



Joint area review

Birmingham 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
HM Inspectorate of Court Administration
HM Inspectorate of Prisons
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Contents

Introduction	2
Context	3
Summary Report	5
Grades	10
Recommendations	10
Main Report	11
Outcomes for children and young people	11
The impact of local services	16
Being healthy	16
Staying safe	17
Enjoying and achieving	20
Making a positive contribution	22
Achieving economic well-being	24
Service management	26
Annex: The children and young people's section of the corporate assessment report	30

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 eleven inspectors from the Office for Standards in Education (Ofsted), the Commission for Social Care Inspection (CSCI), the Healthcare Commission (CHAI), the Adult Learning Inspectorate (ALI) 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 Birmingham 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.
5. The review took place in two stages consisting in total of three weeks over a four-week period. The first stage reviewed all existing evidence including:
 - a 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
 - evidence gathered during the earlier Youth Offending Service inspection
 - briefings from staff within inspectorates, commissions and other public bodies in contact with local providers.
6. The second stage involved 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 two neighbourhoods in Castle Vale and Springfield. 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 and their equivalents in other public agencies, officers from these agencies, service users, and community representatives. A review of case files for children and young people receiving support from a number of local agencies was also included.

Context

7. Birmingham is England's largest urban authority, with a population of about one million people. Significant investment and infrastructure development over the last 15 years have resulted in a major transformation of the city centre. The city's reputation as a cultural, service and commercial centre has changed significantly, and these sectors play an increasingly important role in the local economy. At the same time, the national trend towards declining employment in manufacturing industries is evident locally. Engineering and manufacturing, however, retain an important role in the life and work of the city.

8. Birmingham's communities are diverse in their level of prosperity and well being. Parts of the city and its constituent communities have high levels of multiple deprivation, with the associated problems of crime, poor health and unemployment, but elsewhere there are more affluent suburbs with different challenges. Unemployment overall, at 5.1%, is significantly above the national average of 2% and average weekly earnings are below the national and regional averages.

9. Birmingham's population is among the most diverse in the country. Nearly 30% of the total population is from minority ethnic communities, the largest communities being south Asian. The ethnic diversity of the city is increasing, with new arrivals from Africa and Eastern Europe. In the 2001 census, 14.3% of the population identified themselves as Muslim. Birmingham has a higher proportion of younger people than average, with half of pupils in Birmingham schools being from minority ethnic communities. The proportion of children living in one parent households is 30%, which is far higher than the national average of 6.5%.

10. The council is a large and complex organisation. It is the largest local authority in England and the largest in Europe. With no overall political control, it is governed by a joint Conservative and Liberal Democrat coalition. There are 120 councillors comprising 44 Labour, 41 Conservative and 33 Liberal Democrat, one Respect councillor and one Independent councillor. There are eight overview and scrutiny committees, with some of these committees scrutinising aspects of children and young people's services. A strategic vision for the city, "Taking Birmingham Forward", has been developed by the

Birmingham Strategic Partnership (BSP). The BSP is made up of all key local strategic partners and provides a forum for long-term planning.

11. Two years ago the social care service was judged to be poor and, since then, the council has invested significantly in this service. In April 2005, a Children and Young People's Board was set up. This formed the basis for the children's trust arrangements and partnership cooperation. The functions of the education, children's social care and the youth offending services were brought together to form the new Directorate of Children, Young People and Families from April 2006. The council appointed a Strategic Director of Children's Services and a Lead Member in April 2006. The Children and Young People's Board has the responsibility for delivering the key priorities for children and young people set out in the Children and Young People's Plan (CYPP).

12. Within the area there are 434 schools comprising 302 primary, 76 secondary, 28 special, 25 nursery and three pupil referral units. Of the 76 secondary schools, 68 are specialist schools and 40 have sixth forms. There is a number of selective, faith and single sex schools. All schools in total cater for 177,981 children and young people of whom 4000 are registered disabled. Social care duty and assessment service is provided through five duty screening teams, 19 duty and assessment social work teams and 37 care management teams. Separate specialist teams provide adoption, fostering, residential care and services for disabled children. There are 2,060 children who are looked after by the council and 1,127 children on the child protection register.

13. The area is served by Birmingham and Solihull Connexions and the West Midlands police authority.

14. The Birmingham and Solihull Learning and Skills Council (LSC) works in partnership with the council, Connexions, schools, colleges, higher education, employers, Jobcentre plus and training providers to deliver the 14–19 strategy. Post-16 education and training is provided by five general FE colleges, two sixth form colleges, one higher education college, one university with further education provision and 45 work-based training providers. A voluntary organisation also funds one new further education provider and there is also a specialist designated college for young people with visual impairment and other disabilities. Entry to Employment (E2E) provision is managed by 16 direct providers catering for over 2,000 learners. Adult and community learning, including aspects of family learning, is provided by the local authority through local LSC and city council funding.

15. Health services in Birmingham are commissioned by three Primary Care Trusts (PCTs): Birmingham East and North PCT, South Birmingham PCT and Heart of Birmingham PCT. All three also provide a range of community health services with South Birmingham PCT being the provider of specialist community-based health services to children. Birmingham Children's Hospital NHS Trust is the main provider of acute health services for children and young people. Heart of England NHS Foundation Trust, Good Hope Hospital NHS

Trust and Sandwell and West Birmingham NHS Trust, provide other children's hospital services and A&E services. These trusts also provide services to surrounding areas including Solihull, Sandwell and Staffordshire. Birmingham has developed an integrated partnership approach to the commissioning and provision of children mental health services (CAMHS). Working arrangements between the Birmingham Children's Hospital NHS Trust, the CAMHS Partnership Board and the Children and Young People Board provide the foundation for citywide commissioning and service provision. The PCTs also collaborate through specialised commissioning arrangements to invest in rarer and more expensive acute services for children. The trusts providing health services for the children of Birmingham, with the exception of the ambulance service, fall within the Birmingham and Black Country Strategic Health Authority.

16. There are no young offender institutions in Birmingham. The nearest male establishment is in Brinsford, about 15 miles north of Birmingham, and the nearest female is Eastwood Park in Bristol. Birmingham has five area teams and five specialist teams, including a court team and preventions team, to manage and support young people entering, or at risk of entering, the criminal justice system.

Summary Report

Outcomes for children and young people

17. Outcomes for children and young people in Birmingham are good, although there are variations in health outcomes across the city. Overall, children and young people appear safe and those most at risk are adequately protected. Children and young people achieve well at school. Educational standards are good and improving, particularly in secondary schools and in further education and training. Most children and young people are involved in a wide range of cultural, artistic and sporting activities. Many contribute very positively to school life and to developments in their local communities. Children and young people are well prepared for working life.

The impact of local services

18. **The impact of local services in improving outcomes for children and young people is good.** The council and its partners know and understand the needs of Birmingham well and the findings of this review broadly corroborate the strengths and weaknesses identified in the self-assessment. There are serious challenges for young people and for services in health and social care in some areas of the city. Services are tackling these inequalities and, overall, the contribution of services to improving the health of children and young people and ensuring that they are safe is adequate. The impact of all services in respect of young people enjoying and achieving at school is good, with some very good features. Significant attention has been given to improving educational standards and providing high quality activities to enrich the personal development of all children and young people. Many

opportunities are provided for them to participate in consultation processes and make a positive contribution in schools and within the local community. The contribution of local services to ensuring that children and young people achieve economic well-being is good. Strategic planning to support the coordination of 14-19 education and training is very good.

