

# Joint area review

**Middlesbrough 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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# Contents

<b>Introduction</b>	<b>2</b>
<b>Context</b>	<b>2</b>
<b>Main findings</b>	<b>3</b>
<b>Grades</b>	<b>5</b>
<b>Recommendations</b>	<b>5</b>
<b>Areas for investigation through fieldwork during the joint area review</b>	
1. Safeguarding	6
2. Looked after children and young people	10
3. Children and young people with learning difficulties and/or disabilities	13
4. Additional investigations	16
5. Service management	21
6. Capacity to improve	21
<b>Annex A: The APA letter</b>	<b>25</b>
<b>Annex B: Children and young people's section of the corporate assessment report</b>	<b>26</b>
<b>Annex C: Summary of joint area review and annual performance assessment arrangements</b>	<b>28</b>

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## Introduction

1. The 2007 annual performance assessment (APA) for Middlesbrough judged the council's children's services as good and its capacity to improve as good.
2. This report assesses the contribution of local services in ensuring the following for 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 following investigations were also carried out:
  - the impact of the partners' strategy in reducing the number of young people not in employment, education or training (NEET), with particular reference to vulnerable groups
  - the contribution of services to preventing substance misuse and improving outcomes for those currently misusing, with particular reference to vulnerable groups.

## Context

4. Middlesbrough is in the centre of the Tees Valley in the North East of England. It is the most densely populated borough in the region. Middlesbrough is characterised by significant levels of deprivation. Overall, Middlesbrough ranks as the ninth most deprived community out of 254 districts in England. Fifty-seven per cent of the population live within the most disadvantaged wards in the country. The level of unemployment is more than twice the national average. With a population of 138,400, Middlesbrough is one of the smaller unitary councils in England. Black and minority ethnic (BME) groups make up 7.5% of the community. Whilst this is the largest concentration of BME groups in the Tees Valley area, it is below the national average of 10%.
5. Pre-16 education is provided through: 30 registered private and voluntary early years providers, 142 registered childminders and eight children's centres. There are 42 primary schools, nine secondary schools, of which three are city academies, four special schools and four pupil referral units.
6. Post-16 education and training is provided by: one further education college, a college of art and design, one sixth form and through two of the city academies. There are 30 work-based learning providers and 283 Entry to Employment places in the area.

7. Adult and community learning, including family learning, is provided by Middlesbrough Council through the Children, Families and Learning Department (CFLD).

8. Primary care is provided by Middlesbrough Primary Care Trust (PCT) and Redcar and Cleveland PCT. South Tees Hospitals NHS Trust is the main provider of children's acute services to Middlesbrough. The main hospitals in the trust are the James Cook University Hospital, Middlesbrough, and the Friarage Hospital, Northallerton. Tees, Esk and Wear Valley NHS Trust is the main provider of children's mental health services to Middlesbrough.

9. Children's social care services are delivered through 96 foster carers, three residential care homes operated by Five Rivers and 11 field social work teams.

10. Services to children and young people who are at risk of offending or have offended are provided through South Tees youth offending service.

11. The CFLD has recently appointed a new Director of Children's Services and a Deputy Director for Intervention and Safeguarding. The Director of Public Health is a joint appointment with the PCT. The Assistant Director for Inclusion and Achievement is covered by an interim appointment and the Assistant Director for Organisational Development position remains vacant.

12. The Children's Trust was formed in 2007 and reports to the Local Strategic Partnership. It is chaired by the Executive Director of the Children, Families and Learning. Trust arrangements include five themed sub-groups focusing on the five Every Child Matters themes. Additional sub-groups focus on communication, engaging children and young people, workforce development and joint commissioning. The voluntary and community sector is represented at all levels of the trust's arrangements. The joint Local Safeguarding Children's Board (LSCB) covers the areas of Middlesbrough and Redcar and Cleveland.

13. The local council is led by an elected Mayor.

## **Main findings**

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

- There are effective multi-agency partnerships and a strong commitment to safeguarding across children's services. Good preventative services and the development of locality working are improving outcomes for children. There are inconsistencies in the quality of some written assessments and reports which do not accurately reflect the quality of the work being undertaken. In some cases the application of thresholds between children in need and those at risk results in delay before effective action is taken. Safe recruitment and selection practices are in place, however greater rigour in auditing the thoroughness of recruitment and selection

procedures in outsourced provision is needed to achieve best practice.

- Looked after children live in stable placements that are well matched to their needs, with good support from other agencies. The council rightly prioritises placement stability for looked after children; however, numbers of Middlesbrough foster carers have fallen so too many children are being placed with costly independent carers outside Middlesbrough. School attendance is improving but the attainment of children looked after at Key Stage 4 is too low. Fixed-term exclusions are high. Increasing numbers of older children are helped to continue in education, employment or training and to move successfully into independence. There is a lack of an overall strategy for looked after children with clear priorities and actions.
- The local council works effectively with partners to meet the needs of children and young people with learning difficulties and/or disabilities and improve outcomes for them. Families benefit from good multi-agency support. Children and young people are involved well in planning to meet their own needs. There is a lack of an overarching strategy for children and young people with learning difficulties and/or disabilities.
- The council achieved its 2010 NEET target well ahead of time but rates remain 4% above the national average overall. There is a wide range of very effective preventative measures which support at risk young people to remain in learning; this has been particularly successful in reducing 16 year old young people who are NEET. However, NEET rates for young people aged 17–19 and some vulnerable groups remain very high. Increasing numbers of older looked after children are helped to continue in education, employment or training
- Good multi-agency action has been taken to address substance misuse. Some very good services deliver very good outcomes, particularly for children, young people and families with high levels of need. There is good assessment of the effectiveness of individual services but there is a lack of overall evaluation of provision across the area.
- Ambitions for raising attainment and aspirations are an integral part of the transformation agenda for the area but there is insufficient emphasis on some vulnerable groups. There is still much to do if these ambitions are to be achieved. Recent progress is promising though and there is good capacity to improve to address a very challenging agenda for the area.

## 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>2</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
- ensure greater rigour in auditing the thoroughness of recruitment and selection procedures in outsourced provision.

The local authority should:

- implement the strategy to increase numbers of Middlesbrough foster carers.

