



Joint area review

Stoke-on-Trent Children's Services Authority Area

**Better
education
and care**

Review of services for children and young people

Adult Learning Inspectorate
Audit Commission
Commission for Social Care Inspection (CSCI)
Healthcare Commission
HM Crown Prosecution Service Inspectorate
HM Inspectorate of Constabulary
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Introduction

1. This joint area review was conducted using the arrangements required under section 20 of the Children Act 2004. It was carried out by a multi-disciplinary team of ten inspectors from the Office for Standards in Education (Ofsted), the Commission for Social Care Inspection (CSCI), the Adult Learning Inspectorate (ALI), 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. The review was linked to the contemporaneous corporate assessment of the local council by the Audit Commission and its findings are represented in the relevant part of the corporate assessment report.

3. This review describes the outcomes achieved by children and young people growing up in the Stoke-on-Trent area and evaluates the way local services, taken together, contribute to their well-being. Joint area reviews focus on the extent to which children and young people are healthy, safe, enjoy and achieve, make a positive contribution, and are well prepared to secure economic well-being.

4. The review evaluates the collective contribution made to each outcome for children and young people by relevant services in the area. It also judges the contributions made by the council's services overall and, specifically, its education and children's social care services. Particular attention is given to joint action by local services on behalf of those groups of children and young people who are vulnerable to poor outcomes. Two such groups are covered in detail: children and young people who are looked after by the council; and children and young people with learning difficulties and/or disabilities (LDD).

5. The review took place in two stages consisting in total of three weeks over a six-week period. The first stage reviewed all existing evidence including:

- self-assessment undertaken by local public service providers
- a survey of children and young people
- performance data
- the findings of the contemporaneous inspection of the youth service;
- planning documents
- information from the inspection of local settings, such as schools and day-care provision
- briefings from staff within inspectorates, commissions and other public bodies in contact with local providers.

6. The second stage included inspection fieldwork. This included studies of how far local services have improved outcomes for a small sample of children and young people, some of whom have the most complex needs, and a study of provision in one neighbourhood, Blurton. It also included gathering evidence on ten key judgements, selected because of their critical importance to

improving outcomes for children and young people in the local area. This included discussions with elected members of the local authority, officers from these agencies, service users, and community representatives.

Context

7. Stoke-on-Trent was established in 1910 when the six pottery towns of Tunstall, Burslem, Hanley, Stoke, Fenton and Longton joined under a single local authority. It became a district authority in 1974 and in 1997 a unitary authority with responsibility for education and social services. Today the city has a population of approximately 240,000. The population declined by 5% between the censuses of 1991 and 2001. Around 4% of the city's population are from Black and minority ethnic (BME) backgrounds and 10.4% of the secondary school population and 15.4% of the city's nursery and primary school population are from the BME community. These community groups are concentrated in a few neighbourhood areas within which BME young people represent up to 60% of the young local population.

8. Stoke is the 17th most multiply deprived local authority area in England. In the late 1980s and the 1990s many factories, steelworks, mines and potteries closed in the area resulting in high unemployment within a skilled but low-paid workforce. Although unemployment is now around the national average, household income is 25% below the national average and income support dependence is 50% above the national average. There are high levels of deprivation and factors such as, poor housing, poor levels of parental mental health, low educational attainment, high levels of domestic violence, fear of crime and widespread drug and alcohol misuse all have significant impact. Despite this background there has been substantial investment in the regeneration of the city with ambitious plans for housing renewal. People in the city have a strong sense of history and local identity within the six towns and the council is committed to improving the mechanisms for local community development.

9. The council maintains a range of 80 nursery, infant, junior and primary schools as well as 17 high schools and a number of special schools and other educational provision. Staffordshire Learning and Skills Council is a partner with the local authority, colleges, training providers and schools in addressing the 14–19 strategy. A locally managed consortium plans 14–19 learning. Post-16 education and training is provided by two further education colleges, three sixth forms, one sixth form college and many work-based learning providers. Entry to employment provision is managed by a local consortium. Adult and community learning including family learning is provided mainly through Stoke-on-Trent Council and Stoke College by the joint vehicle of College in the Community. The council's social care services for children include nine social work teams, separate fostering and adoption teams and a number of family centres and residential units. The council has 465 children accommodated or looked after and during the inspection there were 85 children on the child protection register.

10. The Stoke-on-Trent Children and Young People's Strategic Partnership Board (CYPSPB) is in place and has good representation from all the relevant providers of public services and the voluntary sector. There is a complex arrangement for health provision with two primary care trusts (PCTs), a mental health trust, an acute hospital trust as well as additional services commissioned from two adjoining PCTs. During the course of the inspection the city appointed its former director of education as the new director of children's services. The partnership has recently begun to respond to the *Every Child Matters* policy agenda and is currently considering the development of its Children and Young People's Plan (CYPP).

Summary report

Outcomes for children and young people

11. Outcomes for most children and young people are adequate.

12. On a national comparison health outcomes for children and young people are often below average although progress is beginning to be made. Children and young people are not as healthy as those found nationally. Access to services for children and young people with emotional and mental health problems is limited. Health prevention activities such as the immunisation programme are starting to show improved take-up.

13. There are a number of critical weaknesses for vulnerable groups of children. Some children and young people experience significant levels of neglect, emotional abuse, and the effects of domestic violence and parents who misuse drugs. Safeguarding arrangements, primarily the council's children's social care and the work of the Area Child Protection Committee (ACPC) are particularly poor in serving the most vulnerable children including those currently living in unsafe and unstable environments and those at greatest risk. Too many children enter and remain in the care of the council, often outside the city, and a significant number have no allocated social worker due to persistent staff shortages.

14. Many children start school with very low standards. However, although still below the national average, GCSE results have improved rapidly since 2002, particularly in 2003 and 2005. Children make variable progress in their early years and achieve less well in primary schools than pupils in similar areas. In secondary schools, however, pupils achieve well. The attainment of Pakistani children has improved significantly. The attendance at school of children and young people who are looked after is good and their achievement is generally satisfactory. Children and young people with LDD also make satisfactory progress. Despite improved collaboration among partners, achievement rates post-16 are below the national average but improving. A high number of young people leave their first choice of post-compulsory education at 17. Despite good practice in supporting young parents, only 18% of young mothers are known to participate in education, training or employment.

15. Most children and young people behave responsibly, attend school regularly and some make significant positive contributions to their school and local community. Young people are well consulted and are actively involved in some decision-making although systematic consideration of their views is yet to be developed. There is a wide range of sport, social activities and projects to reduce anti-social behaviour and offending that are beginning to have an impact.