19. Good partnership working, shared ambitions and measurably improved outcomes over the last two years demonstrate that the capacity to improve is good. Effective leadership has led to improvements in education and social care. Voluntary agencies make a useful and valued contribution to supporting vulnerable children, although their work is not yet sufficiently integrated with that of the council. Services are responsive to cultural diversity and equality. Provision is planned to accommodate the needs of different communities. The council recognises that services for newly arrived families migrating from less established communities, such as Eastern Europe, Yemen and Somalia, require development.

Being healthy

20. **The impact of all local services in securing the health of children and young people is adequate.** The multi-agency Children and Young People Board is leading initiatives to address health inequalities across the city. The Birmingham Health and Well-being Partnership has developed a good action plan to tackle infant mortality. Support for parents is adequate, but breast-feeding uptake is low. Sound primary health care initiatives have been introduced to tackle this issue. National immunisation targets are being met, with good programmes in place to improve standards.

21. Healthy lifestyle choices are promoted well in schools and many are involved in the Healthy Schools programme. Children and young people are engaged in a wide range of lifestyle, emotional and nurturing programmes, with school nurses providing well targeted additional support. Multi-agency initiatives to reduce high levels of obesity and the high rate of teenage pregnancy are now in place. However, some actions have yet to have a consistent impact on outcomes for children and young people. The interagency approach to improving CAMHS is good, with single points of access for referral being developed in each PCT. However, there is no designated service for 16 and 17 year olds with mental health problems and, for young people with disabilities, arrangements for transfer to adult services are weak.

Staying safe

22. **The impact of all local services in keeping children and young people safe is adequate and improving.** Children and young people are informed about the risks to them through a variety of means. There is good inter-agency commitment and sound arrangements for key elements of safeguarding, including some very good practice across agencies, for example the work of the Birmingham Safeguarding Children Board on missing children and young people, with clear systems and accountability between

agencies, the looked after children education service (LACES) team which provides very good support to the education of looked after children, and the work of the targeted family support team, which has reduced the number of children who would have become looked after. The Heart of Birmingham duty and assessment service provides very good screening and signposting and good tracking of cases. Schools are active in promoting the safety of children in their care and agencies generally work well together to provide services to children at risk of harm. Improved management arrangements in social care have provided a clearer focus supported by comprehensive management information. However, quality assurance requires development to improve the rigour of performance monitoring and to address inconsistencies, particularly in the quality of care planning and case recording.

23. Arrangements for information sharing are well developed. Services to establish the whereabouts of all children and young people are generally adequate. The quality of residential and foster care for looked after children is inconsistent, with high numbers placed out of council provision. However, cases are reviewed within timescales and placements out of council are reviewed as thoroughly as those in council. There is an effective duty and assessment system. However, the high thresholds for undertaking initial assessments are not always well understood by other agencies and voluntary sector groups. Standards in care management teams require improvement. Safeguarding of children who are privately fostered is limited by lack of identification and there is insufficient integrated assessment and coordination of services for children who have learning difficulties and/or disabilities.

Enjoying and achieving

24. **The impact of all local services in helping children and young people to enjoy their education and recreation and to achieve well is good with some very good features.** Effective partnership work ensures that parents and carers, particularly those from migrant communities with little or no English language, are well supported. Children's communication, language and literacy skills are below average on entry to school. Very good school improvement strategies are instrumental in raising standards for all groups including children and young people who are looked after by the council and those with learning difficulties and/or disabilities. Consequently, children make good progress in their primary schools and continue to improve as they move through the school system, achieving well by age 16. The highly effective use of performance data ensures that resources are targeted to those schools or provision causing most concern. The council has generated a number of innovative approaches to address the underperformance of some black and minority ethnic male groups as well as white boys in some disadvantaged areas of Birmingham, and outcomes show signs of improvement. Provision for children educated other than at school (EOTAS) is very good. Most children and young people can access a wide range of enrichment and leisure activities. The youth service, through its many projects and activities, provides young people with enjoyable opportunities to develop personal

qualities, self-esteem and skills. However, some children and young people with learning difficulties and/or disabilities who travel long distances to school on a daily basis cannot easily access after school activities or other leisure provision near their homes.

25. Attendance levels match the national average and continue to improve across all phases owing to rigorous monitoring and tracking systems. Secondary attendance has improved year on year since 1995 and is now ahead of the national average for the second year running. Although unauthorised absence in secondary schools is comparatively high as a proportion of total recorded absences, this reflects a robust approach taken by the authority to authorising absences and challenging inappropriate absence. Support for behaviour is highly effective. Permanent exclusion rates in primary and secondary schools have decreased, and the subsequent rise in fixed-term exclusions provides a sufficient breathing space to plan more productive interventions and successful reintegration back into mainstream or more appropriate provision. Looked after children and young people receive very good support for their education.

Making a positive contribution

26. **The impact of all local services in helping children and young people to contribute to society is good.** Services combine well to support the social and emotional development of children and young people. Relationships between professionals and children and young people are constructive and the support given to parents is good. The area's anti-bullying strategy is effective and mentoring support is particularly well developed. Children and young people are routinely engaged in consultation. Strategic forums ensure that they make representations from schools and communities across the city. Councillors and managers respond well to their views and these have demonstrably helped to influence the shape of services at strategic and local levels. Multi-agency work to reduce anti-social behaviour, offending and re-offending is good. The proportion of young people in full-time education who attend school regularly is good. Offending and re-offending rates are reducing year on year. The youth service is adequate and its outreach work helps to reduce anti-social behaviour by providing alternative activities. The proportion of young people involved with the youth service, although still low, is increasing and good progress has been made towards involving young people in matters that most concern them.

27. Looked after children and young people are effectively encouraged to participate in strategic decision making through the corporate parenting executive. Their involvement makes a difference to how services are delivered. Their successes and achievements are routinely celebrated. Children and young people with learning difficulties and/or disabilities are involved effectively in decision making, with some evidence that they are influencing the shape of services.

Achieving economic well-being

28. **The impact of all local services in helping children and young people achieve economic well-being is good.** The LSC and the council work together very effectively to provide a broad and well coordinated curriculum for young people aged 14 to 19 which is well matched to the needs of local employers. Educational standards are good overall. The number of young people aged 16 to 19 not in education, employment or training or whose learning, employment or training circumstances are unknown, although above average, is reducing. The council directs regeneration activity to the most disadvantaged areas of the city. It works well with external agencies, such as Jobcentreplus, to improve the economic well-being of children and young people and families from all sections of the community. It has identified a particular need to raise levels of economic activity amongst the Bangladeshi and Pakistani communities and is taking suitable long-term action to address this need. Young people with learning difficulties and/or disabilities receive good support in school. However, there is insufficient specialist provision, particularly for those with complex needs, as they reach adulthood. Transition arrangements are unclear, leading to confusion and frustration for young people and their parents or carers.