### For action over the next six months

The local authority should:

- improve the quality and consistency of written assessments and reports
- improve the application of thresholds between children in need and children at risk
- improve the educational attainment of looked after children at Key Stage 4 and reduce fixed-term exclusions.

The partnership should:

- develop multi-agency strategies and action plans for children with learning difficulties and/or disabilities and looked after children
- reduce the numbers of young people who are NEET further, in particular the disproportionate number of young people from disadvantaged groups and communities in the NEET category.

### **For action in the longer term**

The partnership should:

- develop and implement plans to achieve step change in key areas of underperformance
- evaluate the outcomes overall for children and young people who misuse substances.

## **Equality and diversity**

15. Addressing inequalities is a high priority for the council and its partners. Agencies work well together to narrow the gap between those who achieve well and thrive and those who are vulnerable to poor outcomes. The CFLD has a thorough diversity action plan and there are numerous examples of the way in which the area is responding well to diverse needs, for example through the Welcome Project for refugee and asylum-seeking families, the Minority Inclusion project and Connexions surgery held at a Mosque on a weekly basis. Support for children and young people from the Traveller community is delivered in partnership with two neighbouring boroughs.

16. The council has achieved Level 2 of five of the equality standard. Assessment for Level 3 is shortly to take place. Equality Impact Assessments are in place. As a result, services take into account the needs of children from minority groups. A range of effective services are playing a vital role in enabling children and young people to have a voice in the design and delivery of services and in promoting inclusion.

## **Safeguarding**



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



<b>Major strengths</b>	<b>Important weaknesses</b>
<p>Well-managed, multi-agency protection plans for children identified as at risk of significant harm.</p> <p>Good support and advice to families whose children are involved in anti-social behaviour and imaginative work to reduce the risks presented by fire.</p> <p>Very good multi-agency work to reduce teenage pregnancy and protect vulnerable babies.</p> <p>Road safety has improved and reduced the number of children killed or seriously injured.</p>	<p>The quality and consistency of written assessments and reports.</p> <p>The application of thresholds between children in need and children at risk.</p> <p>Auditing of recruitment and selection procedures in outsourced provision.</p>

18. There are high levels of deprivation and need, including significant levels of domestic violence, crime and substance misuse which result in complex cases. Children and young people at risk of significant harm are promptly identified and protected. The 2007 APA judged staying safe as good with low numbers of re-referrals and a high percentage of referrals leading to initial assessments, reflecting the level of need. The threshold between the children in need and child protection systems was identified as an area for development.

19. Children and their families are informed effectively about key risks to their safety and are discouraged from smoking, drinking and anti-social behaviour through, for example, parenting courses delivered by the Parents in Partnership Trust. These are highly valued by parents, some of whom go on to train as peer supporters. The fire service has developed an imaginative campaign to raise awareness and reduce fire risk, with action to prevent fires in litter bins and free exchange of deep fat fryers.

20. Children report feeling safe and their concerns about bullying have reduced. The council and its partners have taken action to address specific areas of concern raised by children such as bullying in the playground or on school buses. The council conducts regular bullying surveys, and during 2007–08 there was an 11% decrease amongst 7–10 years olds who reported being bullied. Overall, 92% of children report that they feel safe at school. Whilst increasing numbers of young people feel safe in their local community and travelling to school, safety in the community remains an important issue for them. Very good progress has been made in the reduction of deaths and injuries from road traffic accidents. The 2010 targets have already been exceeded. There is good targeting of services in this area, for example road safety work with newly arrived members of BME communities who are unfamiliar with local traffic conditions.

21. There has been an excellent reduction in teenage conceptions. The latest unvalidated data for under-18 conceptions show a marked improvement on previous years; in 2007, Middlesbrough had the second lowest rate for conceptions per 1,000 women aged 15–17 amongst neighbouring authorities. Reductions in the rate of teenage conceptions are slightly better than the national rate and almost twice that of similar areas. There is good support for vulnerable pregnant women, including provision of effective multi-agency support following the birth.

22. Good multi-agency work is reducing levels of risk for children who are in need of protection. There is a recently established specialist enquiry and investigation duty team which is developing good working relationships with the police and providing good consultation and advice for professionals in other agencies.

23. Complex cases and children at risk of significant harm are well managed, with robust multi-agency protection plans. However, the quality of reports and assessments, including initial and core assessments and reports for child protection conferences, is variable and does not accurately reflect the quality of work being undertaken with children and families. There are weaknesses in the application of thresholds between children in need and children at risk, for example in some neglect cases there is too long a delay before effective intervention takes place. The council is reviewing thresholds between children in need and child protection and have reviewed the implementation of the Common Assessment Framework (CAF). Locality-based teams are being established to strengthen multi-agency working and to ensure that the needs of children are identified at an earlier stage.

24. All children who are the subject of a child protection plan are allocated to a qualified social worker and child protection case conferences are held within timescales. However, there is limited evidence that the wishes and feelings of children who are subject to a child protection plan are gathered or recorded. Numbers of children subject to a child protection plan have been higher than similar councils and this remains the case, although during 2006–07 there was a decrease of almost 5%. While to some extent, high numbers are reflective of local need and good inter-agency awareness of safeguarding issues, the council acknowledges that numbers remain too high and is taking action to address this. For example, it has been identified that a number of children who are looked after are also subject to child protection plans. Re-registration rates are improving, with the council's own data for the current year showing a very good reduction from 20.5 to 13%.

25. A high percentage of children are subject to a child protection plan because of the prevalence of domestic violence. Domestic violence incidents involving children are referred promptly by the police, and partners provide excellent advice and guidance services. There is an effective multi-agency panel coordinating the management of these cases and specialist domestic violence courts are in place.

26. Preventative and family support services have been successfully developed. Eight children's centres provide an effective network for families in greatest need and there are some very good examples of services that support parents. The CAF has been implemented and between April 2007 and February 2008 led to the provision of support plans for 113 children. Barnardo's Missing from Home service has effectively utilised CAF assessments in incidents of children missing, securing their safety in the process. However, difficulties in the early stages of implementation have resulted in reluctance from some agencies to engage in the CAF process. This is being addressed by a more locality-based approach which is increasing confidence across agencies and resulting in more appropriate referrals of children in need.