Impact of local public services

Being healthy

16. **The combined work of all local services in securing the health of children and young people is adequate.** Some initiatives are progressing well. Parents generally receive good information and advice from primary care services. Access to general practitioners is usually prompt and access to accident and emergency (A&E) and paediatric outpatient services is also satisfactory. Immunisation programmes have an improving rate of take-up. The council and its partners actively support health education and promotion which is delivered effectively through schools and children's centres. In addition, substance misuse and sexual health education are promoted through a range of outlets. Access to child and adolescent mental health services (CAMHS) is variable with inconsistent thresholds which are difficult to understand. This is particularly so for looked-after children and children in need, especially those with the most acute and specialist needs. Community nurses are identifying and addressing the needs of some young children with LDD, although there are overall weaknesses in health services for this group of children. Despite good relationships between health and children's social care, longstanding weaknesses in the capacity and functioning of social care has had a negative impact on children as many health workers are holding back child concern referrals to reduce pressure on social workers.

Staying safe

17. **The overall contribution of services in keeping children and young people safe is inadequate.** This is due to the weaknesses in the council's social care safeguarding arrangements for vulnerable children and the ACPC's inadequate performance. The safeguarding contribution made by other agencies for children not judged to be the most vulnerable is adequate. There are satisfactory safeguarding arrangements in some key services such as education, health, the youth service and Sure Start. These services provide appropriate support for many children in the local area. There are, however, significant weaknesses in social care and in the leadership and functioning of the ACPC that have only recently been acknowledged. The recommendations from the Inquiry into the death of Victoria Climbié (VCI) and the Social Services Inspectorate (SSI) inspection into the city's child protection services, both published in January 2003, have not been fully implemented. Weak capacity in

children's social care and high access thresholds cause significant numbers of unassessed and unallocated children with LDD to wait a long time for services.

18. Too many children enter and remain in the care of the council often outside the city and a significant number have no social worker. The stability of placements is poor with no consistent quality standards for care or permanency planning. Weaknesses identified by regulatory inspection of the council's fostering, adoption and residential services have not been addressed satisfactorily. Accountability and performance management arrangements remain weak, leading to inconsistent practices that do not routinely safeguard children to the standards currently required. Safeguarding arrangements are particularly poor for the most vulnerable children including those who are currently living in environments likely to be unsafe and unstable, looked-after children or children with LDD.

Enjoying and achieving

19. **The overall contribution of services to help children and young people enjoy and achieve is good.** There is variability in the quality of provision but in the majority of early years settings and primary and secondary schools it is at least satisfactory and often good. There has been substantial investment in the rebuilding and refurbishment of schools. Schools and the local authority place a high level of importance on the welfare and achievement of all children and young people. The education service supports and challenges schools very well. The impact of the work with schools causing concern is rigorously monitored and rightly targeted to areas of need. Significant progress has been made in improving attendance, including that of looked-after children, although this dropped in 2004–05. Permanent exclusions are now rare, but the rate of fixed-term exclusions is high. Children enter schools with skills that are far weaker than normal. Gains in primary schools are variable, particularly due to high pupil mobility and some weaknesses in the quality of provision and, by the age of 11, outcomes remain below national and similar authorities' average. Progress is quicker in secondary schools and, although still below the national average, the majority of young people are achieving as well as those in similar authorities at age 16. Pupils with special educational needs and those who are looked after make satisfactory progress.

Making a positive contribution

20. **The overall contribution of services to help children and young people to contribute to society is good.** Children and young people are supported well to develop socially and emotionally. Families benefit from multi-agency children's services across the city. Most children and young people are supported well at times of change and challenge. In education, well-established procedures are in place to ensure a smooth transition between phases and establishments. While there is generally well-planned support in schools for pupils with LDD, the transition within social care from child to adult services is not always managed well. Partners in the local area have a strong commitment

to consultation with children and young people. There are clear structures in place for their active involvement. While there are good examples of the influence of children and young people, routine and systematic consideration of their views is not yet fully in place across services. Too few looked-after children contribute to a review of their care. There is a wide range of projects, initiatives and services to reduce anti-social behaviour and prevent offending which are beginning to have an impact. Partnership working is good but there is some lack of clarity about the roles and responsibilities of the various agencies involved and insufficient coordination.

Achieving economic well being

21. The overall contribution of services to helping children and young people achieve economic well-being is adequate. Partnership working between the local authority, the local Learning and Skills Council, the colleges, work-based learning providers and most schools has been effective in developing the 14–19 curriculum. Education and training opportunities meet the needs of most learners, although there is a limited range of pre-vocational provision. Careful use has been made of a range of funding streams to provide 14 to 16 year olds with a good range of vocational options. The number of young people continuing their education or training post-16 is below the national average. Achievement rates post-16 are below the national average, but improving. There is a high number of young people who are leaving their initial choice of post-compulsory education at 17. Only 18% of young mothers are participating in education, training or employment. Childcare is expanding and accessible to most parents. Tenants are effectively engaged in the planning of the redevelopment of local housing. While the length of stay in bed and breakfast accommodation is better than the national picture, youth homelessness is increasing in the area and provision of affordable housing is low.

Service management

22. Overall, the management of services for children and young people is adequate. Although the capacity of children's services to improve is adequate, there are serious weaknesses in the capacity to improve within the council's social care services. Ambitions for children and their families are clear with a strong political and partnership commitment. Partnerships are delivering some effective services including some where staff are jointly located, but these are insufficiently coordinated or prioritised. A CYPSP is established but governance arrangements for this board and its relationship with other bodies are unclear. Service management within the council is variable. There are good services in education, but serious capacity and practice problems in social care result in inadequate provision, putting the most vulnerable children at risk. These issues have recently been fully recognised and senior managers are now beginning to address them. Future developments are, however, threatened by financial limitations.

Grades

Grades awarded:

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

	Local services overall	Council services	Health services
Being healthy	2		
Staying safe	1		
Enjoying and achieving	3		
Making a positive contribution	3		
Achieving economic well-being	2		
Service management	2		
Capacity to improve	2	2	
Children's services		2	
The education service		3	
The social care services for children		1	
The health service for children			2

Recommendations

For immediate action

23. The council and its partners must improve the level of care provided to children and young people and:

- implement fully the recommendations from the Inquiry into the death of Victoria Climbié (VCI) and the SSI inspection into safeguarding

arrangements, as well as responding to the safeguarding concerns identified in this report

- address the weaknesses in capacity within children's social care services at all levels
- improve the level of accountability and performance management arrangements
- strengthen the safeguarding arrangements for the most vulnerable children and young people including those with LDD and those who are currently living in environments likely to be unsafe and unstable
- ensure all looked after children have an allocated social worker
- ensure that the ACPC, and subsequently the LSCB, fulfils its full inter-agency responsibilities effectively.

