropriate and measured approach with schools. The most recent data illustrates good improvements with a reduction in the number of statements needed from 229 in 2006 to 164 in 2007. The number of those with new statements having their needs met in mainstream settings (68.3%) is now in line with national figures (68.7%).

53. The arrangements for statutory processes for assessment leading to a statement of special educational need are securely established. Procedures are well understood by schools and good moderation by the Inclusion Service identifies key areas for improvement at both school and cluster level.

54. A strength of the school-based provision is the effective, collaborative working between schools in local clusters. Good arrangements for shared working have had a positive impact on the number of fixed period exclusions from mainstream schools, reducing from 38.4% in 2006 to 32.8% in 2007. This is now in line with similar councils and the national figure. Fixed period exclusions from special schools (22.8%) remain high compared to 13.8% for similar councils.

55. Schools report good support from the special educational needs support service with useful advice to help them successfully include those with physical needs or sensory impairments. School nurses act effectively as the link between schools, medical and therapy services and are responsive in providing specific help for those with physical or medical needs. Special schools have a clearly defined and accountable role increasing the capacity of mainstream schools to meet a broader range of needs.

56. Good progress has been made in addressing the weaknesses in CAMHS identified in the previous joint area review. A multi-agency children and adolescent mental health team has been established and clear plans are in place to further extend the range of services to promote early intervention and prevention. A strategy review of CAMHS undertaken in 2007 identified weaknesses in the provision for autism. These are being addressed as a priority with significant increase in funding and training for staff to provide them with the skills and confidence to meet the children and young people's needs.

57. There is good evidence of improving services but some developments are not yet fully impacting on children and young people with disabilities and their families. For example, while the council is taking effective action to increase the

range and flexibility of short break provision to ensure more families benefit and to improve equality of access, some parents report inconsistent experiences and delays in accessing services. The recently established Parents Forum provides a good vehicle for parents to express their views about local services. The group is already influencing operational decisions and their ability to influence strategic decisions is currently being developed. Clear lines of representation are established through the LDD Implementing Change Group.

58. The council and partners are pro-active in finding ways of ensuring children and young people with learning difficulties and/or disabilities are consulted and have opportunities for making decisions about their own lives. Good training has been offered to schools to extend their skills in supporting children and young people's participation in their individual annual reviews. A twice-yearly Special Congress offers good opportunities for them to contribute their views more widely. These events are well organised to ensure those who attend have the support to make a meaningful contribution and outcomes of these events are used to inform local developments.

59. The APA in 2007 identified that too many children with learning difficulties and/or disabilities were not in education, employment or training post-16. Creative and innovative approaches and a recent successful bid to the European Social Fund have secured good improvements to the range of options and levels of support available to retain or re-engage young people and extend the range of external accreditation and routes to success. Recent data illustrates the impact of improved provision with a reduction from the very high figure of 25.5% not in education, employment or training in 2006/07 to 23.3% in March 2008. However, this is still higher than similar councils (18.1%) and the national figure (13.7%) for young people with learning difficulties and/or disabilities. There are good plans in place for further improvement. Connexions personal assistants offer good support for transition planning from the time of the 14+ review and support young people in their placements.

60. Improvements in transition planning to adult services for those with complex needs provide clear procedures for transition pathways involving a range of agencies. The number of young people with completed transition plans improved from 75% in 2006/07 to over 90% in 2007/08, and is now 100% according to local data which is in line with 60% of similar councils. While arrangements are now good some parents of older children with the most complex needs continue to report their experience as a lack of coordination between education, health and social care in planning for transition to adult life.

61. There is a very good and growing range of leisure and recreation activities although some parents of children with complex needs identify that there is a limited choice for them. Special schools and voluntary groups make a positive contribution to extending summer holiday activities.

## Service Management



## Capacity to improve



**62. The management of services in respect of safeguarding, looked after children and young people, and children with learning difficulties and/or disabilities is good. Capacity to improve further the management of services for these children and families is good.**

| Major strengths  | Important weaknesses   |
|--|--|
| <p>High profile and effective leadership from senior politicians and managers in partner organisations.</p> <p>Clear focus on priorities for action.</p> <p>Rapid progress evident in the past two years.</p> <p>Strong performance management arrangements.</p> <p>Scrutiny contributes to driving performance.</p> <p>Commitment from staff in all partner organisations and at all levels to the shared vision.</p> <p>Strong developments in interagency working.</p> <p>Good progress on neighbourhood working.</p> | <p>Arrangements for funding delegation lead to schools seeking statements of special educational need to attract additional funding.</p> <p>Some structures, for example the Schools Forum, are seen as unwieldy and therefore a barrier to progress.</p> <p>Joint commissioning is slow to be developed.</p> <p>Risk of duplication or underprovision in neighbourhood working as the local strategic partnership neighbourhoods are not co-terminous with school clusters.</p> <p>Financial management is underdeveloped and is therefore underutilised as a tool for driving improvement.</p> |

63. In the autumn of 2005, the council was subject to a joint area review which resulted in a satisfactory grade overall for children's services but where staying safe was deemed to be inadequate. Following the joint area review the mayor and council manager began to address weaknesses both in the management of children's services and in partnership working to provide the

basis for driving improvement, particularly in relation to safeguarding children and services for children in care. In the autumn of 2006, the council actively cooperated with the Government to contract Serco Ltd to provide the senior management for children's services from April 2007 and from this point improvements have accelerated.