27. The integrated children's system is being implemented. While this is not yet providing managers with the performance data they need, manual systems are being used to track progress at a team level to improve performance. Training and support to improve skills and confidence is being provided. Case recording and auditing of cases is timely and overall of a satisfactory standard. Most managers are knowledgeable about the detail of individual cases and are setting appropriate priorities for action.

28. Action to keep children and young people safe in the youth offending service is satisfactory overall. Vulnerability assessments and action plans are completed in most cases. Staff undergo appropriate safeguarding training and receive good guidance on safeguarding matters. However, the accommodation needs of young people who have committed offences are not always appropriately met, with some bed and breakfast accommodation still being provided.

29. The joint LSCB with Redcar and Cleveland has satisfactorily established itself with good engagement and attendance from key agencies. The establishment of a joint board has achieved economies in the use of resources. There has been active promotion and awareness-raising about safeguarding issues through the website and regular newsletters. The LSCB has provided a range of highly valued safeguarding training which has also addressed the needs of experienced practitioners. The council has contributed to three serious case reviews and the LSCB has good systems to ensure that recommendations are implemented. It is now developing its wider safeguarding agenda with clear plans for future work, including a comprehensive evaluation of inter-agency performance; further development of its scrutiny role and an audit of safe recruitment. Processes to respond to sudden unexpected deaths have been developed and the Child Death Review Panel is due to be formally established in summer 2008.

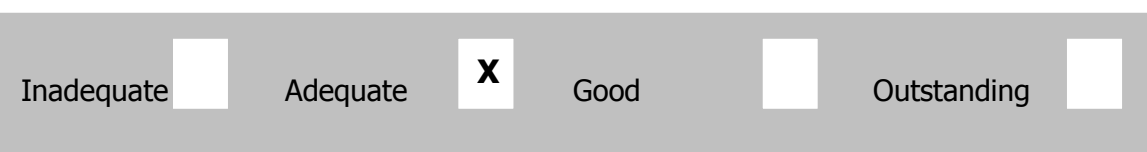
30. Safe recruitment and selection practices are adequate. It is the council's policy to undertake Criminal Record Bureau checks on all staff employed prior to 2002 on a prioritised programme. The council has conducted an audit to ensure that safe recruitment and selection practice is in place and is now ensuring that its central systems comprehensively capture this information. In

services commissioned by the council, management oversight of the rigour of safe recruitment and selection procedures is satisfactory and compatible with practice in other areas. However, greater rigour is needed in auditing the thoroughness of recruitment and selection procedures of providers to secure best practice.

31. A regional awareness campaign to identify children who are privately fostered resulted in no referrals to Middlesbrough. The council's website contains information on the legislation and a new campaign is planned to increase awareness of private fostering and improve levels of reporting.

32. The multi-agency public protection arrangements (MAPPA) procedures provide comprehensive information and guidance on the safe management of high risk offenders. The procedures link appropriately to child protection procedures. A MAPPA coordinator has recently been appointed to ensure that all front-line social work staff fully understand their role.

## Looked after children and young people



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

Major strengths	Important weaknesses
<p>Services to support good health outcomes for looked after children, including identification and treatment of substance misuse and a targeted child and adolescent mental health service (CAMHS).</p> <p>Continuity of care and stability for looked after children.</p> <p>Good performance in improving school attendance.</p> <p>Strong support for looked after children moving to independence.</p>	<p>No overall strategy for looked after children.</p> <p>Low educational attainment at Key Stage 4 and high rates of fixed-term exclusions.</p> <p>Diminishing pool of Middlesbrough foster carers and high percentage of purchased placements.</p> <p>Unplanned admissions of children to the looked after system.</p>

34. The 2007 APA identified the high number of emergency admissions to the looked after system and thresholds between children in need and child protection as key areas for development. While numbers of looked after children have been lower than statistical neighbours since 2003, the council's

own data shows a recent increase of approximately 30 children. Whilst there are effective gatekeeping and decision-making systems in place before children become looked after, a number of children have become looked after as a result of emergency police action to tackle substance misuse. As a result the council has taken action to ensure effective communication with Cleveland police, and early information sharing and the need for more effective deployment of preventive services is acknowledged.

35. A Deputy Director with responsibility for safeguarding and looked after children was appointed in January 2008. Despite delays in appointing to this post, the council achieved improvements in many performance indicators during 2006–07 and exceeded the performance of similar councils in many areas. The council's own data indicates that these are continuing to improve. However, there has been no clear overall strategy for looked after children and they do not have sufficient profile within the Children and Young People's Plan (CYPP). The council acknowledges this and is developing a strategy for looked after children which clearly sets out priorities and an implementation and action plan.

36. A dedicated team for looked after children with permanency plans achieves good outcomes. For example, placement stability is prioritised and is good and looked after children have secure and consistent support from carers, social workers and other professionals. There is good promotion of contact with family and significant others which reflects children's needs and wishes. All looked after children have qualified social workers who they see regularly and changes of social worker are avoided wherever possible. Ninety-one per cent of reviews take place within timescales. There is good access to commissioned advocacy and independent visiting services. Health needs are well coordinated and supported by a designated nurse and doctor who have developed a flexible approach to health assessments in response to feedback from young people. Action has been taken to address the shortage of NHS dentists to ensure availability of dental assessments. There is a targeted CAMHS which responds flexibly to need at all tiers of provision and with shorter than national waiting times. Substance misuse is well addressed through the area-wide platform service which has developed effective screening and support for young people.

37. The majority of looked after children live in stable foster placements; only 11.1% were in residential settings during 2006–07, which is lower than comparators. Residential provision is commissioned from an independent provider within Middlesbrough for 11 young people in three settings which were judged as either good or adequate in their most recent inspections. Extensive use is made of independent placements as a result of falling numbers of in-house foster carers over the past three years. Approximately 119 (50%) of the total numbers of looked after children are living outside the council boundary. While the majority of these are within an hour's journey time from Middlesbrough, around a third of these are at greater distance. This has now become a critical issue which impacts on all outcome areas and results in delays in health assessments, disruption to education, increased costs and the need for additional staff time. The council acknowledges that the loss of carers is

related to comparatively low fees, and delays in addressing this have resulted in carers feeling undervalued and frustrated. There is now corporate management team support for a strategy to increase numbers of Middlesbrough foster carers, including proposals to improve the fee structure, although funding has not yet been secured by the council.