29. Over the past two years, the council working with the voluntary sector, has radically improved its approach to meeting young people's housing needs. The range of accommodation and support services has improved significantly. Most looked after children now find safe accommodation and make good progress into employment, education or training when they leave care.

Service management

30. **The management of services for children and young people is good.** Good partnership working and shared ambitions and priorities for children and young people underpin services in Birmingham. Ambitions are good and are consistent with priorities in the community strategy, Local Area Agreement (LAA) and the council plan. The CYPP is informed by a good needs analysis using extensive data. Significant attention is given to equality and diversity issues, and services are designed and delivered with these in mind. Prioritisation is adequate, but priorities in the CYPP are not ranked and the shift from high intervention to preventative services is not explicit. Agencies have allocated finances and staffing to meet priorities, but this is not in the CYPP.

31. Capacity is good overall. Good leadership has led to improvements in education and social care. Children's services are a greater priority in the health service than before. There are risks from the high costs of non-council provision of looked after children which the council recognises. The council's use of resources and value for money are adequate. Performance management is good. The Partnership Board is actively managing performance, and within the council there is a strong culture of performance management throughout. The self-assessment is sound and demonstrates a good knowledge of strengths

and weaknesses across the partnership. Based on this, and improvements over the last two years, the capacity to improve is good.

Grades

Grades awarded:

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

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

Recommendations

For immediate action

The council and its partners should:

- improve quality of care planning and case file recording in social care services.

For action over the next six months

The council and its partners should:

- establish effective systems to identify and safeguard privately fostered children
- improve the rigour of quality assurance processes in social care
- improve services for young people with learning difficulties and/or disabilities, including access to leisure activities and transition plans to help them move to post-16 provision and to adult services
- clarify how the change from high intervention services to preventative services will be implemented, including the ranking of priorities
- provide age-appropriate facilities for 16 and 17 year olds with mental health problems.

For action in the longer term

The council and its partners should:

- reduce the number of young people not in employment, education and training.

Main Report

Outcomes for children and young people

32. **Outcomes for children and young people in Birmingham are good.** There are, however, variations in health outcomes across the city. Overall, children and young people appear safe and those most at risk are adequately protected. Children and young people feel safe at school and within their localities and fears of bullying or anti-social behaviour are low. The children and young people from black and minority ethnic groups, who were surveyed or met during this review, feel that their heritage is appreciated and respected. Children and young people, including those with learning difficulties and/or disabilities, achieve well at school and make good progress. Educational standards are good and improving, particularly in secondary schools and in further education and training. Attendance is similar to that found nationally. Children and young people are involved in the city's rich menu of high quality cultural, artistic and sporting activities. Consultation processes are good. Many children and young people consider that it is easy to have a say and to

contribute positively to school life. They make a difference to the way in which things are run, for example in the choice and provision of community-based activities. They are prepared well for working life, with increasing numbers undertaking vocational skills programmes, staying on to study full-time at age 16 or progressing to university. Children and young people with learning difficulties and/or disabilities are often able to take part in these activities, although transition for them to adult services is not good enough. Most looked after children attend school regularly, achieve well at school and enjoy a range of cultural and sporting activities.

33. Children and young people are generally healthy. The health of children and young people is improving but Birmingham faces significant health challenges and inequalities remain across the city. The percentage of GP practices providing child health surveillance services are variable, with some areas below and others in line with the national average. The health of looked after children is good overall and annual health assessments meet the national average. Children with disabilities are generally healthy but these young people require more health support when transferring to adult services.

34. Infant and perinatal mortality rates are worse than the national average. The percentage of low birth weight babies is above average and the proportion of mothers who breastfeed their babies is low. The proportion of diagnosis of chlamydia for young people under the age of 16 and for 16 to 19 year olds varies greatly across the city, as does the number of expectant mothers who smoke. In some parts of Birmingham these indicators match the national figures, but in others they are worse than the national averages. The teenage pregnancy rate is worse than the national average but falling at a rate that exceeds the national trend.

35. Immunisation rates at the ages of two and five compare well with the national average. The incidence of measles recorded for children under one and for 15 year olds is below the national average. The oral health of children and young people is good, with the number of decayed, missing or filled teeth being below the national average. Levels of obesity are high and up to a quarter of five to 15 year olds are overweight. A range of relevant strategies is in place to address this issue. Access to A&E services is good but only one department across the city has dedicated children's nurses on duty. Consequently, children share adult services and, at some specific times of the day, a child-friendly environment is not available. The Drug Action Team assesses and treats young people identified as substance misusers in a timely manner, and admissions to hospital for drug-related disorders, although above the national average, are managed effectively.

36. Children and young people appear safe. Children and young people are informed about the risks to them through a variety of means. Birmingham is responding seriously to bullying issues and effective anti-bullying measures lead to most children and young people feeling generally safe and protected from bullying. Levels of referrals as a result of domestic violence are high and

steps have been taken to raise the awareness of some of the most vulnerable children to the risks of abuse and what they can do to protect themselves. Some children have already benefited from more coherent and joined up services through the pilots for the Common Assessment Framework (CAF). Children in need have sharper initial assessments leading to a more focused response to their needs. All children on the child protection register have an allocated, qualified social worker. Almost all protection plans are reviewed within timescales, although some need to be coordinated more effectively. Timescales for initial and core assessments are rapidly improving from a low base. The time taken from referral to first child protection conference has sometimes been outside timescales, but this is now improving with managerial attention. The length of time during which children remain on the child protection register as well as re-registration rates are within target.

37. Thresholds to access services are high. Services are rightly targeted to children most in need but the demand in Birmingham is such that children who require family support have limited access to social care services. Children at risk of becoming looked after are being helped to remain with their families where this is in their interests, through the targeted family support teams, which are valued and effective. Some vulnerable children are supported through the voluntary sector and this increases capacity. The council has recognised the need to identify privately fostered children through a public awareness campaign but numbers receiving services are still low. Although a significant minority of looked after children do not have a qualified allocated worker, these are children in long-term stable placements who are allocated unqualified but supervised workers. A proactive approach is taken to recruit and retain staff, with some recent success. More children in residential care are now benefiting from good quality services, although there is still more to do, with many placed out of council care. The needs of disabled children are also now being identified, so that more can receive services to meet their needs.

38. **Children and young people achieve well.** Children and young people achieve good educational outcomes. Parents and carers receive effective early years support from a range of partner agencies. Education standards on entry to schools are below average, particularly in communication, language and literacy skills. The proportion of children whose parents are asylum seekers or economic migrants and who have little or no English language is high. Children make good progress, however, as they move through their primary school, with results matching the average of similar authorities by age 11. Results continue to improve at ages 14 and 16. Challenge and targeted interventions from the council across primary and secondary phases have been highly effective and, in 2006, results of young people achieving five GCSEs at grades A*- C were at their highest ever at 58.9%. Targeted approaches have been used effectively to address the underperformance of black and minority ethnic groups, particularly boys from black African Caribbean and Pakistani communities, the impact of which shows gradual but steady improvement. More generally, the low attainment of white boys from poorer areas of the city has required multi-agency approaches to tackle disaffection as well as more

focused programmes tailored to meet their specific learning needs. Again, these initiatives show encouraging signs of improvement.