For full details of actions recommended see annex B.

24. Improve mental health services for children and young people, in particular address appropriate access routes, thresholds and resources for service provision quickly.

For action over the next six months

25. Ensure the CYPSP board establishes clear priorities and agreed procedures for partnership working. These should give particular attention to the arrangements for governance, monitoring, evaluation and how services will be evaluated and jointly commissioned.

26. Improve the outcomes for pupils in primary schools and for all looked-after children.

For action in the longer term

27. Improve the current weaknesses in the range of provision delivered to children and young people with LDD by children's social care and health services.

28. Improve the range of appropriate and affordable housing for young people.

Main report

Impact of local public services

Being healthy

29. **The combined work of all local services in securing the health of children and young people is adequate.** Despite much effort on the part of health services in the face of significant social and economic challenges, children and young people are not as healthy as the national average. There is a high percentage of low birth weights; low breastfeeding rates; high emergency admissions to hospital for gastroenterology and respiratory conditions; and high levels of teenage pregnancy. The public health strategy sets out to address these and other issues and there have been some incremental improvements, although prioritisation, resources and inter-agency working arrangements are not fully developed.

30. Parents receive good information, advice and support to help them keep children and young people healthy. There is a high take-up rate for the comprehensive Newborn Hearing Screening Programme followed by appropriate referrals to 'Stoke Speaks Out', a preventive and awareness-raising service. There is a gap in provision for school-age children with autistic spectrum disorder (ASD) who do not have learning difficulties. However, there is an ASD service for children aged 0 to 5 years and for those school-age children with ASD and learning difficulties. There is a city-wide service for young mothers with post-natal depression. There is an immunisation programme in place with follow-up, through health visiting services, for parents who do not keep their appointments. Take-up rates have improved beyond the national average and this remains a high priority particularly in respect of the coordination of work carried out by community-based staff. Within the Sure Start areas, programmes to promote breastfeeding and smoking cessation are in place with improved take-up and outcome rates. Statistical data shows that birth weights are increasing. Parents are accessing the services and benefiting from information, support and guidance on health-related issues. Primary care settings are starting to rise to the challenge of providing a wider range of universal health services such as baby massage. Health worker caseloads in relation to social care issues are increasing and it is unacceptable that due to the demands placed on the limited numbers of social work colleagues, health staff often hold back referral of 'child concern' cases. A high priority is given to ensuring children are safe within the hospital setting, although obtaining specialist social work support for children not on the child protection register is difficult.

31. Access to general practitioners is improving and children and young people can usually be seen within two working days. Waiting times for paediatric assessment and first appointment for treatment are satisfactory. Attendance rates at A&E and referral for specialist advice, for example gastroenterology, remain high and early useful partnership working between community and acute services is underway to develop 'first contact' services.

32. The council has actively engaged partners in promoting healthier communities with clear and relevant health promotion strategies. There is evidence of the promotion of healthy eating and physical exercise initiatives and of physical and emotional needs being addressed through the school curriculum, school nursing services and children's centres. Services for young people and, more recently, vulnerable young people, are well directed and include physical activity; drugs education; sexual health; and prevention of teenage pregnancies. Impact of these initiatives includes a small reduction in teenage pregnancies and a high percentage of young people reportedly feeling that they follow a healthy lifestyle. All agencies are taking action on drug and substance misuse across the age ranges although it is too early to assess the impact. Support and advice is available through the work of the Drugs Education Project and intensive programmes for substance-abusing young people are offered through the Lock Service which is commissioned through the Drug Action Team. However, not all health teams, particularly mental health workers, are aware of where to refer children or young people who are showing early signs of substance misuse. This is unsatisfactory.

33. The development of CAMHS is variable. There is evidence of good work in clarifying and signposting services at the lower preventive levels at tiers 1 and 2. However, clarity needs to be developed over what is available at the more specialist tier 3 and 4 levels as well as properly resourcing and implementing all tiers of CAMHS. Threshold and acceptance levels for more specialised services are unclear and high and some children and young people are inappropriately referred and not followed up. Within preventive and early support services, a considerable amount of work has been carried out to develop the positive parenting programme and the First Step Psychology services. It is recognised that prevention services are the responsibility of all agencies, and partnerships with school nursing services, the police and social workers are working relatively well. Successful initiatives targeting hard-to-reach groups are in place including the Gateway project, which is run by community psychiatric nurses to 'signpost' people with lower-level needs to other services for additional support. Other outreach programmes include work with asylum-seekers and young Asian mothers.

34. Limited access for very disturbed children to specialist services, from within and outside the city, is of particular concern. There is no provision of 24-hour cover and children and young people have to be picked up by the stretched emergency duty social work team. There is a significant gap and lack of clarity about services for older adolescents, for example 17 year olds who are not in education are not picked up by CAMHS, and some young people who receive CAMHS services do not receive or fail to obtain the same level of service in adult mental health settings. In addition, adult services do not make explicit connections between parents with mental illness and the impact on and associated needs for their children. Children raised this point during consultation on the CAMHS strategy.

35. Early steps to implement the CAMHS strategy in relation to preventive services have been taken, but the more specialised services have yet to be proposed and resource implications have yet to be considered. This situation is also the case in services for children with LDD where long waits are experienced by service users and defined strategies or outcomes have not been identified. Children with LDD receive an adequate service from the community nursing service and parents are offered advice on care and how to access some services. Nursing support in special schools is about to change so that these schools will have dedicated nurses. Clinical psychology services for children and young people with LDD are stretched and have to operate waiting lists in order to deal with the most urgent cases.

36. Partnership working between health and social work staff for children looked after in relation to mental health services has limited effectiveness and, where this does work well, it is dependent on good working relationships rather than clear systems and protocols. Behavioural initiatives are not integrated with the mental health strategy, particularly for young people. With the exception of services for pre-school children, access to psychology and psychiatric services can be difficult and health promotion in this area is weak. The Yellow House, a small multi-agency team set up to provide health advice for looked-after children with physical and psychological needs is having some impact and it has cleared a backlog of assessments. The inspection also found that there are delays for adoption medical reports and in some instances children are subject to more than one assessment.