64. The APA in 2007 recorded staying safe as still inadequate, although the capacity to improve, including the management of children's services, was judged adequate. Significant progress has since been made in relation to safeguarding, children in care and children with learning difficulties and/or disabilities who are the focus of this inspection, and the council and its partners have put in place sound arrangements to support future improvement in these areas.

65. Ambition for children and young people with learning difficulties and/or disabilities, looked after children, and those at risk of abuse is good. The local strategic partnership has a clear focus on narrowing the gap between the most vulnerable young people and others, and between children and young people in Stoke-on-Trent and those elsewhere. The ambitions are reflected in the Children and Young People's Plan and partners' business plans. Ambitions and the means to deliver them are well understood and supported at all levels within partner organisations. However, ambitions are less well understood and supported by the wider public. The council has begun to engage parents and carers, for example by establishing a parents' forum but strategies for engaging the wider public are still to be fully developed.

66. The council's ambitions are also demonstrated by the strategic approach it and its partners are making to the development of the city and wider area. For example, a University Quarter comprising Staffordshire University, Stoke College and a new city academy is to be established and linked with both a reinvigorated cultural quarter and an ambitious business quarter where jobs, including highly skilled jobs, are planned. The council's transport policy is also linked to these ambitions and efficient public transport is planned to connect these new developments with Keele University enabling young people in the city to access wider opportunities easily.

67. Arrangements to consult and engage with children and young people are good. Looked after children and young people and those with learning difficulties and/or disabilities are actively involved in consultation processes to ensure their voices are heard. The council has reacted positively to feedback from young people. There are some examples of young people's involvement in strategic planning and monitoring outcomes but these are under-developed.

68. Prioritisation within the partnership is good. Priorities are underpinned by a good needs analysis, and the development of multi-agency neighbourhood working is enabling ambitions to be realised and priorities delivered in a local context. However, while localities have a good understanding of need, targets are not systematically set at a local level to deliver strategic objectives and this

limits partners' ability to be confident of the degree to which neighbourhood working will contribute to achieving partners' overall objectives.

69. Strong leadership from the council has enabled a clear focus on children's issues over the last two years and the leadership of the partnership is now good having been strengthened by the establishment of a children's trust.

70. The council and its partners have focused well on preventative strategies since 2006, notably through locality working and Children's Centres. Partnership working is evident in MACs Places, multi-agency provision delivered in seven secondary schools which contribute to achieving priorities, for example by offering sexual health advice and condoms to reduce teenage pregnancies. Similarly, nurture groups for early years have been established in a number of schools and where these are established the number of applications for statements of special educational need has significantly reduced.

71. Resources have been or are being redirected to priorities. For example, savings made by establishing small group homes for children in care are being re-invested in preventative services. The council's annual budget-setting process, the Star Chamber, clearly links resources to priorities.

72. The capacity of the partnership is adequate. The council has taken effective steps to address the history of vacancies in children's social care, and services are now staffed to deliver priorities. Staff development processes within the council and its partners are strong and training opportunities are good. Joint training has been well developed, for example in child protection and in relation to the common assessment framework, and this is reinforcing a common understanding of policies and procedures and enhancing capacity. Staff overall understand their roles and how they personally contribute to the wider aims of the partnership. However, some barriers to change remain, for example the Schools Forum with over 40 members is rightly seen by some partners as too large and as a consequence does not make timely decisions.

73. The development of neighbourhood teams is enabling flexible and responsive multi-agency working to build services around vulnerable children. Schools, through their clusters, are also developing services and provision to meet need, although there is some risk of duplication or under provision as school clusters are not co-terminous with neighbourhoods.

74. The voluntary sector in Stoke-on-Trent has been underdeveloped but an umbrella group, Voluntary Action Stoke (VAST), has recently been commissioned to continue to support the VCS Engagement Partnership for the Trust and is acting as a broker for smaller agencies to work together to bid for and provide services.

75. Despite a history of some joint working, joint strategic commissioning has been slow to develop. The council and its partners have a draft commissioning framework and are developing joint commissioning, initially for CAMHS. Joint commissioning is also developing at neighbourhood level but there is a risk that

this will lead to duplication or under-provision. For example, some school clusters have commissioned services to support the mental health needs of children and young people but this is quite independent of the commissioning of CAMHS provision being led by the Trust.