38. School attendance for looked after children improved significantly during 2006/07, from 17.4% missing 25 days or more in the previous year to 6.1%, which is better than comparators. This has been achieved by the implementation of a comprehensive strategy to address poor school attendance across the borough and by commissioning additional services such as Welfare Call. There are a continuing number of both fixed-term and permanent exclusions for looked after children. Data provided by the council suggests that the fixed-term exclusions have risen over the last year. It is acknowledged that the way data was collected in preceding years does not allow a 'like for like' comparison to be made. There are no protocols in place regarding exclusions for looked after children nor is there as yet a clear plan to address this issue

39. The educational attainment of looked after children is low, in line with looked after children nationally. Achievement at Key Stage 2 shows an improving picture but this has not as yet been carried through to attainment at Key stage 4. In 2005/06, only 47.1% of looked after children sat at least one GCSE, with 50% of these achieving at least one grade A\*–G. Additional resources secured through the national 'What Makes a Difference' initiative have supplemented the well-regarded but tightly resourced looked after children's education team. As a result, performance has improved in both these areas. In 2006/07, 66.7% sat at least one GCSE and 59.1% gained one GCSE grade A\*–G. However, the council acknowledges that numbers of looked after children who achieve five GCSEs at grades A\*–C remains too low, with only three out of a total cohort of 23 achieving this during 2006/07. The council has ensured that an appropriate infrastructure is in place in schools. All have designated teachers and governors and effective use is made of good quality personal education plans. There is effective tracking and monitoring in place.

40. Looked after children are effectively supported to enjoy their leisure and receive free leisure passes. The youth service runs a well-attended service for looked after children, which supports their progress into mainstream services. Many achieve accredited national awards, for example the Duke of Edinburgh Award. Regular celebration and achievement events are held and are well attended. Rates of final warnings and reprimands for looked after children are in line with similar areas and there is satisfactory joint working with the youth offending service. However, social workers do not routinely attend review meetings of looked after children who are subject to detention and training orders.

41. There is a committed lead member and strong corporate parenting group who champion and raise the profile of looked after children. Corporate parenting has successfully made improvements in a number of areas including

the development of council employment opportunities for young people and ensuring that elected members act as designated governors in all schools. There is a strong council-wide commitment to participation which includes looked after children, for example as members of the Youth Council and corporate parenting group. They have successfully developed training materials for designated teachers. While the percentage of looked after children who participated in their reviews rose to 99% during 2006–07, from 90% in the previous year, records of reviews do not consistently capture the views of young people or demonstrate how their views have been sought.

42. From the age of 16, young people receive very good support from a dedicated Pathways team, with good transition arrangements in place through the looked after children's team. During 2006–07, 82% of young people were engaged in employment or training, a 20% improvement from the previous year, with 94.4% in suitable accommodation. There is minimal use of bed and breakfast accommodation and this is avoided wherever possible. The Pathways team works creatively through the young people's development worker and makes good use of local partners to develop young people's experiences and skills. There is active local and national benchmarking of good practice. Work with unaccompanied asylum-seeking children is a relatively new area of work in Middlesbrough as a number of these young people have arrived only during the past year and a policy was introduced in January 2008 to ensure that these children receive age-appropriate assessments and services.

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

Inadequate  Adequate  Good  Outstanding

43. **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 multi-agency work, especially in the early years.</p> <p>Good support provided to families.</p> <p>Services increasingly accessible to users.</p> <p>Children and young people's participation and their involvement in planning their personal development.</p>	<p>The lack of a multi-agency strategy for children and young people with learning difficulties and/or disabilities.</p> <p>Data that allows robust challenge and support to secondary schools to improve progress and attainment.</p> <p>Opportunities for post-16 learners.</p>

The progress children make in primary schools and special schools.	Inconsistent provision of the key worker role.
--------------------------------------------------------------------	------------------------------------------------

44. There is a strong emphasis on and commitment to inclusion by those supporting children and young people with learning difficulties and/or disabilities. Schools and families value very highly the support they receive from partners and these are making a significant contribution to improving outcomes for children and young people. Outcomes are initially good for young children but this is not sustained. The good operational support to improving outcomes has continued despite the lack of an overall strategy and robust planning framework. The ambitions and priorities for children and young people with learning difficulties and/or disabilities are not sufficiently clear.

45. Children and their families are well supported in the pre-school years with accessible multi-disciplinary services. Speech and language therapy is now locally-based with delivery in schools and the community which has significantly reduced non-attendance rates for appointments. Good multi-disciplinary work is evident at the Cleveland Unit in James Cooke Hospital and provides excellent support in assessing complex needs in a nursery setting, through outreach and the portage service. The majority of needs are well met in local provision such as children's centres and nurseries. There is a dedicated CAMHS team across South Tees, which is developing well. There is good partnership working with social care, with multi-agency meetings held bi-weekly. An experienced nurse provides liaison with locality-based teams, offering advice on referrals and assessment. Qualified nurses provide out-of-hours support seven days a week. The need to improve early language skills has been recognised and there is good impact of programmes such as BLAST (boosting language auditory skills and talking). In two areas of the town, Brambles Farm and Thorntree, delayed language acquisition in children aged 2-4 years has reduced from 58.8% to 42.6%.

46. Early intervention has been encouraged by the increasing level of delegation of finance to schools by the council to support children and young people with special educational needs (SEN). This has resulted in the number of new statements of SEN reducing to 68 in 2006 from 114 in 2004. Overall, the number of statements is still high at 4% compared to 3.2% in similar councils and 2.8% nationally. Statements are of good quality and are produced within timescales. Work on developing and formalising the key worker role is underdeveloped. Whilst there is a lead worker in some cases, this is not universal. All special schools are judged to be either good or outstanding in Ofsted inspections. Schools value very highly the support they receive from the local council. Good progress is made by children and young people in primary education, whilst in secondary school progress is satisfactory. The local council has a thorough four-year cycle of reviewing provision in schools; however, whilst good data exists to ensure appropriate challenge and support in primary schools regarding vulnerable groups, including children and young people with



learning difficulties and/or disabilities, it is not sufficiently well developed at secondary level.