Staying safe

37. **The overall contribution of services in keeping children and young people safe is inadequate.** This is due to weaknesses in the council's safeguarding arrangements and the ACPC's inadequate performance. The safeguarding contribution made by other agencies for children not judged to be the most vulnerable is adequate. The local area's overall arrangements to inform children, young people and their carers about key risks to their safety and how to deal with them, and to minimise the incidence of child abuse and neglect are inadequate. The appointment of designated staff in schools and the health service has improved support to vulnerable children and young people and there are effective services delivered in the five Sure Start areas. While community safety is a clear priority for the Local Strategic Partnership and there are some effective and valued frontline services, there is insufficient focus in the partnership board on implementing the preventive strategy and developing comprehensive and timely preventive services of a consistent quality across the city.

38. Most critically, however, safeguarding is seriously weakened by the inadequate arrangements in children's social care services. The access and advice service has made some recent, but nonetheless fragile, improvement. However, as well as appropriate levels of permanent staff, including managers, it lacks clear and consistent thresholds for determining risk and the level of

assessment and service required. Similarly the quality assurance of its work is inadequate and, as a vital service for supporting the most vulnerable children and young people, it has insufficient middle and senior management focus and support. The recent re-structuring of senior posts in the local authority has potential for improvement but currently the service does not routinely provide timely assessments or family support and is characterised by being resource led and crisis driven. Awareness of and responsiveness to the effects on children of domestic violence, neglect, emotional abuse and the impact of drug and alcohol misuse is seriously impaired. Referrals such as these are not routinely and consistently responded to by the social work service, leaving some children and young people living in environments likely to be unsafe and unstable. This inconsistent and inadequate front-line service to children and their families does little to minimise the incidence of child abuse and neglect. There are similar concerns about the capacity of other fieldwork teams to deliver consistent, safe assessments, planning and service delivery, particularly where there are significant levels of unallocated work and permanent staff vacancies.

39. Arrangements to provide children and young people with a safe environment in early years services, schools and in post 16-education provision are satisfactory. Young people generally feel safe in school, reflecting the good work being done to combat bullying and tackle anti-social and violent behaviour. Young people value the support provided by the Connexions service and there is a sound ethos and culture of safeguarding young people in the youth service. However, young people find current initiatives lack sufficient impact to tackle some aspects of life in their communities. They are particularly concerned about gangs, bullies, vandalism and violence, particularly at night.

40. The collaborative arrangements between agencies to safeguard children in accordance with the requirements of current government guidance are inadequate. There is some positive single-agency practice with improved governance arrangements for safeguarding in the education and health services, and the ACPC has done some positive work in raising awareness of safeguarding. Children and young people report that they generally feel safe within school. The Conferencing and Reviewing Service now meets the national standard for completion of conferences and reviews within timescales.

41. Overall, the ACPC functions inadequately. The requirements of the VCI and the recommendations from the inspection of child protection services in Stoke-on-Trent, both published in January 2003, have not been fully implemented. As a result, some of the basic requirements for effective multi-agency collaboration are not developed or effective. The ACPC has failed to acknowledge the weakness and impact of children's social care or complete regular, thorough audit of multi-agency practice against VCI standards. There are currently no agreed and understood standards and thresholds of intervention and progress in implementing the Child Concern model and the Common Assessment Framework, and the role of the lead professional has been delayed, although some developments are now underway. The ACPC has failed to discuss or take responsibility for developing a domestic violence

strategy and action plan within its normal business over the past two years. There is little scrutiny of safeguarding performance and the specific requirement from VCI to routinely and satisfactorily audit social work case files does not happen. Consequently, compliance with procedures is largely untested and allows poor and inconsistent practice in completing risk assessments, compiling meaningful chronologies, implementing child protection plans and ensuring that those who refer concerns are routinely informed of the action taken. The scope and capacity of the ACPC Conference and Review Service to effectively quality assure multi-agency practice is underdeveloped and, for example, does not currently include scrutiny of child protection investigations not subject to initial case conferences. While all children on the child protection register had an allocated social worker at the time of this review, concerns remain about the capacity to sustain this practice.

42. Stoke-on-Trent has had a number of serious case review incidents over the past five years and although the management of these reviews has improved, there has been consistent and acknowledged failure to properly disseminate the learning from these cases as well as monitor and securely embed corrective practice across all agencies. The ACPC's training resources are inadequate for the scale and level of learning and development required. There is a lack of multi-agency commitment and responsibility towards resolving this deficit and the collective monitoring of training across the area. There is a significant deficit of training on safeguarding in the youth service and, more generally, the attendance and impact on practice of multi- and single-agency training is not routinely monitored. The ACPC currently has insufficient capacity to become an effective LCSB and implement new solutions to some of the longstanding problems identified. Although work has started on designing the constitution and infrastructure of the LCSB, little consideration has been given to the decision-making remit and governance of this board and its planning relationship to the children's strategic partnership.

43. The overall service and performance management arrangements in social care are inadequate. This is very evident in the duty and initial assessment service, but in other teams there is also an absence of agreed and understood service-wide priorities and key standards with insufficient quality assurance by managers and by frontline staff. There are inexcusable failings in basic standards that have little or nothing to do with resources. As a consequence, the level of compliance with national standards such as the Assessment Framework and 'Recording with Care' is poor, and working practices between social care and key partners in schools and primary health care are inconsistent and not secure. The social care service is not currently setting the standards or providing the leadership necessary to implement the requirements of the Children Act 2004 and the *Every Child Matters* agenda.

44. The contributions of services to ensuring looked-after children live in a safe environment and are protected from abuse and exploitation is inadequate. The high numbers of looked-after children and care proceedings are not being addressed by meaningful service and joint preventive and placement

commissioning strategies. While there is some good, though not widespread, skilful planning and outcomes for looked-after children, overall the quality of practice and outcomes is inconsistent. Placement choice, particularly for older and more disturbed children and young people, is poor with high numbers of children being placed some considerable distance outside the city. A high number of looked-after children do not have a competent and suitably qualified social worker and the statutory reviews of care plans are not always timely or of sufficient quality in engaging the young person. Private foster carers and unaccompanied asylum-seeking children are not systematically identified and are insufficiently monitored and supported contrary to the requirements of the Children Act 2004.