39. The council is strongly committed to inclusion. Children and young people who are looked after receive good access to support from the specialist LACES and are generally making good progress. Their results at GCSEs match those in similar authorities and the proportion of those achieving five GCSE at grades A*- C is above average. Results for those leaving care achieving at least one GCSE or equivalent was 60% in 2005, well above the statistical neighbours and national averages. Children and young people with learning difficulties and/or disabilities make good progress and achieve creditable results at age 16. Data shows an improving trend in their accreditations, with 86% of pupils with special educational needs achieving at least one entry level qualification at age 16 in 2005.

40. Most children enjoy school and attend regularly. The monitoring of attendance is rigorous and improvements have been made across all phases, including in special schools and in the attendance of looked after children who attend mainstream schools or alternative provision. Secondary attendance has improved year on year since 1995 and is now ahead of the national average for the second year running. Unauthorised absence in secondary schools is comparatively high, as a proportion of total recorded absences, reflecting the robust approach taken by the authority to authorising absences and challenging inappropriate absence. Primary and secondary permanent exclusions are reducing and fixed-term exclusions, although high, are being used productively to ensure the successful return to mainstream provision. Most children and young people engage in a wide range of leisure and play activities, including those provided by extended schools and the youth service programmes.

41. **Children and young people have a good range of opportunities to make decisions and take personal responsibility and many make a good contribution to their communities.** Most children and young people, including those looked after and those who have learning difficulties and/or disabilities demonstrate the necessary skills and confidence to comment on and influence issues that matter to them. Councillors have established good formal relationships with young people who routinely make representations to elected members or relevant officers. Most children and young people enjoy these experiences, are proud of their communities and have a clear vision for their future.

42. Children and young people benefit from positive relationships with professionals, workers and staff. They support others well through established peer mentoring and other support mechanisms and show good social adjustment and sensitivity towards each other. Children who have experienced separation or bereavement receive relevant and timely support. Services are sensitive to the needs of young families from ethnic minority groups and young people from these communities gain confidence as a result. Children and young people are responding well to the programmes which exist to reduce

anti-social behaviour. However, some programmes are limited in range and scope. Young people are effectively engaged in multi-agency initiatives aimed at reducing crime, and offending and re-offending rates are reducing year on year.

43. Opportunities to celebrate children and young people's successes are generally used well, with some very good examples for those who are looked after. Children and young people who have learning difficulties and/or disabilities enjoy good levels of support to help them participate in decision making.

44. **Children and young people are able to achieve economic well-being and are prepared effectively for working life.** The proportion of young people who achieve a full L2 qualification at aged 16 or older is above that achieved by Birmingham's statistical neighbours. It is rising consistently and more quickly than the national trend and is now in line with the national average. Similarly, the proportion of young people who achieve a full L3 qualification by age 19 is also rising, although the improvement is less marked and achievement is in line with statistical neighbours. Skills training for families is well planned and targeted effectively to meet the needs of children and young people living in economically disadvantaged areas. Such training successfully increases employability skills and enables disadvantaged young people and their parents to find employment and enhance their economic status. Most young people are effectively prepared for working life, although there are too many 16 to 19 year olds who are not in education, employment or training or whose learning, employment or training circumstances are unknown. Recent improvements have been made with this, but historically progress has been slow.

45. Over the past two years, the council and its partners' performance in housing has improved greatly. All the main performance indicators have improved significantly and are now at least comparable with national comparators. Homelessness rates and lengths of stay in temporary accommodation have more than halved, new admissions to temporary accommodation have improved every month since January 2004 and the success rates in preventing homelessness after initial application are improving each month. Young care leavers are now given a good choice of three locations for their first independent home and vulnerable young people receive effective individual support to live independently. Similarly, a good proportion of young care leavers progress promptly into education, employment or training. The number of looked after children who have personal education plans has improved and is now satisfactory.

46. The council does not provide or commission sufficient services for children and young people with learning difficulties and/or disabilities after the age of 16. The proportion in receipt of direct payments is low and is not increasing. There is too little specialist provision for young people with complex needs as they approach adulthood and too few have clear transition plans.

The impact of local services

Being healthy

47. **The work of all local services in securing the health of children and young people is adequate.** The Children's and Young People's Board is leading the initiatives to address health inequalities in the city, with the development of multi-agency working to address longstanding issues such as high infant mortality and high teenage pregnancy rates. Parents and children receive particularly good support in those areas with a children's centre. The Birmingham Healthy Schools scheme is meeting its interim targets for implementation, but consistent improvements in children and young people's health and fitness have yet to be seen.

48. The Birmingham Health and Well-being Partnership has developed a good action plan to tackle infant mortality supported through neighbourhood renewal, but the impact of the plan has yet to be seen. Good local initiatives, such as the Baby Café and breast-feeding friendly environments, have been introduced to encourage mothers to breast-feed. However, breast-feeding uptake is low across the city. National immunisation targets are being met, with good programmes in place to maintain standards.

49. Healthy lifestyle choices are promoted well. The Life Education Centre programme reached over half of all Birmingham schools during 2005. Parents and carers are invited to attend workshops with their children to learn about healthy lifestyles. Health visitors operate child health clinics in some children's centres, which have proved popular due to easy access. Almost all secondary schools and 85% of primary schools have a drugs education policy developed effectively in partnership with the health education unit. Free swimming is available for children aged between 4 to 16 to encourage healthier lifestyles. A multi-agency nutrition and health task force was established in October 2005. The task force works adequately to complement the Birmingham and Solihull obesity strategy. In addition, the city has developed a comprehensive sports and physical education strategy. A number of projects have been established to tackle obesity, including Fit Fun and Training, Villa Vitality, where children and young people go to a local football club to learn about exercise, and Food Net, which offers cooking sessions. The impact of the activities of the task force has yet to be seen.

50. A number of initiatives coordinated by the multi-agency Birmingham teenage pregnancy steering group are in place to address the high rate of teenage pregnancy. These include 'Youth Information Shops', 'Baby Think It Over' and 'Hear for You', which offer contraception and multi-agency advice services. A 'Speak Easy' project has been launched to help parents to talk about sexual and relationship education. These initiatives are having a positive impact as the teenage pregnancy rate is falling more rapidly than the national trend. School nurses offer confidential drop-in advice at most secondary

schools. A city-wide project to reintegrate young mothers back into school has been effective.

51. The promotion of children and young people's physical health is adequate. Dental health targets are being met. Most schools in Birmingham offer two hours of physical education each week. To improve pupils' participation in exercise some schools have introduced lunchtime physical education and a range of inclusive sports events. There is a common framework for universal health needs, with timely access to health assessment services. Good provision is made for children and young people needing to access accident and emergency services. A number of acute hospitals with A&E departments provide services for children and one offers dedicated 24-hour access.

52. The inter-agency approach to improving the mental health of children, through the CAMHS Partnership Board, is well established and includes representation from the city council, health services and the voluntary sector. This has enabled the effective development of an integrated structure providing a single point of access for referral within each PCT. A number of schools are involved in implementing the Social and Emotional Aspects of Learning programme which complements the local nurturing and resilience project. Both projects are being phased into schools and their long-term impact has yet to be seen. The emotional needs of children and young people are addressed well through the school curriculum and school nursing service. However, there is no designated provision for 16 and 17 year olds with mental health problems.

