

Inspection of safeguarding and looked after children services

Middlesbrough

Inspection dates: 6 to 17 June 2011

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Age group: All

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About this inspection

1. The purpose of the inspection is to evaluate the contribution made by relevant services in the local area towards ensuring that children and young people are properly safeguarded and to determine the quality of service provision for looked after children and care leavers. The inspection team consisted of four of Her Majesty's Inspectors (HMI), one additional inspector and one inspector from the Care Quality Commission. The inspection was carried out under the Children Act 2004.
2. The evidence evaluated by inspectors included:
 - discussions with 38 children and young people and 55 parents receiving services, front line managers, social workers, other practitioners, senior officers including the Director of Children's Services, the Chair of the Middlesbrough Safeguarding Children Board, elected members including the Mayor and a range of community representatives
 - analysing and evaluating reports from a variety of sources including a review of the Children and Young People's Plan, performance data, information from the inspection of local settings, such as schools and day care provision and the evaluations of a serious case review undertaken by Ofsted in accordance with *'Working Together To Safeguard Children'*, 2010
 - a review of 30 case files for children and young people with a range of need. This provided a view of services provided over time and the quality of reporting, recording and decision making undertaken
 - the outcomes of the most recent annual unannounced inspection of local authority contact, referral and assessment services undertaken on 14 and 15 September 2010
 - interviews and focus groups with front line professionals, managers and senior staff from NHS Tees Middlesbrough Primary Care Trust (PCT), South Tees Hospitals Foundation NHS Trust and the Tees, Esk and Wear Valley NHS Foundation Trust.

The inspection judgements and what they mean

3. All inspection judgements are made using the following four point scale.

Outstanding (Grade 1)	A service that significantly exceeds minimum requirements
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Good (Grade 2)	A service that exceeds minimum requirements
Adequate (Grade 3)	A service that only meets minimum requirements
Inadequate (Grade 4)	A service that does not meet minimum requirements

Service information

4. There are 33,480 children and young people aged 0-19 years living in Middlesbrough, according to the 2009 mid-year population estimate. This accounts for 24% of the borough's total population of 140,500. The number of children aged 5–14 years has decreased by 16% since 2001 but there has been an increase of 12% in the number of children aged under five. The 2010 Indices of Multiple Deprivation ranked Middlesbrough as the eighth most deprived local authority area in England. In 2011, 60% of pupils lived in one of the 20% most deprived areas in England. In the January 2011 school census, 35% of primary and secondary school pupils were eligible for free school meals, significantly more than nationally. In the 2001 census, 6.3% of the population were from minority ethnic groups and this has increased to 8.7%. According to the January 2011 school census, 19% of primary and secondary school pupils were from minority ethnic groups.
5. Middlesbrough's Children and Young People's Trust Board (CYPT) is chaired by the lead member for children's services and comprises representatives from the council, health services, the Police, and the voluntary and community sector. A Children's Trust Executive, chaired by the Director of Children's Services, supports the work of the CYPT, overseeing the transformation work taking place across children's services.
6. The Middlesbrough Safeguarding Children Board (MSCB) was formed in April 2010 after dissolution of the South Tees Safeguarding Children Board. An independent chair was appointed in October 2010. The MSCB brings together the main organisations working with children and families in the town including the local authority, Cleveland Police, NHS partners, schools and the voluntary and community sector. It provides strategic oversight of safeguarding through quality assurance, reviews of operational performance and learning from serious case reviews.
7. At the end of March 2011, Middlesbrough had 76 approved fostering households and had 108 children and young people placed with independent fostering agency carers. The local authority works in partnership with Five Rivers Childcare Ltd to provide 11 residential care places across three homes in Middlesbrough. At the end of March 2011, there were eight young people placed with Five Rivers. In addition, there

were 43 young people placed in spot-purchased residential care with 24 different providers.