47. Despite the lack of an overall strategy and robust planning framework, area-wide developments have continued, for instance the review of primary provision for SEN. Special schools continue to expand their role. Beverly School is providing a service across the local authority to support children with autism and Holmwood School provides training for behaviour support. Agreement has been reached with primary schools for zero permanent exclusions using Holmwood School for support. As yet the local council does not have sufficient procedures in place to monitor the effectiveness of the outreach support.

48. Continuity of care is good and is underpinned by a stable workforce and good inter-agency working. There are good opportunities available to encourage networking and collaborative work. For example, a multi-agency resource panel meets fortnightly to decide on the support families need such as short breaks. Short break provision is good and opportunities are well received by families. Respite provision is sufficient and there are some excellent facilities, for example at the Gleneagles Centre. The children with disabilities team provides good support to children and families with effective communication and consultation. There is appropriate training for safeguarding for children and young people with learning difficulties and/or disabilities. The National Youth Advocacy Service is used well and effectively provides advocacy support for young people.

49. Good transition arrangements exist for children with learning difficulties and/or disabilities entering school and moving to secondary education. Transition plans are in place for all young people following review at age 14. A successful pilot in person-centred planning has proved very useful in developing a good approach to the transition to adult services. The benefits to young people and families are recognised by all those involved. However, for those working with families the range of adult services available is not always apparent. Plans to develop a multi-agency transitions team to further enhance the process have been agreed. Transition from paediatric to adult health services is adequate, although some young people cannot access adult physiotherapy and remain with paediatric services.

50. Children and young people are actively engaged in personal planning as well as wider service developments. There is a good culture of encouraging the involvement of young people and their families in reviews and planning for the future. As well as involvement in their own future provision, young people are consulted about service and strategic issues. Young people are represented on the youth parliament and they have been involved effectively in consultation on Building Schools for the Future. There are active school councils in the special schools with young people able to see the result their participation has had, for example, in designing playground markings in Priory Woods School. Parents and carers feel they are able to make their views known and good mechanisms

exist for consultation and feedback, such as the parents' forum and a regular survey of all parents and carers of pupils with statements of SEN.

51. There is a high proportion of young people with learning difficulties and/or disabilities aged 16–19 not in education, employment or training, and at 26.6% this is significantly higher than the national average at 11.5% and similar authorities at 7%. Whilst progress has been made on developing high quality provision for learners with learning difficulties and/or disabilities aged 16–19, there are not enough suitable options available for young people outside the special schools. There are some good examples of practice and provision for young people, for example the development of a transition portfolio containing useful information to hand over to post-16 providers and the partnership between Tollesby School and Middlesbrough College which allows young people with emotional and behavioural difficulties to experience further education in familiar surroundings.

52. There is adequate provision of leisure and cultural activities which have significantly improved with, for example, the collaboration between the local council and the Children's Society in developing the North Ormesby youth club for young people. There has been a good increase in the take-up of direct payments from 18 families in 2005–06 to the current 40. Good use of extended facilities, such as at Priory Woods School, effectively supports parents.

## **Other issues identified for further investigation**

### **The impact of the partners' strategy in reducing the number of young people not in employment, education or training (NEET) with particular reference to vulnerable groups**

53. **The impact of the partners' strategy in reducing the number of young people not in employment, education or training, with particular reference to vulnerable groups, is adequate.**

<b>Major strengths</b>	<b>Important weaknesses</b>
<p>Significant reduction in the number of 16 year old young people who are NEET.</p> <p>Effective preventative work for young people at risk of becoming not in education, employment or training.</p> <p>Good personal support for young people.</p> <p>Effective partnerships and collaboration.</p>	<p>Too many young people aged 17–19 who are NEET.</p> <p>Low attainment at Key Stage 4 and low levels of literacy.</p> <p>Provision for some vulnerable groups.</p>

Responsive and flexible Key Stage 4 curriculum.	
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54. Outcomes for young people in the NEET category at 16 years show significant improvement. The 2010 NEET target was met well ahead of time but rates remain 4% above the national average overall. A wide range of very effective preventative measures support at risk young people to remain in learning at 16 years old. However, NEET rates for young people aged 17–19 and some vulnerable groups remain very high.

55. The proportion of 16 year old young people in the NEET category fell significantly by nearly half, from 9.3% in December 2006 to 5.3% in December 2007, below both statistical neighbours and the national average. The number of looked after children and care leavers progressing to education, employment or training has improved and is now good and just above comparators.

56. Young people at risk of becoming NEET receive focused preventative work and high levels of support. Interventions by Connexions and others begin earlier than previously, from Years 8 to 9, or sooner for the most vulnerable. A successful 2007 September guarantee for 16 year olds placed 92% of young people who were undecided about their next steps in education, employment or training where most remain. The number of 16–18 year olds entering post-16 provision is generally increasing at all levels.

57. A number of factors contribute to young people not making a successful transition from school to education, employment or training. Good progress is being made in tackling these issues. Attendance rates have improved. The number of days lost and numbers of young people receiving fixed-term exclusions at Key Stage 4 have reduced markedly this year following a three-year period when they increased. The number of permanent exclusions is low. No spring term permanent exclusions were reported in 2007/08. Activities during school holidays maintain engagement with young people, promote citizenship and enable them to make a positive contribution to their community. Though improving, the Key Stage 4 attainment and literacy levels are comparatively low.

58. Much good personal support for young people is provided by schools, colleges, Connexions and youth service staff. Connexions provide good support and effectively prioritise young people on the basis of need. This support is supplemented well in some schools by their own careers staff. The most vulnerable groups, such as young offenders and looked after children, receive dedicated Connexions support as the highest priority. Individual pupil support from transition mentors proves effective in keeping the most at risk in learning. Parent support advisers help parents to engage with and support their children's learning. Enthusiastic youth service trained peer mentors provide good informal learning and social support, successfully recruiting young people into positive activities in their communities. Some work-based learning

providers and projects offer improved financial support and are particularly successful in helping teenage mothers to complete apprenticeships.

59. Effective targeted work has stemmed the flow of young people at age 16 into the NEET category. The number of young people whose status is not known across all ages has reduced to 3.5%. However, work with older groups, and some vulnerable groups, is less developed. The proportion of the NEET category who are 17 to 19 years old is high. Some of the most deprived wards have particularly high NEET rates. Rates for girls are above those for boys and in 11 wards 20% of 17 and 18 year old girls are in the NEET category. These are often young mothers. The proportion of young people with learning difficulties and/or disabilities from mainstream schools who are NEET is high at 21.6%. The council has a good range of strategies to enhance targeting of these groups, but it is too soon to judge their impact.