53. There is an effective designated health team for looked after children. Although only 78% of looked after children receive annual health assessments and dental checks, there have been notable recent improvements. A well established programme of activities prevents teenage pregnancy. All looked after children are registered with their GP and links with other health services are effective. There is an easily accessible and designated CAMHS service for looked after children.

54. The specialised children's community health and specialist education services work adequately to meet the needs of children and young people with physical and/or sensory disabilities. However, there is insufficient inter-agency information regarding their health needs, and transfer arrangements for these young people to adult services are weak. A multi-agency steering group has been established to improve transition processes.

Staying safe

55. **The work of all local services in keeping children and young people safe is adequate and improving.** Children and young people and their carers are informed about the risks to them through a variety of means and the quality of publications by the Birmingham Safeguarding Children Board (BSCB) is good. Schools are active in promoting the safety of children in their care and bullying is taken seriously, including in residential children's homes. The BSCB has appointed an anti-bullying coordinator to improve services

further. The priority given to children at risk of domestic abuse is facilitating an effective multi-agency response to these children.

56. In most settings children are provided with a safe environment. Rigorous procedures and guidance are in place to ensure that all schools report racist incidents. Schools undertake risk assessments for the health and safety of their pupils. There is a coordinated approach to training across agencies in the care and control of children who require manual handling. Emergency and disaster planning includes meeting the needs of children and young people. Some residential children's homes provide a safe and secure environment and the council is taking steps to ensure that standards are consistently met in all children's homes.

57. The council's work to minimise incidence of child abuse and neglect is adequate. There are up to date policies and procedures through the BSCB. Local Multi-Agency Public Protection Arrangements (MAPPA) are linked with the BSCB, including a MAPPA specifically for young people. Criminal records bureau checks are well managed across agencies and employment practices are safe. Multi-agency risk assessment conference processes are well used. There is an effective duty and assessment system in social care with a screening and signposting team in each area. However, the high thresholds for undertaking initial assessments are not always well understood by other agencies and voluntary sector groups. There is comprehensive management information and a good performance management framework which is helping to improve practice, although mechanisms for assuring and monitoring quality of services are still to be fully developed. Privately fostered children have only recently been given sufficient focus. There is a comprehensive service for children, young people and families seeking asylum, although the high and increasing volume impedes the timely provision of services for some.

58. Agencies generally work well together to provide services to children at risk of harm, although this can become compromised by staff shortages. The BSCB has established better understanding of safeguarding across the agencies. The infrastructure and training to support the development of the CAF are sound and helpfully aligned to the extended school clusters.

59. Arrangements for information sharing are well developed and some protocols are in place. There is a sound process for undertaking serious case reviews and learning the lessons from them. Designated staff in schools are well supported. All NHS trusts have named doctors and nurses. All children on the child protection register have a named qualified social worker. The complaints service is now centralised, with dedicated investigative officers and children know how to complain. There is an effective and accessible advocacy service, which visits all internal residential homes monthly. All these arrangements have a positive impact on outcomes for children and young people in Birmingham. However, social care case recording, assessment and analysis are of inconsistent quality. The way chronologies are used limits their usefulness in drawing together key events in children's lives and providing a

diagnostic tool. Some case files do not evidence the implementation of child protection or care plans. These issues are recognised and are already receiving managerial attention. There is a range of family support services provided by voluntary organisations and community and faith groups which are currently being mapped. However, these are insufficient to meet local needs. Inter-agency training in safeguarding children has been impeded by a poor service provider, although this has now been rectified.

60. Services to establish the identity and whereabouts of all children and young people are generally adequate, although the volume of newly arrived children and young people passing through Birmingham is considerable. This provides a challenge to the area. There are very good systems and clear protocols, through schools and the education service, to track pre-16 year olds missing from home and from care, including asylum seeking young people. Agencies work well together to reduce the incidence and impact of trafficking and sexual exploitation.

61. Action is taken to avoid children and young people becoming unnecessarily looked after by the council. The duty and assessment screening teams signpost families to local resources effectively. However, there is a gap in preventative family support services. For children at high risk of becoming looked after, the targeted family support teams provide a timely, short-term service to children aged 8 to 15 and their families, which reduces the level of admissions to council care. They also work effectively with looked after children to facilitate plans for their return to home.

62. Most children live in safe environments. However, some issues in residential and foster care remain to be addressed, for example, when children are placed over the capacity of foster placements or when compatibility risk assessment has not been undertaken. Reviews of fostering and residential services are now centrally managed to facilitate greater consistency and oversight. There are insufficient in-house foster placements to meet local need and a quarter of looked after children are placed out of council provision. A commissioning strategy is in place which has led to better value for money, but has had limited impact to date on outcomes. The safeguarding children unit provides independent chairs who encourage the participation of children, young people and their carers where appropriate. Cases are reviewed within timescales, and placements out of council are reviewed as rigorously as those in council. Foster carers receive timely information about children at the point of placement, although other agencies do not always feel well informed.

63. Services to safeguard children and young people with learning difficulties and/or disabilities are underdeveloped. A specialist independent reviewing officer is able to use a range of methods to communicate with disabled children. However, until now, there has been no overall strategy for disabled children and only a small number are receiving packages of care. The voluntary sector provides services for disabled children, but only in some areas.

Enjoying and Achieving

64. **The work of all local services in helping children and young people to enjoy their education and recreation and to achieve well is good, with some very good features.** There are coherent strategic plans for the transformation of education and integrated children's services, which successfully amalgamate a raft of local and government initiatives including Building Schools for the Future, extended schools provision and academies.

65. Children's centres are located in areas where need is greatest and provide parents and carers with wide ranging support including easy access to health services, early years advice and guidance and family learning opportunities. Centres work closely with extended school clusters and the exchange of skills, resources and good practice is promoted across the network of participating partner agencies to ensure long-term sustainability of provision. The quality of childcare and early years provision is good overall. Targeted speech and language activities provide much needed support to the high percentage of families newly arrived from Africa and Eastern Europe and are successful in accelerating children's progress. Other activities, such as healthy lifestyle workshops and literacy classes help parents and carers develop their children's social and emotional well-being, with very good attention given to the cultural needs of those families from different ethnic backgrounds. Early years staff receive comprehensive professional development through the council and partner agencies, including the PCTs and other specialist providers.

66. The number of schools identified by the education service as causing concern is high, but robust school improvement processes provide effective support and strong challenge to those requiring significant improvement. Steady reductions in the number of primary schools below floor targets, improvements in results for 7, 11 and 14 year olds, and the continuing rise in attainment at age 16 are good indications that these interventions are making a significant difference to educational outcomes for children and young people. Highly effective and targeted support for Black African Caribbean, Asian heritage and underachieving white boys has also ensured a gradual improvement in their attainment levels. Monitoring of performance and tracking progress is outstanding for all cohorts of pupils. Strategies utilise data extremely efficiently to ensure interventions are specific and outcome driven. The school improvement service is highly committed to inclusion and works diligently to ensure programmes are well matched to meet specific needs and are delivered effectively at the local level. Looked after children and young people are well supported in their education. Monitoring and tracking of their progress is good and a team of outreach workers from LACES ensures that children receive good support within the city and when placed outside Birmingham. This is having a positive impact on their achievement and standards.