45. Young people voiced concern about the quality of the local residential homes in which a number feel unsafe. Similarly, concerns were raised about some foster care placements in which some children feel discriminated against and not listened to. There are substantial areas of weakness in quality standards identified in recent regulatory inspections of the council's fostering, adoption and residential care services. While the leaving-care team provides a satisfactory service there is a minority of young people who experience inadequate arrangements when leaving care and find themselves in unsuitable accommodation and at risk of criminality and anti-social behaviour.

46. The contribution of services to ensuring that children with LDD are safeguarded is inconsistent. Overall, the weakest link in provision is social care with very high thresholds for accessing the service and a significant and longstanding waiting list of children and young people that should be receiving some service but are not. These arrangements fail to provide a timely and effective response to concerns over safeguarding. Similarly the range and extent of short-break care for children and young people with LDD is limited.

Enjoying and achieving

47. **The overall contribution of services to help children and young people to enjoy and achieve is good.** There is a variable quality of provision, but in the majority of early years settings, primary and secondary schools it is at least satisfactory and often good. Parents and carers of young children receive comprehensive and impartial information on childcare and nursery provision. A new service, called 'Parent Direct' is aiming to steer all parents efficiently to the right service. Planning between the local authority services, Sure Start and private and voluntary providers is increasingly effective in ensuring that needs are met in the local neighbourhood. In Blurton, for example, the health and education services work well together to promote the well-being of young families and identify early any concerns in the children's health and emotional development. Schools provide a good range of opportunities for parents and carers to contribute to the welfare needs of their child and engage in their educational progress.

48. The majority of parents and carers have good access to childcare and early years education, and plans are in place to increase the number of places where provision is still insufficient. The quality of education in early years is satisfactory and settings with weaknesses are challenged to improve. Early years staff have access to good training to improve their general expertise and specific subject knowledge. Childminders are encouraged to join networks to share effective practice and Children's Centres work with providers and parents to tackle severe delay in language and emotional development. In disadvantaged areas, for example, the 'Stoke Speaks Out' project is an example of a worthwhile project aiming to address incidence of poor language development. Despite this amount of effort and investment, the authority recognises that much remains to be done because many children have very low standards when they first receive early years provision.

49. Schools and the local authority place a high level of importance on the welfare and achievement of children and young people. The education service provides very good support and challenge to schools. The local authority is well aware of schools where aspects of provision are a cause for concern and self-evaluation is promoted very effectively. The authority provides a good level of support to those schools causing them concern. A range of successful strategies is used, such as the appointment of experienced headteachers to act as peer mentors and the rigorous procedures for reviewing progress made against key actions. The quality assurance of the work of consultants, the expertise of the school development advisers and the range of the data provided to schools are significant strengths.

50. Progress in raising the overall attainment of all children and young people has been uneven. Secondary pupils do well although results remain below the national average. However, the most recent provisional examination results for 2005 indicate the best ever figure in the percentage of pupils achieving five GCSE at grades A*–C. The rate of improvement for young people aged 14 to 16 compares well with that of statistical neighbours. The number of young people continuing their education or training post-16 remains below the national average. Successful action has been taken to improve the attainment of Pakistani children. Overall, they make better progress than white British young people and the gap in attainment at GCSE is now much reduced. The attainment of mixed-heritage pupils continues to be a concern. Children in primary schools achieve less well than pupils in similar areas and significantly less well than across the country. The low attainment on entry into school, the high level of mobility of pupils between schools in the city and the large-scale reorganisation and building programmes over recent years are some of the factors that have slowed the progress in primary schools. Almost all primary schools receiving additional support, either through national strategies or local programmes, are improving at a faster rate than those without support. The authority provides primary schools with a wide range of useful data to target underachieving groups. These positive developments have yet to have a noticeable impact on overall results.

51. Arrangement for admission at different types of schools are clearly set out and published in good time. There are sufficient, suitable and accessible school places. Current arrangements ensure that most looked-after children and children with LDD attend their local school, but too many are still being placed outside the authority, making the monitoring of their progress costly and inconsistent. A few children are placed in a special school where staff experience great difficulty in coping with their severe and complex needs. The council recognises that provision to address the needs of children with ASD is inadequate at present.

52. Attendance has improved and is now similar to levels found nationally in primary and secondary schools. The great majority of young people confirm that they enjoy school and are encouraged to attend. The education welfare service and schools promote the importance of regular attendance. Most schools, especially those involved in the Behaviour Improvement Programme (BIP), receive timely support to deal with behavioural incidents. However, demand across the city is, at times, quite high and the capacity of the service to respond is stretched. The lack of availability of educational psychologists is an issue that is being addressed. A successful agreement across all schools has significantly reduced the number of permanent exclusions, now down to a handful, but the rate of fixed-term exclusions remains high.

53. The provision for teenage mothers and young people who have medical needs is good. The authority knows about their achievement and provides useful education and personal advice. The number of children educated at home is low and their welfare is monitored sensitively. However, there is limited knowledge about their educational progress. There is a lack of knowledge about the educational progress of young carers.

54. Most young people are positive about findings things to do in their local area. Schools provide a good range of accessible and challenging opportunities such as extra-curricular music and sport. The authority attempts to provide leisure activities which match young people's interests, such as access to free boxing classes and the skate park. However, take-up is not yet monitored across the city and it is therefore difficult to ascertain whether provision reflects accurately the needs and wishes of children and young people.

55. The attendance of most children and young people who are looked after is good and their achievement compares well with that of similar authorities and the average for England. The council is aware of the need to consolidate the outcomes of all looked-after children because attendance dropped significantly in 2004–05, as did the results at GCSE which were well below results for England and similar authorities. The attendance of looked-after children from council residential children's homes is also unsatisfactory. Some individual children and young people achieve excellent results and most case files show a good account of educational progress. Award evenings celebrate achievement and young people report that these are valued and enjoyable. Opportunities are provided to ensure full access to a good range of cultural and recreational

experiences, including summer schools to prepare young people for transfer from their primary to secondary school. Despite these strengths, some young people report recent difficulties at school, not all have a personal educational plan and some schools have had poor access to a social worker when needed. The work of Connexions personal advisers is robust and young people acknowledge that they receive helpful guidance at key transition points in their life.

56. Educational provision for children and young people with LDD is good. Funding is directed towards early years and primary education to improve early identification. The insufficient number of educational psychologists, however, continues to impede this process. Statutory assessment procedures work well. Parents contribute fully and are supported during the assessment of their child. The authority provides useful information about special educational needs on its website and pupils generally receive good support at key transition points from primary to secondary schools and to further education if required. Pupils with special educational needs achieve well overall and the authority takes effective action where weaknesses have been identified. The annual moderation exercise supports schools effectively in evaluating the quality of provision. However, currently, this exercise places insufficient emphasis on the impact on the educational progress of pupils.