60. Partnership working is good. Providers work closely to support smooth transition between different stages of learning. Working relationships between schools and post-16 learning providers are well established. Strategic partners actively promote coherent planning. Providers report much improved information sharing and the development of common protocols. The current 14–19 strategy is under review and the revision for 2008–11 identifies accurately the many areas of progress and new areas of challenge. Strong links between statutory, private and the voluntary and community sectors are effective in targeting work in deprived areas. The council as an employer is developing new apprenticeships to fill skill gaps and provide new work opportunities. The Aim Higher project engages with children, young people and their parents to raise aspirations and awareness about university life.

61. A wide choice of learning pathways is offered at Key Stage 4. Vocationally related programmes, often provided in partnership, are popular and recruit well over 70% of Key Stage 4 pupils from some schools. A small proportion of pupils attend accredited off-site provision that engages the most disaffected pupils. The youth service successfully contributes to a range of alternative opportunities through its 'Positive Futures' programme. Provision has a clear focus on transferable key skills. Much emphasis is placed on appropriate programmes to eliminate the numbers leaving school without qualifications. Increased Level 1 post-16 provision supports transition and progression in further education and sixth form colleges. The partnership is on target to introduce two vocational diplomas in September 2008 and a further five in September 2009. Early work to coordinate timetables has begun.

### **The contribution of services to preventing substance misuse and improving outcomes for those currently misusing, with particular reference to vulnerable groups**

62. **The contribution of services to preventing substance misuse and improving outcomes for those currently misusing, with particular reference to vulnerable groups, is good.**

<b>Major strengths</b>	<b>Important weaknesses</b>
<p>Good outcomes for children, young people and families through their involvement in specialist services.</p> <p>Effective partnership arrangements between local authority, health and voluntary services.</p> <p>Strong focus on early identification and intervention.</p>	<p>Lack of overall evaluation of outcomes for children and young people who misuse substances.</p>

63. Partnership arrangements between the council, health and voluntary services are good and are working well. The Director of Public Health is a jointly funded post between the PCT and the council and represents the PCT on the Children's Trust Board. The youth offending service, police, schools, secondary healthcare and adult drug and alcohol service work effectively together, with comprehensive referral and transition pathways in place. These are clearly understood by services that work with children, young people and families and good protocols are in place, particularly between Platform, the accident and emergency department at James Cook University Hospital, and Fulcrum, the adult drug and alcohol service, which effectively support multi-agency work.

64. Reducing the use and effects of substance misuse is rightly identified as a key priority for the local council and its partners. This is illustrated in the CYPP and Young People's Drug and Alcohol Strategy, where the partnership has set appropriate targets to address these issues. There is a very good awareness of the issues affecting children and young people in the area. For example, binge drinking in Middlesbrough is 10% higher than the England average and the second highest of the 23 local councils in the region.

65. The 2007 APA identified the partnership's strategy of early intervention in substance misuse as a strength and the Healthy Schools programme as a key conduit for tackling substance misuse. This remains the case. There is a strong focus on early intervention and prevention and good delivery of universal drug education in both primary and secondary schools through, for example, the Medicines Matters initiative, Platform, personal, social and health education, and the Healthy Schools programme. Young people express positive views and comments regarding the provision of information and education across the partnership. The Healthy Schools programme provides good access to substance misuse training, teaching programmes and support networks. This has increased the confidence of school staff to provide these services.

66. Platform is a newly commissioned integrated drug and alcohol specialist service, which provides good support to children and young people with substance misuse problems. There is good access to this service, with no waiting list. Comprehensive training is provided to a wide range of professionals regarding early identification and intervention strategies, with 300 staff trained

so far to use them. This helps increase capacity in the area and maintains young people in the lowest tier of intervention. There are some very good outcomes in terms of reducing drug usage by young people and include improvements in health and family relationships. A formal evaluation of the Platform service demonstrates the improvement in the lives of 30 young people between entering and exiting treatment in September 2007. Twenty-one of these young people had reduced criminal activity, 28 young people had reduced their drug usage, 19 young people reported improved family relationships and all reported improvements in their health.

67. There are strong links between substance misuse, domestic violence and children and young people moving more frequently in and out of the care system. Families First, a joint adult and children's service, provides specialist and time limited interventions for parents who misuse substances. This service delivers very good outcomes for children and their families who are already known to the social care service. These include maintaining children within the family and reducing drug usage. Since the introduction of this service, 77% of the families using the service have been helped to keep their children safely at home. There has been a significant reduction in parental drug usage. The use of heroin reduced from 25% to 12.5%, cocaine from 12.5% to 0% and cannabis from 25% to 12.5%. There has also been a significant reduction in the level of family conflict reported by parents. Parents reported a lot of conflict in the month prior to interview and this had reduced to a little or none by the time they stopped accessing the service. Evaluations of the Families First service by users report consistently high levels of satisfaction and effectiveness. Users of the service describe excellent outcomes in terms of increased confidence and self-esteem, security and maintaining their homes, improved relationships with and the behaviour of their children, including school attendance.

68. Hospitals provide appropriate interventions for young people with substance misuse problems, with some good examples of partnership working with, for example, Platform. There are satisfactory links with CAMHS and substance misuse services. Good support is given to looked after children through designated staff, all of whom have undertaken relevant training.

69. Platform and dedicated health workers do engage BME groups and homeless young people. However, the engagement and accessibility of substance misuse services to these groups is an area that the partnership acknowledges requires some development and has put in place well conceived plans to do so. The partnership engages and involves young people effectively in shaping substance misuse services. Examples of this include developing the use of youth clubs and outreach methods. Young people designed the website for the Platform service, helping to ensure that it reaches those young people in need of the service.

70. Robust performance management systems are in place at a service level for specialist services. These include quarterly performance monitoring and the use of evaluation tools and questionnaires. External evaluation is used

effectively. Although performance monitoring does show good impact, some strategies and initiatives, such as the preventative interventions, have not been in place long enough to fully assess effectiveness. The evaluation overall of the impact on outcomes for children and young people across the borough is underdeveloped. The partnership has a good awareness of this and is actively developing strategies to address it.