67. Pupils' attendance has improved for the ninth consecutive year, outperforming statistical neighbours and national trends, but there is still work to be done to reduce unauthorised absences in some secondary schools. Targeted initiatives from the education welfare service and robust monitoring processes have been welcomed by schools. Strong focus on the attendance of looked after children has improved their attendance rates. Good policies and plans address behaviour effectively, and support provided by the behaviour support service, the education welfare service, EOTAS and Pupil Connect is well regarded by schools. Primary and secondary permanent exclusions are reducing, and although fixed-term exclusions have increased, this time is used productively through sound partnership arrangements to identify the most appropriate interventions for the child. Extended leave for families from some minority ethnic communities is a major concern for the city and both complex and sensitive. Strategies to support those pupils and schools most affected have been carefully implemented and progress is tentative.

68. The EOTAS provision is very good. The education welfare service Pupil Connect Team service maintains and monitors a comprehensive database of those children out of school, educated at home and in alternative provision and takes swift action where provision does not meet individual needs. In most instances, young people are placed within 20 days of first becoming known to the EOTAS service, many of whom are newly arrived foreign nationals with multiple and complex needs. Very good monitoring of children missing from education ensures prompt action, and excellent partnership protocols are in place to enable good tracking and information sharing.

69. Most children and young people, including those looked after, have access to a wide range of leisure and play provision offered by the local area. However, for children and young people with learning difficulties and/or disabilities provision is limited, particularly for those children who are transported across the city daily to school. Recreational activities generally are used more widely by children under the age of 14 years, at which point there is a dramatic decline in participation. Innovative art and music activities are offered freely across a range of venues, particularly during summer months, and attract large numbers of young people from diverse and multi-ethnic backgrounds. Museums are also well used and many libraries provide homework clubs and weekend activities. The youth service provides an adequate range of enjoyable experiences which develop young people's personal qualities, self-esteem and skills.

70. Support for children and young people with learning difficulties and/or disabilities is good. Statutory assessment processes are timely. Early identification of need is satisfactory and parents and carers receive relevant information to help them make decisions about provision for their child. Very good data systems enable the education service and schools to undertake thorough needs analyses and ensure that support and resources match the specific needs of the child. Transition support for children with learning difficulties and/or disabilities is effective pre-16, with effective liaison to ensure

smooth transfer from early years to primary and secondary schools. Systems are regularly reviewed and updated. The Action for Inclusion strategy is sound and a small group of parents are involved at strategic level in formal consultation. Where possible, integration into mainstream provision is actively pursued and often successful.

Making a positive contribution

71. The work of all local services in helping children and young people to contribute to society is good. Children and young people's social and emotional development is well promoted through early years, schools and the Healthy Schools programme. The anti-bullying strategy is linked effectively to other initiatives for keeping children safe. The quality of relationships that exist between professionals and children and young people are a strong feature and are leading to improved outcomes. Specific multi-agency support programmes for children and young people and their parents are particularly effective, for example, the targeted work with young mothers and the good support for asylum seekers.

72. Children and young people who face change and challenge are provided with good levels of support leading to improved outcomes, for example, in their personal development. Support programmes for children who have experienced a traumatic event and for young carers are good. Bereavement counselling helps children come to terms with separation and loss. Schools use learning mentors well and programmes to help parents support their children in education are good. Children and young people provide sensitive support to each other and peer mediation is particularly effective at times when young people need it.

73. The council demonstrates a strong commitment to encouraging children and young people to participate in decision making. The participation framework and Hear by Rights standard provide a sound basis for this work. Consultation is embedded and built on a successful model of children and young people's active involvement, including school councils. Effective forums exist for children and young people to debate and make decisions on local issues that matter to them, for example, community youth councils. Their views and aspirations are demonstrably influencing the shape of services through formal systems. Links made between young people, councillors and officers provide an effective platform for the views of all young people to be formally considered. The council is raising awareness, knowledge and understanding of aspects of responsible citizenship with a positive impact on community cohesion in some areas of the city. The youth service promotes equality, inclusiveness and diversity particularly well, with several projects showing that young people are acting within their local communities to help their peers to access community services and behave responsibly.

74. Action to reduce anti-social behaviour is good overall. The community safety partnership has determined its priorities for the next three years through effective public consultation, leading to a good balance of local and national objectives. The local delivery of youth work in communities is effective, with high focus on promoting good behaviour and working with children who are at risk of exclusion. The youth service is reaching vulnerable and hard-to-reach young people and relationships with adults are good. Outreach work helps to reduce anti-social behaviour by providing alternative activities. Good progress has been made towards involving young people in matters that most concern them. The take-up of young people involved with the youth service has increased but is still well below the national target. Accreditation programmes are limited in scale and scope and partnership working is leading to some duplication of activity.

75. Action to reduce offending and re-offending is good. Plans to reduce youth crime are comprehensive. They involve effective multi-agency work and take a holistic approach. Action taken by the police to evaluate impact is good and crime rates are lower than in similar authorities. The youth offending service (YOS) makes a good contribution to crime reduction through a range of activity and reparation projects for young people who offend or are at risk of offending. Self-esteem is promoted well through certificates awarded for the successful completion of some projects. Education is promoted well in each of the five YOS teams. Teachers carry out assessments of literacy and numeracy linked to individual education plans. Young people in custody and those who have served their sentence have their education needs met effectively and further support is continued into the community. The proportion of young offenders in employment, education and training is significantly better than the national average. Community safety wardens are effective in helping young people take pride in themselves and in their community.

76. Opportunities for looked after children to make their views known are good. Levels of participation in activities which have influenced the shaping of some services are good and children and young people in all residential homes can communicate their views, for example through Viewpoint. Looked after children participate well in planning day-to-day issues and their involvement in statutory reviews is improving and is now satisfactory. The corporate parenting executive, which includes young people, is effective at raising the profile of looked after children across all services, and representations made by young people are considered and acted on. The Chance to Shine programme provides children and young people with an opportunity to attend a formal tea party with the Lord Mayor where they receive awards for progress made and targets achieved.

77. The involvement of children and young people with learning difficulties and/or disabilities is generally good and they are helped to participate in decision making and to shape services, for example in schools. The Ask Us city-wide event which featured specific presentations from children and young people with learning difficulties and/or disabilities demonstrates agencies'

commitment to engage all young people equally. Multi-agency work and resources to support these children and young people's integration into mainstream schools is good.

Achieving economic well-being

78. The work of all local services in helping children and young people achieve economic well-being is good. The council and its main partners, particularly the LSC, cooperate very effectively to provide most young people aged 14 to 19 with a broad and well coordinated curriculum. The LSC has rigorous and inclusive arrangements for reviewing local education and training. Each review highlights particular themes or occupational areas, which are well chosen for their relevance to the local economy and local community. The LSC involves a wide range of stakeholders. The reviews reach impartial, evidence based and hard hitting judgements about standards. They set meaningful and challenging objectives for improvement for which all stakeholders share relevant responsibility. All secondary schools and colleges belong to local collegiates which work together well to provide a good range of well planned opportunities for young people. Work-based learning providers are well represented on the relevant management committees and steering groups. The council and the LSC provide good strategic direction to the collegiates to work together and deliver varied and flexible training and education for young people.