8. The Specialist Services unit comprises fostering and adoption services, the Children Looked After team, the Children with Disabilities team - providing a social work and family support service to disabled children and their families), the Transitions Team - for children with disabilities aged 14 years plus, Families First and the Pathways Team, which provides support to care leavers.
9. Initial contacts and referrals are handled by a new centralised First Contact Team, whose responsibilities include the common assessment framework (CAF). The Family Resource Team undertakes specific, sharply focused pieces of work with troubled families. Out of hours service cover is provided by a jointly funded and commissioned Emergency Duty Team (EDT) on behalf of the four neighbouring authorities in the Tees Valley. Stockton-on-Tees Council is the provider of the service. There are strong links with the EDT, with Middlesbrough running an on-call service manager duty rota to ensure that the EDT is always able to contact the service. The Safeguarding Services unit manages the independent reviewing officers (IROs), who conduct looked after children and child protection reviews, and the local authority designated officer (LADO).
10. The local authority looks after 348 children and young people, of whom 237 (68%) are of school age and 62% living in foster care placements. The number of looked after children has continued to rise since 2006 and the rate is high compared to national averages and statistical neighbours.
11. Middlesbrough has 13 Sure Start children's centres covering all of the relevant disadvantaged areas. There are 53 schools in the borough comprising 42 primary schools, four secondary schools, three City Academies, and four special schools. The local authority also maintains three pupil referral units and the Cleveland Unit, a specialist assessment centre for very young children with health needs, based at the James Cook University Hospital.
12. NHS Tees commission all health services for Middlesbrough. Middlesbrough and Redcar and Cleveland Community Services has recently transferred to the South Tees Hospitals Foundation NHS Trust, which now provides all local community services, including health visiting, school nursing, physiotherapy, occupational therapy, child and school health administration, the dedicated looked after children's nurse, speech and language therapy and the James Cook University Hospital which is the main hospital facility. The Tees, Esk and Wear Valley Foundation NHS Trust is the mental health trust that delivers a range of tier three and four child and adolescent mental health services (CAMHS).

Safeguarding services

Overall effectiveness

Grade 3 (adequate)

13. The overall effectiveness of services in Middlesbrough for safeguarding children and young people is adequate.
14. The strategic leadership of the council and its partners are ensuring safeguarding has the highest priority. The council has taken swift action to tackle areas for development identified in the unannounced inspection of its contact, referral and assessment services. This has ensured the most vulnerable children who need protection are safeguarded. There has been rapid improvement in frontline child protection services. Practice for screening contacts and responses made to see children where there are child protection concerns are highly effective. Performance on the rate of children who receive an assessment and the completion rate of assessments is outstanding. However, the council and its partners face considerable challenges in tackling entrenched deprivation, high levels of domestic violence and substance and alcohol misuse. The demands of these challenges are placing a strain on services. There are some examples of highly effective early intervention and preventative services such as the Partners and Parenting programme. However, early intervention and preventative services are insufficiently well coordinated or targeted and partner agencies are not fully engaged in supporting children in need and their families. This includes the use of the CAF. In particular, opportunities for effective early collaboration between schools and children's social care are insufficiently developed. Although practice for the inclusion of parents and carers in initial child protection conferences and reviews is outstanding social work caseloads remain comparatively high and parents report this limits the time social workers spend with them. Also not all newly qualified social workers are given the additional help and support they need. Improvements in the use of the electronic integrated children's system (ICS) are having an impact on the efficiency of the front line child protection service however this is not consistent across children social care where aspects of case recording and planning is not yet fully developed.
15. The MSCB is helping to improve impact on local safeguarding issues such as learning lessons from serious case reviews. However, the MSCB is a relatively new Board and it acknowledges the business plan is not fully comprehensive and oversight of staff safeguarding supervision arrangements across partnership agencies is not fully developed. Good progress has been made for the involvement of general practitioner's (GPs) in child protection and safeguarding but the quality of practice in sharing safeguarding concerns between GPs and health visitors is too variable. There is good multi-agency working and information sharing in