## Service management



## Capacity to improve



**71. The management of services for children and young people is adequate. Capacity to improve further is good.**

Major strengths	Important weaknesses
Commitment to raising aspirations and attainment as key to regeneration of the area. Engagement of children and young people. Elected member leadership. Partnership working. Senior managers have a good grasp of the key issues and challenges which need to be addressed	Multi-agency strategies for key vulnerable groups. Achieving step change in some key areas of underperformance. Insufficient capacity within some aspects of social care.

72. The ambition of the local partnership is good. Ambitions for major transformation of attainment and aspirations of children and young people are widely recognised and supported by key stakeholders. These ambitions ‘to create an environment that raises their hopes, aspirations and achievement and promotes pride through citizenship’ are reflected in and are considered critical to those for the wider regeneration of Middlesbrough. There is good alignment of the community strategy, the Mayor’s reduction targets (on school leavers

without qualifications, permanent exclusions and pupil absence), the council's Strategic Plan, the local area agreement, CYPP and CFLD plan.

73. Consultation and engagement with children and young people in service planning is very good. There are numerous examples of this working in practice, for example their involvement in facilitating a CYPP review event, scrutinising the 14–19 Plan and commissioning the young carers' service. A strong infrastructure has been established to promote engagement of children and young people, for example guidance and training on consulting young children in four age groups from 0–8, and proposals for more direct involvement of the Youth Council in decision-making processes. As a result, children and young people are able to influence the way in which services are planned.

74. Prioritisation of the local partnership is adequate. The CYPP clearly sets out the area's priorities, and these have been reviewed for 2008–11. While the foundation of the Mayor's 'raising hope agenda' is stated as being 'the education and care of our children and young people and our support for vulnerable people in Middlesbrough, up-to-date multi-agency strategies for key groups of disadvantaged children, for example those with learning difficulties and/or disabilities, are not yet in place.

75. Resources are matched to priorities well through medium-term financial planning, and resources have been removed from some lower priorities. The Schools Management Forum has agreed to provide resources from budgets allocated to schools for key improvements, for example in speech and language therapy for early language delay and to support the education of looked after children. However, resources for some key developments, for example following from the fostering and preventative services reviews which are under way and will be critical to future service improvement, are supported but not yet formally committed at the corporate level.

76. The capacity of the local partnership is adequate. Political leadership of the agenda for children and young people is very good. The Mayor has made his commitment very clear and frequently champions their needs in a very public way. The portfolio holder is very knowledgeable across the whole range of issues affecting children and young people and discharges her responsibilities well. Children and young people are well served by an effective children's champion, who was re-elected to this role because they feel 'he listens'. This happened during an imaginative event in Local Democracy Week largely organised by children and young people.

77. Senior managers have a good grasp of the key issues and challenges which need to be addressed, Changes to the current management structure are increasing capacity but some key roles have yet to be determined. A wide range of issues are under development including the preventative strategy, locality-based services, primary schools review, fostering, commissioning and achieving a step change in attainment. Planning how such a wide range of far-reaching



change can be managed and delivered has not yet been fully established within the new team. Whilst safe recruitment procedures are in place, including a recent review of all human resources files, there remain some inconsistencies in the auditing of recruitment and selection procedures in outsourced provision. A more efficient centralised approach to recruitment and selection is currently being developed.

78. Partnership working is strong in almost all areas, at strategic and operational levels. There are very positive and substantially improved school survey responses, which indicate positive change achieved in the immediate past. A remarkable 80% of questions received a significantly improved response in 2007 compared with the previous year. Good progress is being made in developing a joint workforce strategy, some aspects of which are being led by the voluntary and community sector, and some joint training is being delivered. The council is making good use of partnerships with neighbouring councils to enhance capacity, for example provision for hearing and visually impaired children and for Traveller children and the intensive supervision and support programme for young offenders. As a result, the ability of the area to deliver good quality services is improved. In contrast, some capacity issues, for example in relation to foster carers, experienced social workers and the youth offending service, are having an adverse impact on services.

79. Overall, value for money is adequate. Budgeted expenditure on education is above comparable councils and social care expenditure is below while outcomes overall are adequate. Action is being taken to improve value for money. In order to reduce surplus places the number of secondary schools is being reduced by two, and a review of primary provision across the borough is under way, with specific proposals due to be published shortly. Action has been taken through the Schools Management Forum to reduce school budget surpluses. The council's financial benchmarking is thorough and key areas of underperformance are being addressed. This means the service is striving to use its resources to better effect.

80. Performance management of the local partnership is good. There is a very good corporate and departmental framework for performance management. There is regular performance reporting to elected members, including one-to-one accountability sessions through which the portfolio holder reports to the Deputy Mayor. The Director also reports regularly on performance to the Chief Executive. Partnership performance management arrangements are good, through the sub-groups under the Children's Trust, with key performance reported to the Trust and the local strategic partnership. There are also accountability sessions on a partnership basis, modelled on those within the council. The scrutiny panel has made a good contribution to improving services across a wide range of issues, including school meals and Surestart. Performance management of the diversity action plan and risk management are thorough and well integrated. This means that the area is well placed to improve services.

81. The quality of operational performance management varies between good and inadequate. At its best it provides a clear steer to managers on what needs to be done to improve outcomes for children and young people and enables them to make changes quickly to address issues. A good example of this can be seen in the way nearly half of the primary schools jointly paid for increased analytical capacity resulting in Key Stage 2 results in English and mathematics improving on average by 9% in these schools, compared with 1% in other schools. A further good example is the robust performance management systems established for specialist services involved in addressing substance misuse. The management of performance is also making a significant impact on some key areas of underperformance, for example improvements in Key Stage 2 attainment and reductions in pupil absence levels and the proportion of 16 year olds not in education, employment or training and school exclusions. There are also good examples of innovation having an impact, for example Platform, Families First and the Meteor programme run by the University of Teesside, which has succeeded in raising aspirations among primary pupils in disadvantaged areas. In social care, however, the integrated children's system currently being implemented is not yet providing managers with the performance data they need to make decisions that significantly impact on the quality of outcomes. The quality of reports and assessments, including initial and core assessments and reports for child protection conferences, is variable and does not accurately reflect the quality of work actually being undertaken with children and families. Some written records are incomplete. Additionally, the enquiry and investigation team does not have performance targets to hold key workers to account. These limitations currently hinder operational performance, particularly in social care.