Making a positive contribution

57. **The overall contribution of services to help children and young people make a positive contribution to society is good.** There is good support for children and young people to develop socially and emotionally. The Sure Start children's centre in Blurton provides well-managed multi-agency services for young children and their families. Plans are well in hand to extend the provision across the city. A substantial number of children and their families already benefit from early education and family support services which include initiatives such as Positive Parenting Programmes and the First Steps Psychological Services. The popular and exemplary Blurton fathers' group run by volunteers offers young fathers help with parenting skills, peer support and a good range of valuable activities such as growing vegetables for the Sure Start shop. In primary schools nurture groups of between 8 and 12 children offer good opportunities for social learning and language development for children who are having difficulties making progress in their mainstream classes. Children attending these groups become more confident and better motivated learners. The youth service helps young people in their social and emotional development through effective youth work sessions.

58. Most children and young people are supported well in times of change and challenge. In education, well-established procedures are in place to ensure a smooth transition between phases and establishments. Information about children is shared effectively and there is good liaison between staff. Teachers in secondary schools get to know their prospective pupils in primary school before they move and make sure that there is continuity in what they learn.

Connexions personal advisers work well with young people in schools in partnership with teachers and other education professionals. Summer workshops help bridge the gap between key stages and school and college. Learning mentors, educational welfare officers and family support workers based in schools are available to help those in need.

59. The leaving-care team provides satisfactory help and advice for looked-after children; an attractive and informative leaflet sets out the options and support available for them. There is a designated teacher in each school for looked-after children, but they are not always allocated a qualified social worker. Partnerships such as those with Connexions and Sure Start benefit children and young people with LDD at times of change. While there is generally well-planned support in schools for them, the transition within social care from child to adult services is not managed well enough.

60. Participation by young people in decision-making is good. Partners in the local area have a strong commitment to consultation with children and young people. There are clear structures in place for their active involvement. Most schools have a school council and young people report that their views are heard. Through the Youth Participation Strategy, a structure of elected youth forums has been put in place which gives young people a link to the city council and the Local Strategic Partnership. Earlier in the year, some 6,300 young people were involved in elections to the city-wide youth forum, RESPECT. The results were celebrated at a high-profile event led by the city's mayor. Young people express their views through neighbourhood and area forums. They have good opportunities to influence Connexions and health services. The views of younger children are taken into account in relevant decisions and developments such as the community play plans and design of play spaces at Meir and Shelton Parks. While there are good examples of the influence of young people, routine and systematic consideration of their views is not yet fully in place across services.

61. Looked-after children and those with LDD are supported to help them participate. However, in 2003-04 only 62% of looked-after children contributed to a review of their care. This figure is below the national average.

62. There is a wide range of projects, initiatives and services to reduce anti-social behaviour and prevent offending which are beginning to show results. The Behaviour Education Support Team offers good support in schools to reduce anti-social behaviour. Educational welfare officers and family support teams work well with children and families. The draft anti-bullying policy builds on existing good practice. There are well-received programmes to combat bullying in nursery and primary schools. Procedures to reduce bullying in the council's residential care homes are not always effective. Youth workers based in most secondary schools provide well-considered programmes to develop positive behaviour. Their work with young people in local hot spots has resulted in a reduction in complaints about anti-social behaviour. The authority offers a good range of sporting and cultural activities that promote positive behaviour.

Looked-after children value highly 'Move Together', an annual international exchange visit.

63. There has been a substantial reduction in the proportion of young people re-offending. However the number of first-time offenders rose between April and September 2004 in contrast with a decline in the national figure. Although the proportion of looked-after children receiving a warning, reprimand or conviction has declined over the past three years, the figure remains above the national average. A key aim of the YOS is to improve the proportion of young offenders who take up full-time education, employment or training. At 78.6% between April and September 2004, the figure is above the national average of 74% but below the target of 90%. The multi-agency Youth Inclusion and Support Panel supports young people at risk of offending through a variety of multi-agency activities and reports a substantial reduction in anti-social behaviour in targeted areas. The YOS is effective and works well in partnership, but there is some lack of clarity about the roles and responsibilities of the various agencies working with targeted groups. There is insufficient strategic integration and co-ordination of the many initiatives to help children and young people make a positive contribution with the risk of duplication and ineffective targeting of resources.

Achieving economic well-being

64. **The overall contribution of services to helping children and young people achieve economic well-being is adequate.** Childcare is accessible to most parents. An all-year service extends provision to include a mobile crèche, full day care and wraparound care, although parents report that there is insufficient wraparound care to meet current demand. Parents, carers and professional staff have current information about the range of facilities and opportunities available in the area thanks to good team working among key agencies. Support for BME families by the educational attainment support group, TALEEM, is enabling parents to make better progress in their careers.

65. Parents involved in Sure Start are keen to volunteer and many successfully use this route as a way to employment and training. Stoke-on-Trent College and Staffordshire Adult and Community Learning Service have established collaborative arrangements with schools to provide opportunities for parents to play and learn with their children. This has been particularly successful in the Sure Start area.

66. Progress has been made in developing a wider range of options for young people aged 14 to 19. The curriculum includes more vocational and work-based learning leading to a broader curriculum offer. Strategic support and direction for these developments is good and most key partners are working well together. The development of a city-wide consortium that includes all secondary schools, the college and work-based learning providers, indicates good collaborative working. A recent mapping exercise has identified opportunities for rationalising the curriculum and some progress has been made

towards the sharing of curricula across schools. In 2005 at least 40 young people in the northern area of the city are accessing vocational learning away from their school. However, too little progress has been made in developing this across the rest of the area. Plans are in place to duplicate the progress made in the northern cluster for September 2006. Funding from Building Schools for the Future, Aim Higher, the Single Regeneration Budget and the European Social Fund has been used to develop vocational learning and to further collaborative working.

67. Children and young people are given satisfactory help and support to progress in education and to prepare for working life. The demand for work-related learning and work experience has increased significantly and the Education Business Partnership has been effective in identifying appropriate experiences for most Key Stage 4 pupils. However, a small number of young people are engaged in work experience that is not related to their career aspirations, vocational learning or their broader interests. The Increased Flexibility Programme (IFP) and the School Links Programme provide over 1,000 Key Stage 4 students with useful opportunities to participate in vocational learning and work-related learning. In addition, over 200 Key Stage 4 students are participating in student apprenticeships. The youth service, in collaboration with the Youth Offending Team and the Connexions service, has established some well-focused initiatives to help young people develop personal and work-related skills and confidence. Despite the effective use of programmes such as Millennium Volunteers, Prince's Trust and Entry to Employment, opportunities for pre-vocational learning post-16 are limited.