relation to children and young people missing from education and care and reporting and managing of concerns through the LADO process. The arrangements for responding to child protection concerns at the Accident and Emergency (A&E) unit at the James Cook University Hospital are good but record keeping in some health services is not consistently robust. Although there are good multi-agency public protection arrangements (MAPPA) and multi-agency risk assessment conference (MARAC) arrangements in place there is insufficient attention given to work with perpetrators. There is no single risk assessment tool for domestic violence across partner agencies and arrangements for notifying health visitors and school nurses about domestic violence incidents are not consistent. Although statutory guidelines in relation to complaints are consistently applied, the authority does not collate data to measure whether lessons learned from complaints are leading to service improvements. Although there are robust equality impact assessment arrangements in place the evaluation of user feedback does not always evaluate differentially for equality and diversity. The Annual Pupil Survey identifies that the vast majority of young people say they feel safe in Middlesbrough. Schools perform particularly well in this area and programmes which build children's resilience are embedded. More children are confident to report incidences of bullying, however children and young people state they are concerned about the impact of bullying. Although the number of children permanently excluded from schools is low the rate of children who are persistently absent from school remains high.

Capacity for improvement

Grade 2 (good)

16. There are competent senior officers across the partnership providing clear strategic direction and responding effectively to the changing demands for service. There are some good examples of shared budgeting and joint commissioning of services which are embedded and this is used effectively to ensure value for money. There is a good level of investment in the workforce through good access to good quality training. Areas of service strength and weakness are in the main clearly identified and targets for improvement are supported by increased funding and efficiency savings. Performance management and quality assurance are good. Services are improving and no services are deteriorating. There is effective challenge across the MSCB, CYPT and the council supported by good transparent reporting arrangements. The MSCB is delivering its core business effectively. There are many examples where the MSCB has driven improvements. Priorities are effectively actioned and progress is closely monitored. Progress on the achievement of targets for improvement for safeguarding services is good overall and the MSCB is well placed to progress further through the strong leadership of the independent chair and commitment of partner agencies. However, opportunities to learn lessons from the work of child protection chairs are not fully comprehensive. Performance on key areas of service operation is

consistently good such as the timely completion of initial and core assessments which is consistently outstanding.

17. The effectiveness of services to ensure that children and young people are safe and feel safe is good. Schools perform particularly well in the area of safeguarding and all six children centres inspected have been judged good for safeguarding. The local authority fostering service and the adoption service have also been judged good for safeguarding. The youth offending service (YOS) provides a range of intervention services which are effective. There is a trend of reduction over the last three years in the rate of first time entrants to the criminal justice system and those who re-offend. The involvement of parents and carers in initial child protection conferences and reviews is outstanding. Opportunities for children and young people, parents and carers to influence the shape of service and have a voice are good but the evaluation of user feedback is not consistent. There are examples where the views of children and their families have helped ensure services are sharply focused on meeting local need.

Areas for improvement

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

Within three months:

- ensure child protection chairs have sufficient capacity to meet the full range of their duties and responsibilities, exercise their authority to formulate child protection actions at conferences and contribute to strengthening arrangements for reviewing Children in Need (CiN) cases
- ensure child protection minutes are completed and disseminated to partner agencies in a timely manner
- ensure all partner agencies provide robust safeguarding supervision for staff and that firm arrangements are in place for the MSCB to agree and monitor compliance with supervision policies
- ensure all key partners including health visitors and school nursing staff are fully informed about domestic violence incidents where children or young people are present in the household
- ensure the formal complaints process is fully communicated to the children, young people and families receiving a service and report complaints information to the MSCB

- extend the existing arrangements for child protection chairs to report lessons learned from their child protection work
- ensure all newly qualified social worker caseloads are appropriate in respect of size, case type and level of managerial support needed
- review the high rate of children and young people who are persistently absent from school and refresh strategies to reduce absenteeism and to monitor the impact
- refresh existing initiatives and look for new ways to help reduce the incidence of bullying in schools.