76. Value-for-money is not consistently achieved by the council. The council is achieving good value-for-money in some of its priority areas as outcomes are improved and at a lower cost, for example establishing small group homes. In other areas, for example the deployment of resources for children with learning difficulties and/or disabilities value-for-money has not yet been achieved. The formula for delegating funding for children with special educational needs is a barrier to efficient and cost-effective working. As a consequence schools are spending unnecessary time seeking statements of special educational need and the statementing process itself is using resources which could otherwise be spent on provision for children and young people. This is recognised by the council and its partners, including schools, but the council through the schools forum has been slow to complete and enact the special educational needs formula review.

77. The council monitors spending in children's services effectively but does not systematically manage finance to best effect. The council is not robustly consistent at benchmarking its costs with those of its statistical neighbours or other comparator groups. The council's annual Star Chamber process identifies priorities and resources and the overall cost of delivering the plan is identified within divisional plans. However, the council has yet to align the monitoring of budget and performance at other times which limits its ability to know whether it is always achieving value-for-money.

78. Performance management in both the council and the Children's Trust is good. The breadth and effectiveness of performance management is helping to drive improvement. The council uses data well to identify underperformance. Governance arrangements within the partnership, including the safeguarding board are strong. Performance information relating to priorities and key target areas is considered at appropriate levels. Partners know how each other are performing and offer appropriate challenge. The council's scrutiny function considers performance information regularly and also offers appropriate challenge as well as considering specific aspects of performance in greater detail. The council and its partners use benchmarking information to help them manage and improve service provision. It has a track record of taking difficult decisions such as school closures and the children's social services restructure including sensitive negotiations with trade unions. In some areas such as increasing the inclusion of young people with learning difficulties in mainstream schools, the pace of change has been too slow.

79. The council has used independent evaluation well to critique and also to develop provision, for example using external consultants to help improve outcomes for children in care and for careleavers. There is some sharing of

good practice within the partnership but this is not consistent and opportunities, particularly for sharing between clusters, are not always taken.

80. The capacity to improve is good. Strong leadership is supported by sound procedures and processes. Since the autumn of 2006, senior officers within partner organisations have provided high profile and effective leadership to children's services. The council manager has been chairing the Children's Trust and this role has recently passed to the chief executive of the Primary Care Trust. The mayor of Stoke-on-Trent has prioritised children as has his Executive Board, a coalition of members which operates similarly to a cabinet.

81. Within the Children's Services Department the very positive leadership offered by the senior management team from Serco Ltd has been recognised by staff, schools and other partners. Reorganisation has been undertaken and sound business planning processes have been introduced. Staff have a clear focus for their work and appropriate management support to enable them to improve outcomes for children and young people.

82. While many improvements in outcomes are recent and some of the staffing changes have yet to impact on service outcomes, structures and systems have been put in place to ensure good and consistent service delivery. Recent unvalidated performance information indicates changes are beginning to have a positive impact on outcomes such as reducing the number of looked after children. The pace of change in establishing new processes has been rapid, yet these are well understood and valued by staff in the partnership. There is a clear pathway to achieve further improvement and a solid performance management process to facilitate this.

83. Workforce planning is established in the council. Strategies to overcome previous staff shortages in social care have been put in place with positive effect and the council is recognising workforce issues in schools, both now and in the future, and is managing these. The council is supporting teaching assistants to train to become mathematics teachers to overcome current shortages and providing development opportunities to middle managers in schools as part of succession planning.

## Annex A

### **MOST RECENTLY PUBLISHED ANNUAL PERFORMANCE ASSESSMENT OF SERVICES FOR CHILDREN AND YOUNG PEOPLE IN STOKE-ON-TRENT**

The full annual performance assessment for 2008, which was published on 17 December 2008, can be found at:

[http://www.ofsted.gov.uk/oxcare\\_providers/la\\_download/\(id\)/4768/\(as\)/APA/apa\\_2008\\_861.pdf](http://www.ofsted.gov.uk/oxcare_providers/la_download/(id)/4768/(as)/APA/apa_2008_861.pdf)

## Annex B

### SUMMARY OF JOINT AREA REVIEW AND ANNUAL PERFORMANCE ASSESSMENT ARRANGEMENTS

1. This joint area review was conducted using the arrangements required under Section 20 of the Children Act 2004. It was carried out by a multi-disciplinary team of inspectors from Ofsted, the Healthcare Commission and the Audit Commission. The review was undertaken according to the requirements of the *Framework for the Inspection of Children's Services*.

2. This review describes the outcomes achieved by looked after children and young people, those at risk or requiring safeguarding, and children with learning difficulties and/or disabilities in Stoke-on-Trent and evaluates the way local services, taken together, contribute to their well-being. Together with the Annual Performance Assessment of Children's Services, joint area reviews focus on the extent to which children and young people are healthy, safe, enjoy and achieve, make a positive contribution, and are well prepared to secure economic well-being. This review explores these issues by focussing on children with learning difficulties and/or disabilities, children who are looked after and children at risk or requiring safeguarding. It evaluates the collective contribution made by all relevant children's services to outcomes for these children and young people.

3. The review took place in two stages consisting of an analysis stage (where recorded evidence was scrutinised) and a two week fieldwork stage (where inspectors met children and young people and those who deliver services for them).