82. Children and young people are effectively engaged in evaluating service provision, for example the Meteor programme, the youth service and through the Children's Fund. Parent and carer views have been used to improve child protection case conferences and services received by children with learning difficulties and/or disabilities. This helps to improve services. However, some individual children who are looked after or in the child protection system are not sufficiently involved in decisions that affect them.

83. Over the past three years, more children and young people's performance indicators improved than the average for all councils. However, actions on some areas of underperformance have not had the desired effect, for example on attainment at Key Stage 3, which deteriorated last year, post-17 and post-18 NEET rates and post-16 provision for young people with learning difficulties and/or disabilities. Plans are in place, however, to address key areas of persistent underperformance, for example a strong drive on literacy as a key to combating low attainment and the 'September guarantee' of a training place to be extended to 17 year olds in 2008.

84. Capacity to improve further is good. Ambitions are clear and strong. There is very good engagement of stakeholders, including children and young people. Although up-to-date multi-agency strategies are not in place for some key

vulnerable groups of children and young people, there is good multi-agency working in place and services and outcomes are improving as a result. There are very good examples where difficult and longstanding issues have and are being successfully addressed. These include reducing the number of 16 year olds NEET, teenage conceptions and tackling substance misuse. Agencies have successfully marshalled their resources around good strategies that are making a real impact on children and young people in the area, leading to better outcomes for them. Appropriate action is being taken to secure improvement in almost all areas of underperformance. Leadership by elected members and senior managers is good but some management change is recent or still under way, so delivery of the level of improvement in outcomes that is needed remains a challenge. Partnership working is good and relationships with schools have markedly improved. Good progress is being made on a joint workforce strategy. There is good focus on value for money.

## **Annex A**

### **THE 2007 ANNUAL PERFORMANCE ASSESSMENT OF SERVICES FOR CHILDREN AND YOUNG PEOPLE IN MIDDLESBROUGH**

#### **Summary**

Middlesbrough Borough Council continues to deliver good services overall for children and young people. Despite the fact that many outcomes remain below national averages, the gap is narrowing across several and considerably in some. The council is tackling the areas identified for improvement in the previous APA with some notable successes, such as the good improvement in attainment of 11 year olds at Key Stage 2. Together with its partners, Middlesbrough's children, families and learning service is making a number of significant contributions to improving the well-being and achievements of children and young people across an area that faces deep-rooted challenges to improving health and social and economic well-being.

The full annual performance assessment can be found at:

[http://www.ofsted.gov.uk/reports/pdf/?inspectionNumber=3107&providerCategoryID=0&fileName=\\APA\\apa\\_2007\\_806.pdf](http://www.ofsted.gov.uk/reports/pdf/?inspectionNumber=3107&providerCategoryID=0&fileName=\\APA\\apa_2007_806.pdf)

## Annex B

### CHILDREN AND YOUNG PEOPLE'S SECTION OF THE CORPORATE ASSESSMENT REPORT

1. Outcomes for children and young people in Middlesbrough are adequate. The 2007 APA states that 'despite many outcomes remaining below national averages, the gap is narrowing across several and considerably in some'. It further points out that the service for children, families and learning is making a number of significant contributions to improving the well-being and achievements of children and young people across an area that faces deep-rooted challenges to improving health and social and economic well-being.
2. Health outcomes for children and young people are adequate and continue to be a significant challenge in the area. Partnership arrangements between the local authority, health and voluntary services are good and working well, and whilst some outcomes remain challenging to improve, there are good examples where services are making a significant impact. For example, partners have successfully marshalled their resources to tackle substance misuse, particularly for those with high levels of need. Teenage pregnancy rates are reducing and the latest unvalidated data shows a marked improvement on previous years with Middlesbrough having the second lowest rate for conceptions amongst neighbouring authorities in 2007.
3. Children and young people appear safe and arrangements to ensure this are adequate. Multi-agency partnerships are effective and there is a strong commitment to safeguarding across children's services. Good preventative services and the development of locality working are improving outcomes for children as well as prompt identification of and response to children at risk of significant harm. Safe recruitment and selection practices are in place; however, greater rigour in auditing the thoroughness of recruitment and selection procedures in outsourced provision is needed to achieve best practice.
4. The impact of all local services in helping children and young people to enjoy their education and to achieve well is good. Whilst attainment often remains below national averages, there is an improving trend. Some of the underlying factors affecting educational attainment are being successfully tackled, for example attendance rates and numbers of young people receiving fixed-term exclusions at Key Stage 4 have reduced markedly. The number of permanent exclusions is low. Schools rate highly the support they receive from the local authority.
5. The impact of all local services in helping children and young people to contribute to society is good. Children and young people are involved effectively in civic life. There are a wide range of consultation mechanisms that successfully engage them. Citizenship is promoted well and the youth service

successfully engages young people in positive activities and in making a positive contribution to their community.

6. The impact of all local services in helping children and young people achieve economic well-being is adequate. A wide choice of learning pathways is offered at Key Stage 4. Vocationally related programmes are popular. An increasing number of 16 year olds are staying on in learning. Rates of young people not in education, training or employment are decreasing but are still high, particularly amongst some vulnerable groups.

7. Service management is adequate. High ambition is widely recognised and supported by key stakeholders, although ambition for some vulnerable groups is not sufficiently clear. There is strong and effective senior leadership within Council. There is a very good corporate and departmental framework for performance management, although there is some variability in operational performance management. The capacity of Council services to improve is good. Areas where improvements are needed are well known and good action in key areas is having a positive impact. Outcomes for children and young people overall are improving, although some key strategies are not yet in place. The Council works well with partners at all levels. These factors and strong corporate leadership provide solid foundations for further improvements.

## Annex C

### **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. The review was linked to the contemporaneous corporate assessment of the local council by the Audit Commission and these findings plus aspects of the most recent annual performance assessment 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 Middlesbrough 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 focusing on children with learning difficulties and/or disabilities, children who are looked after and children at risk or requiring safeguarding and a few additional investigations. It evaluates the collective contribution made by all relevant children's services to outcomes for these children and young people.
4. 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).