Within six months:

- ensure early intervention and preventative services are fully coordinated across the partnership and are appropriately targeting children in need and their families
- reinforce the use of a single common assessment process across the partnership including those children and young people who experience domestic violence and ensure robust systems are in place to monitor the quality of joint interventions
- develop the ICS to ensure this is fully compliant with service specifications and fit for purpose
- strengthen the MSCB business plan and reporting arrangements to include the performance of all partner agencies and actions taken to drive service improvement
- develop a comprehensive framework for the auditing of children's social care case files and reporting systems and ensure these are linked to the reporting arrangements for the MSCB
- develop systems to fully capture user feedback for service evaluation and planning purposes.

Safeguarding outcomes for children and young people

Children and young people are safe and feel safe

Grade 2 (good)

19. The effectiveness of services to ensure that children and young people are safe and feel safe is good.
20. Schools perform particularly well in the area of safeguarding, and staying safe outcomes have been judged good or better in nearly all schools. Good work has been carried out in schools on a range of safeguarding issues including e-safety and bullying. This is supported by an effective multi-agency risk reduction program which is targeting children, young people and their parents in the community to tackle substance misuse and drug and alcohol awareness. Although the number of children permanently excluded from schools is low the rate of children who are persistently absent from school remains high. Nearly all schools have delivered the Healthy Schools programme and many primary schools have well developed social and emotional aspects of learning (SEAL) programmes.
21. The Annual Pupil Survey identifies that the vast majority of young people say they feel safe in Middlesbrough. Inspection monitoring reports about the pupil referral unit show that pupils feel safe. However, children are still concerned about bullying and children are being encouraged and supported to report incidents. Children and young people who spoke with inspectors said they feel safe in school and the local community and they demonstrated good awareness and knowledge of safeguarding issues and knew when and where to seek support and help.
22. All six children centres inspected have been judged good for safeguarding as have the local authority fostering service and the adoption service. There are effective arrangements in place to oversee private fostering cases and ensure publicity and awareness raising. However, the number of private fostering places reported in the borough remains low. A high rate of children who are referred to children's social care receive a formal assessment and the most vulnerable children who need protection are safeguarded by timely intervention and effective decision making. There is good multi-agency working and information sharing in relation to children and young people missing from education and care. Procedures and processes for the identification, tracking and support of these children and young people are embedded. This ensures that a high proportion of the children who go missing do not go missing again.
23. The LADO arrangements are robust with evidence of good working relationships with schools, police, and the council's human resources. This

is supported by effective reporting to the MSCB and appropriate and timely follow-up action has been taken in cases where this is a concern. Safe recruitment procedures meet the required standard. There are robust arrangements in place for the screening and approval of Criminal Record Bureau (CRB) checks. Procedures ensure that assessments are signed off by a senior officer and decisions are recorded appropriately.

24. The YOS provides a range of interventions which are effective. There is a trend of reduction over the last three years in the rate of first time entrants to the criminal justice system and those who re-offend. Support for young offenders who leave custody is increasingly effective. There is a strong focus on re-engaging young offenders in education, employment or training (EET). This rate has increased over the last three years and is now in line with the national average.