68. The Connexions service provides good impartial advice and guidance for young people, in particular for targeted groups such as young offenders and homeless young people. The service has been effective in deploying personal advisers to specific services such as housing and the Youth Offending Team. It has also been effective in recruiting personal advisers with specific skills and experience in areas such as benefits. Schools and young people have commented favourably on this available knowledge. Young people with LDD and looked-after children receive effective and appropriate support at transition and are involved in this planning. Transitions are generally well planned and managed through a multi-agency approach. Responsibility for the monitoring of transition plans is unclear and some young people's plans are not reviewed. Young adults with disabilities have good access to independent living funds and direct payments, although parents and children have more difficulty in accessing direct payments.

69. Progression to education post-16 is improving, but remains below the national average, and too many young people are leaving their initial choice of post-compulsory education at 17. Success rates in 2004 in the local further education colleges were at least 10% below the national average at level 3 in some curriculum areas. Data for 2005 indicates that this is improving. Achievement rates in work-based learning are in line with national averages, although retention rates, while improving, remain below national averages.

While the numbers of young people progressing to work-based learning are satisfactory, too few Black and minority ethnic young people are participating. The Connexions service has worked effectively with local schools, colleges and work-based learning providers to reduce significantly the number of young people post-16 who are not in education, employment or training (NEET). The numbers of young people who were NEET or in the unknown category in 2004 remained above local and national targets. While below the national average, the percentage of looked-after children who are NEET is high at 43% and the number of young mothers in education training or employment is currently only 18%.

70. A new, city-wide careers event, SCORE, involving schools, colleges, work-based learning providers and employers, provides comprehensive information to young people and their parents on 14–19 learning opportunities in Stoke and the surrounding areas. Careers information has been re-written to inform young people of possible career pathways, rather than focusing specifically on qualifications. Young people are encouraged to consider mixing academic and vocational learning in Years 10 to 13 and are provided with useful information on the benefits of this. Children at risk of dropping out of education have the opportunity to participate in six-week summer schools. In addition, young people wishing to progress to higher education have the opportunity to participate in learning at the local university.

71. The numbers of homeless young people are rising and charities, in particular the YMCA, report that there is insufficient accommodation to meet the growing demand for housing from young people. While the length of stay in bed and breakfast accommodation is lower than the national average, at six weeks, there is a shortage of crisis housing for young people, most specifically for young vulnerable people who are least able to sustain a tenancy. Developing partnership working is beginning to focus on some housing needs. For example, the voluntary sector is providing specialist advice and direct support to some young people such as rough sleepers and young parents, and ARCH, a local voluntary sector group, is currently working with the Connexions service to tackle the growing issue of homelessness among young people. Successful initiatives include the development of supported housing for teenage parents and the improvement of the housing stock and the local environment in the Sure Start area of Blurton.

Service management

72. **Overall, the management of services for children and young people in Stoke-on-Trent is adequate.** Overall, the capacity for children's services to improve is adequate but there are serious weaknesses in the capacity to improve of the council's social care services. Ambition for children and their families is clear with a strong political and partnership commitment. Partnerships are delivering some effective services including some where staff are co-located, but these are insufficiently coordinated or prioritised. A CYPSP board has been established, but governance arrangements terms of reference

and its relationship to the planned safeguarding board, strategy groups and other subgroups are unclear. Resource management within the council is variable. There are good services in education, but serious capacity problems in social care which result in inadequate provision putting vulnerable children at risk. These issues have only recently been fully recognised and are beginning to be addressed. Future developments are threatened by financial limitations.

73. Ambition for children and families in the area is good with a clear shared understanding among partners. There is a strong political and partnership commitment to children and young people's services reflected in the community plan and the council's corporate plan where delivering better outcomes for children and young people is one of five priorities. Work on a CYPP is underway. The council intends using this JAR to assist in the evaluation process for creating the CYPP.

74. Partnership working demonstrates shared understanding of needs by agencies and their staff, particularly for some vulnerable groups, for example the young people's drug education project. Detailed analyses of need have been completed which include the views of some children and young people taken from previous consultations. The lack of systematic continuing involvement is a missed opportunity to review and inform services. Equalities impact assessments are informing service plans, such as the anti-bullying and anti-racist work in schools.

75. Prioritisation is adequate in the area. Children and young people are a high strategic priority. Some effective preventive services are in place targeting vulnerable groups, for example drug services for young people. These services have been mapped, but have not been coordinated or prioritised by the CYPSP, leading to potential gaps and duplication.

76. Priorities are clear in education where significant external investment has been secured to rebuild or refurbish every school in Stoke, resulting in improved staff, parent and pupil morale. Opportunities have been realised to link this to the developing integrated children's services agenda such as children's centres on school sites. Health has only recently been prioritised within children's services, for example recognising the need to improve children's mental health services. Prioritisation and leadership are weak in children's social care with key objectives not being linked to robust or realistic action plans. The failure to reduce the number of children in care absorbs significant staff and financial resources. Allied to financial difficulties in health, this seriously impedes the development of preventive services.

77. The area has adequate capacity overall to deliver services. However, capacity in social care is seriously inadequate at all levels which has only recently been fully recognised and is only beginning to be addressed.

78. Partners collaborate well and are informed by strong community involvement in some projects to maximise services to vulnerable children and adults, for example the redeployment of health visitors in Blurton. However,

this is not universal and the voluntary sector is underused and not properly understood by the main agencies. Although the CYPSP board is established, governance arrangements for the CYPSP and its relationship with other partnerships are not yet established. Similarly, the arrangements for the lead member for children's services are undeveloped.

79. There is good leadership throughout education, including the youth service and early years, and widespread confidence in the former director of education as the new director of children's services. The embryonic children's department also has a recently appointed assistant director for children's social care who will focus on improving practice in front-line services. The enduring high numbers of permanent staff vacancies in social care are partially addressed by agency staff but distract managers at all levels from core tasks. The expensive use of temporary agency staff seriously impacts on consistency of service delivery and staff morale. Longstanding undeveloped human resources and workforce development strategies have resulted in staff being unsupported and inadequately trained.