79. There are good arrangements to provide vocationally based training opportunities for young people aged 14 to 16 as an alternative to mainstream school. Mainstream and special schools cooperate closely to ensure that the city-wide curriculum takes account of the needs of children and young people with learning difficulties and/or disabilities. Some of these young people also benefit from small scale but effective projects as they get older. For example, a specialist training provider provides specific E2E training programmes for young people aged 16 to 19 who have multiple needs, and the council provides a small but successful scheme to assist young people with learning difficulties and/or disabilities to travel independently. The authority recognises the need to extend this provision.

80. The council manages family learning and children's centres very effectively to help those families who are least well off reach economic health and financial independence. Family learning programmes are well targeted at disadvantaged areas and are based on a sound interpretation of demographic and economic data. Many children's and community centres are flourishing, with good attendance and a wide range of meaningful activities for children and young people. The council and its partners coordinate activities very effectively to meet overall family needs through well designed projects which bring a range of benefits. For example, the Gateway project provides successful training programmes in family support for parents and other adults from disadvantaged communities. It delivers increased employability for adults alongside a better trained workforce for children.

81. The council has recognised that it has low and static levels of economic activity within some minority ethnic communities. In conjunction with Jobcentre Plus it contributes effectively to well designed initiatives, such as the New Deal for Communities and Enterprise in Communities, to encourage greater participation from members of these communities.

82. Where major regeneration work takes place, the council works well with local community groups to meet the needs of children and young people. They are consulted about their preferences for the location and type of activities they wish to see. There are particularly strong links between regeneration and the skills and training that young people and families need in order to achieve employability and economic well-being. In 2005, the council commissioned a thorough and wide ranging report into the impact of regeneration on education and training. Meaningful actions have been well communicated and applied to new and existing projects and suitable high level monitoring arrangements are being introduced.

83. Historically, Birmingham council had a poor record in providing suitable accommodation for children and young people from less well off families, and for young care leavers. However, over the past two years, the council has radically improved its approach to meeting the housing needs of families and young people. It has implemented good procedures to meet the housing needs of vulnerable children, young people and their families. There are new arrangements for managing housing, with close cooperation between council departments and external partners. Housing advice is now provided from a good range of convenient locations across the city. There is a strong emphasis on taking action to prevent families or young people from becoming homeless and to reduce reliance on emergency accommodation. The council's partners from the voluntary sector provide timely advice and effective integrated support to young people aged 16 to 25 who face difficulties with housing alongside other barriers to full participation in the community, such as poor educational achievement and low self-esteem. It particularly engages well with teenage mothers.

84. The council has made recent improvements to transition procedures to help young people leaving care to become economically independent. Good arrangements are now in place. There is an effective multi-agency approach involving Connexions, Jobcentre Plus, housing services and the voluntary sector to prepare pathway plans to support care leavers to live independently. The council learns well from the comments and experiences of young people. Care leavers are now given a choice of three housing options in different locations, and are given good support to live independently, based on their individual needs. Jobcentreplus and Connexions cooperate effectively to provide easy access to Jobseekers Allowance for care leavers who require it. The council produces helpful guidance booklets on the challenges faced by care leavers, including managing money and obtaining financial assistance. There are improving arrangements to support the social and educational welfare of looked after young people and care leavers after the age of 16. However, the post-16

care leavers team is not taking sufficient leadership and coordination of this service. Six colleges now have designated pastoral staff to support care leavers and there is close support from the LACES service and Connexions personal advisers.

85. The council and its partners prepare most young people effectively for working life. In conjunction with Connexions, schools provide a wide range of suitable work experience opportunities. Connexions provides young people across the 14 to 19 age range with satisfactory information, advice and guidance about learning and work. For young people aged over 16, training providers funded by the LSC provide a satisfactory range of relevant work-based learning and E2E courses. However, participation rates are low and apprenticeship programmes are still not given full parity of esteem with academic education. There is no overarching and effective strategy to provide a comprehensive range of post-16 training and support services to engage all young people aged 16 to 19 in education, employment or training.

86. Birmingham does not provide sufficient specialist support for young people aged over 16 who have learning difficulties and/or disabilities, particularly those with complex needs. Too many are required to travel to locations outside the city. There is no effective overall strategy for the transition to adult services covering health, education and social care.

Service management

87. **The management of services for children and young people is good.** Good partnership working and shared ambitions and priorities for children and young people underpin services in Birmingham. The self-assessment is sound and demonstrates a good knowledge of strengths and weaknesses across the partnership. Based on this, and improvements over the last two years, the capacity to improve is good.

88. The council and its partners' ambitions for children and young people in the area are good. They are shared and well articulated by councillors and staff and are understood by children and young people and the community. The shared vision and objectives are clearly set out in the CYPP, which is owned by partner agencies who were fully involved in its development. The aim is to close the gaps in experiences and outcomes for the most deprived and disadvantaged groups and areas. The CYPP is consistent with priorities in the community strategy, LAA and the council plan.

89. The CYPP is informed by a good needs analysis using extensive data which has resulted in significant attention being given to disadvantaged groups. Children and young people's views were taken into account and influenced the content of the CYPP resulting in a greater emphasis on vulnerable children and young people. Equalities impact assessments are undertaken by partners. One completed on the CYPP itself resulted in greater prominence for disabled children and recognition of the importance of faith groups.

90. Prioritisation is adequate. Priorities are set out in the CYPP which take account of disadvantaged groups. The 11 most deprived wards have been chosen corporately as priority areas for 'closing the inequality gap' as they have high rates of multiple deprivation, high unemployment and poor health outcomes. These wards have a disproportionately high number of residents from black and minority ethnic communities and this focus for action is intended to reduce inequalities between different groups. Lead responsibilities, targets and milestones are clear in the detailed action plan and carried through into service plans. However, there is no ranking of priorities by the partnership and some targets are not challenging, for example, the initial and core assessments of children in need. Furthermore, the CYPP is not explicit about spelling out the change from high intervention to preventative services. Consequently, preventative services may not be available to children and young people early enough.

91. There is a gap in preventative family support services. A start has been made, with some preventative and integrated services already established and more now being developed. Twenty-four children's centres, reaching over 28,000 children under the age of five, are operational, with a programme for a further 43 to be in place by April 2008. The current provision of 32 extended provision clusters is ahead of schedule. Within agencies, there is prioritisation of services and focus. For example, the city council took the difficult decision to postpone improving services to children with learning difficulties and/or disabilities while it focused on improving frontline child protection and looked after children services.

92. Agencies have allocated finances and staffing to meet priorities but this is not in the CYPP. Alignment of budgets and allocation of staffing await the outcome of externally commissioned work on provision mapping as well as gaps and overlaps analysis. This work is not due to be reported until June 2007 and the council is aware of the need to minimise any risk of losing momentum or of establishing services that may need to be reconfigured subsequently.