80. Agencies have protected children's social care by holding back on referring children which, without clearly established thresholds for referral and intervention, results in risks to children not being properly assessed. The ACPC has failed to provide the necessary leadership to consider and act on these issues. Opportunities have been missed to increase capacity, for example the council has only recently used the externally funded temporary business support team in children's services and the development of joint commissioning has been slow and is still limited. The capacity shortfall in social care has been inadequately addressed, leaving services below the required minimum standards.

81. Insufficient strategic focus and the slow development of joint commissioning have delayed the integration of services, for example to children and young people with LDD. Joint commissioning has not been used to help reduce the numbers of out-of-city placements for children in care or developed a placement strategy. There are some informal shared arrangements for particular projects, but few formal or pooled budgets.

82. Overall resources are managed adequately and the value for money of children's services overall is adequate. Although the council is a low-spending authority compared with similar councils, it funds social care above its formula spending share and education in line with it. Education finance is well managed but in children's social care the out-of-agency budget for looked-after children has not been brought under control. A commitment to ensure an adequate budget for children's services depends upon efficiency savings and external funding to provide a breathing space. However, the social care overspend includes considerable financial commitments. The planned efficiency savings are ambitious which, with the budget overspend, substantially threaten financial capacity beyond the short term.

83. Work and progress on a single information sharing and tracking system was interrupted by government considering a national system but this has now resumed. Although a piloting programme is underway, plans to introduce a child concern model have been delayed which compounds uncertainties over thresholds for risk and referral and access to services.

84. Performance management overall is adequate. Performance management in education is good but it is weak in social care. Agencies have their own systems and share data which, with local knowledge, is used to plan services. Performance information is not yet used jointly to manage services. However, 25 key performance indicators have been identified for the strategic partnership to use. A children's overview and scrutiny commission has just been formed from previously separate education, social care and youth commissions.

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

1. There is a shared ambition for children and families in the area which is reflected in the strong political and partnership commitment to children and young people's services in the community plan and the council's corporate plan. There is strong commitment to the children's strategic partnership, a director of children's services has recently been appointed and the CYPP is underway. Overall outcomes for children and young people in Stoke are adequate, capacity overall for improvement is adequate, but there are serious weaknesses in the capacity to improve of the council's social care services.

2. Children and young people are generally less healthy than those in other similar areas of the country and this is reflected in a number of key measures. Despite this, there is evidence of good health advice, information and support for children and young people, particularly in good collaborative working in Sure Start areas. Similarly there is evidence of good joint partnership working on health education issues such as substance misuse and teenage pregnancy. However, progress and coordination in other areas such as some aspects of CAMHS and joint services for children with LDD require significant development.

3. Although most children and young people surveyed reported feeling safe in school, they expressed significant anxiety about bullying, violence and gangs outside school and did not feel that the current community safety measures effectively addressed these problems. The council's children's social care safeguarding arrangements were found to be inadequate and have been so for some time. Safeguarding arrangements were better among other agencies, although this area was judged inadequate overall. Too many children were looked after and too many were placed outside the city. Persistent failure to address social worker recruitment, retention, and learning and development is a key aspect of a general history of ineffective leadership and performance management which has contributed to the current position. There was evidence that this was now finally recognised, but there was no significant evidence of recovery and financial commitment to resolve these issues.

4. Overall, children and young people achieve adequately. There is a good range of early years childcare and education provision. Many children begin primary school from a very low baseline and this requires further improvement. Progress in raising educational attainment of all children and young people remains uneven. Children in primary schools achieve less well than those in similar areas across the country, although secondary school pupils achieve as well as in comparator areas. Looked-after children and children with LDD achieve satisfactorily. The education service has been successful in attracting external investment to rebuild or refurbish its schools and is well led and managed.

5. Children and young people have good opportunities to take decisions and assume responsibility, and many make a positive contribution to their

communities. There are good opportunities for social learning as well as a range of sports and cultural activities. Anti-social behaviour caused by young people is a widely perceived problem within the city. Youth offending statistics are above average although the Youth Offending Service (YOS) is working well to address this. Further work is needed to coordinate action across agencies.

6. Some young people are able to achieve economic well-being. Most young people are able to access education and training opportunities to meet their needs, although provision for a significant number of young people below the level of entry to employment requires development. Achievement rates post-16 years are below the national average. Connexions offers a robust advice, support and guidance service though many young people leave their first further education choice within the first year. There are high rates of unemployment for young people under 25 years. Youth homelessness is high and the availability of suitable and affordable accommodation is low.

Annex B: Full recommendations for children's social care

Recommendations

For immediate action

1. The legal requirements of children's social care and satisfactory baseline social care practice must be met and fully embedded as a priority before the other responsibilities of the *Every Child Matters* agenda.

2. To achieve this, the following key children's social care management actions are recommended:

- provide a satisfactory and consistent level of managerial support to social care staff and ensure the assistant director and the management team are able to focus on key priorities
- increase the number of permanent qualified social workers and reduce the current dependence on temporary staff
- identify and properly invest in the training and development needs of social care staff
- establish, implement and promote clearly the thresholds for risk and referral and access to social care services
- reduce the number of looked-after children and dependence on out-of-city placements for them
- address promptly and fully the substantial areas of weakness in quality standards identified in recent regulatory inspections of fostering, adoption and residential care
- ensure all looked-after children have a competent and suitably qualified worker
- review and strengthen immediately the capacity to effectively safeguard and provide satisfactory care and support for children with LDD
- put in place satisfactory practice around assessment, planning and review for all children in need and those looked after, and effectively quality assure this as part of performance management
- strengthen arrangements to identify, monitor and support private foster carers and unaccompanied asylum-seeking children so that they comply with the Children Act 2004.

3. The council should ensure that the quality of services to children and young people is enabled by clarifying:

- the governance arrangements for the CYPSP board
- the governance arrangements for the LCSB
- the support arrangements for the lead member for children's services

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- the connective and governance arrangements of the CYPSPB and the LCSB with the Local Strategic Partnership and local area planning structures.
4. The ACPC and subsequently the LCSB should ensure that:
- clear and effective leadership is provided to address each of the concerns raised in this report under 'Staying safe'
 - all the outstanding recommendations from VCI and the SSI inspection of January 2003 are implemented and their effectiveness monitored
 - sufficient capacity and resources are available to provide satisfactory levels of multi-agency training and coordination
 - the ACPC conference and Review Service should be reviewed and strengthened to improve and expand the quality assurance of multi-agency safeguarding practice, including services to children not on the child protection register
 - all children on the child protection register have an active qualified social worker at all times.