93. The capacity of the council and its partners to deliver better outcomes for children and young people is good and is having an impact, for example, the improvements in educational achievements and school attendance of looked after children. Partners cooperate well strategically and children's services are now a greater priority in health services than before. This is reflected in all three PCT chief executives being members of the Children and Young People's Board and an assistant director from the council having a reciprocal place on a statutory sub-committee of a PCT board. The lead councillor for children is knowledgeable, chairs the partnership and is active in promoting children's services. Partners are working well towards Children's trust arrangements, although joint commissioning is underdeveloped. The voluntary agencies provide some valuable children's services, for example in accommodation, but these services have not yet been mapped and do not contribute fully. The partnership recognises that capacity can be increased further by greater involvement with the voluntary sector.

94. Good leadership by the Director of Children's Services and senior managers has provided energy and focus. The council correctly decided to limit initial restructuring in the new children's directorate to senior management. This enabled existing improvements in social care to be consolidated and further improvements to be made, for example in children's residential care. Headteachers are enthusiastic about the leadership and support provided by the council.

95. Staffing shortages are addressed well. Agency staff and the supervised use of unqualified staff have provided short-term cover for social worker vacancies. Longer term measures have been effective, such as mentoring, professional development, sponsoring final year students, 'grow your own' schemes and a scheme to recruit teachers from black and minority ethnic communities. These initiatives have not been coordinated, although a workforce development sub-group of the partnership has been established. Capacity has been increased in integrated settings by joint working, for example, health visitor and community midwifery services have been redesigned so that ante- and post-natal services can be delivered in children's centres, where other services for new mothers are located thereby increasing take-up.

96. The management of resources and value for money are adequate overall. The council's budget is well managed with no projected overspend. The medium-term financial strategy aligns the budget with priorities. The council has consistently funded education above government targets and in the last two years has increased funding of children's social care considerably with a combined additional £4 million invested this year. There are continuing financial risks from the high number, about a quarter, of looked after children placed in non-council provision. The council successfully negotiates block contracts with preferential rates. In the longer term it is continuing to invest in increasing its own fostering stock. The PCTs have responded robustly to budget pressures by ring fencing spending for children's services.

97. The council invests more in front-line education than similar councils and outcomes are above average and improving. Costs for social care are in line with similar councils, with relatively high expenditure on high intervention services and relatively lower expenditure on preventative services. Reductions in the high costs of looked after children in agency placements could be used to invest more in increasing preventative services. Partners have secured significant external funding which is improving outcomes for local people, for example, decreases in youth unemployment in Aston. The council has secured over £1 billion through BSF for rebuilding or refurbishing every secondary school over a 12 year period. Additional funding from sponsors is being sought to convert seven schools into academies. Benchmarking of costs is project focused rather than consistently applied. Some partnerships have aligned resources, resulting in increased cost effectiveness and improved outcomes, for example, in reducing first-time offending and recidivism.

98. Performance management across the partnership is good overall. The council's use of performance management in children's services is good; directly producing improvements in social care and education, for example the targeted school improvement service. A strong culture of managing performance is evident through to front line managers. The Children and Young People's Board has started to actively manage performance, supported by comprehensive reports but it is too early to evaluate the impact.

99. Current scrutiny arrangements include an education and lifelong learning committee and a children at risk task and finish group. Children's scrutiny is effective, for example, in improving CAMHS services to looked after children and considering services for children not on a school roll. Children and young people contribute to performance management, for example, the overview and scrutiny review of young people's involvement in decision making in education was undertaken wholly by young people and led to the council adopting the Hear by Rights standard.

Annex: The children and young people's section of the corporate assessment report

1. Overall, the council and its partners achieve good outcomes for children and young people in Birmingham, although there are variations across the city. Most children and young people are healthy and appear safe. Those most at risk are adequately protected. Standards achieved in education are good and improving.

2. Good ambitions to improve the life chances for children and young people have been set out by the local strategic partnership. Improving the education and work skills of young people as well as improving their health and well-being are key priorities of the council's corporate plan and the community strategy. A thorough audit of needs, based on extensive data, has identified gaps in services and outcomes across the city with significant attention given to equality and diversity. Performance management arrangements are well developed and services have been prioritised adequately to address some of the inconsistencies in the effectiveness of services, particularly in social care and health. Prioritisation is judged as being adequate because priorities in the Children and Young People's Plan are not ranked and the shift from high intervention to preventative services is not explicit.

3. Services are good overall and have a beneficial effect on improving outcomes for most children and young people. Service managers are aware of strengths and weaknesses in service delivery and monitoring of information in social care and education is usually detailed. Children most at risk from abuse are adequately protected through satisfactory multi-agency safeguarding arrangements. There is determined action to reduce the number of looked after children, although too many are still placed out of council provision. Attempts to commission and re-balance services to move towards a more preventive approach and avoid young people entering care are at an early stage of development. The council and its partners make good arrangements to provide children and young people with safe environments, particularly in addressing issues of bullying or racial harassment. The youth service is adequate. Efforts to increase the involvement of young people are proving successful. The service makes particularly strong provision to address issues arising from cultural diversity.

4. High importance is placed on ensuring that children and young people enjoy and achieve. Support for schools is very good. Attainment in 2005 compared favourably with similar areas for 7, 11 and 14 year olds and was well above similar areas for 16 year olds. The results for 2006 show a similar pattern, with further improvement in the GCSE results. The differences in the educational attainment of vulnerable young people are addressed well and gaps are reducing, although more needs to be done in some parts of the city. Many children enjoy school and attend regularly. Attendance levels have improved and now match those of similar areas and nationally. Permanent exclusions are

reducing and fixed-term exclusions, although high, are being used productively to ensure the successful return to mainstream provision. Provision for pupils who are permanently excluded is good. Looked after children achieve well and their results are, overall, better than the national average for looked after children. Children and young people with learning difficulties and/or disabilities make good progress.

5. There is good support to help children and young people to take personal responsibility and to contribute to their communities. Most children and young people in Birmingham feel that it is easy to have a say in the way things are run at their school and increasingly within their local communities. Effective multi-agency partnerships are in place to address behaviour issues through school-based projects and personalised support programmes. Action taken through youth inclusion programmes is effective in addressing anti-social behaviour. Support to help children and young people behave responsibly is good and action taken to prevent offending and to reduce re-offending is adequate. Despite some improvements in recent years, insufficient numbers of young people who offend are in full-time education, employment or training.

6. Opportunities to prepare young people for working life are good. The proportion of young people who achieve a full L2 qualification at age 16 is rising more quickly than the national trend. Similarly, the proportion of young people who achieve a full L3 qualification by age 19 is also rising and achievement is in line with statistical neighbours. Despite recent improvement, there are still too many young people aged 16 to 19 who are not in education, employment or training or whose learning, employment or training circumstances are unknown. Vocational options have increased for 15 and 16 year olds and good action is being taken to address skill shortage areas. Support for families is effective in enabling parents and carers to work or study. A good proportion of young care leavers progress promptly into education, employment or training. Most young people who have learning difficulties and/or disabilities are adequately supported but, after the age of 16, there is too little specialist provision for young people with complex needs, and transfer to adult services requires improvement.

7. Community regeneration initiatives are having a positive impact on the lives of some young people, particularly in disadvantaged areas such as Castle Vale. Over the past two years, performance in housing has improved greatly. Homelessness rates and length of stay in temporary accommodation have more than halved. Young care leavers are given a good choice of three locations for their first independent home and vulnerable young people receive effective individual support to live independently.