Quality of provision

Grade 3 (adequate)

25. The quality of provision, which includes service responsiveness, the quality of assessment and direct work with children, young people and families, and case planning, reviews and recording, is adequate.
26. Thresholds for access to children's social care services are known and understood by partner agencies. The council's contact, referral and assessment service has been redesigned so cases are prioritised through the First Contact Team. This ensures effective action is taken to signpost children to other services appropriately and that the most vulnerable children and young people who need protection are safe. There is an effective EDT service which is commissioned from a neighbouring local authority. This team is appropriately staffed and provision ensures continuity of service out of hours.
27. There is a range of early intervention and prevention services which are providing a good level of support for some families. Personal advisors in schools are helping to target hard to reach families and there are examples of effective multi-agency work to ensure children of newly arrived families are identified and school places allocated promptly. However, early intervention and prevention services across the partnership are insufficiently coordinated and targeted. There is no single risk assessment tool for domestic violence across partner agencies. Recent action has been taken to strengthen the domestic violence strategy but it is too early yet to see impact.
28. There has been a significant drive by the CYBT to implement CAF including the roll out of a substantial amount of training across the partnership. Work undertaken to streamline the CAF process and the assessment form are not resulting in sufficient improvements. The number of completed common assessments remains low and the quality of these assessments is poor. Also the contribution of schools to early intervention and prevention has not been fully utilised. As a result not all children who

could benefit from a common assessment receive one and not all families who need support get a service early enough.

29. Although the rate of referral, assessment and children subject of a child protection plan in Middlesbrough has stabilised the rate of child protection, activity undertaken by children's social care is higher than similar authorities. Social work caseloads are high and this is impacting on social workers' ability to work effectively with families. Nevertheless, high rates of children who are the subject of a referral go on to receive an assessment, and performance on the timely completion of initial and core assessment is consistently outstanding. There is insufficient attention given to ensuring Children in Need (CiN) cases are tracked and progress monitored and although this does not result in children being at risk it does lead to delays in implementing plans.
30. Parents who spoke with inspectors were very positive about the support they have received from the Family Resource Team. They reported that staff are very good at helping them make progress against the objectives set out in their CiN and child protection plans. The Partners and Parenting programme is an exemplar of good practice and very good engagement with parents leading to significantly improved outcomes for children. There are effective arrangements to ensure children and families whose first language is not English are enabled to participate fully in their assessments and planning CiN and child protection process.
31. The quality of initial and core assessments is improving and generally good overall. Practice ensures children and young people are routinely seen and seen alone as part of their assessments. They include a robust analysis of risk and protective factors which is leading to effective action to ensure children are protected. The involvement of parents and carers in initial child protection conferences and reviews is outstanding. Advocacy support for parents provided by a national voluntary organisation is good. There is good take-up of the service and this is helping to support children and families to be fully involved in their assessments and plans. Parents who spoke with inspectors reported that they are well engaged and highly satisfied with the level of their involvement in a range of assessment processes across partner agencies.
32. There is a good level of front line service provision to meet the needs of children with disability. Lessons learned from serious case reviews have helped to improve how these children and young people are engaged in their assessments. Although the unannounced inspection reported positively about the level of attention given to equality and diversity this is not consistent across the records of assessments seen during this inspection. The council has a strong commitment to listen to and resolve disputes. However, few children make formal complaints and parents who spoke with inspectors report that they do not know about the formal complaint process or how to access it.

33. Although case records are generally up to date there is no clear policy on how children's social care records should be maintained. The council operates a dual process of ICS and hard copy record keeping. Where social worker staff are making good use of the ICS and admin resources are deployed to support this, the system is increasingly effective. However, the functionality of the ICS remains underdeveloped. Children in need plans and reviews are not always completed on the ICS and management decisions are not recorded consistently.
34. Good supervision arrangements are in place across children's social care to ensure case planning and reviews are sharply focused on meeting children's needs. Although records of supervision are on hard copy paper files it is not always clear from these records and those on ICS how these decisions have been reached. It is difficult for services across the borough to access information they need quickly and efficiently such as the EDT and YOS.
35. The high level of demand for Section 47 child protection investigations over the last 18 months has had an impact on the capacity of child protection chairs to respond across the full range of their responsibilities. Managers have ensured this work is effectively prioritised. For example, to ensure the timely completion of initial child protection conferences. However, the arrangements for CiN reviews are insufficiently robust. Although children and young people are not at risk of significant harm there are examples where a small number of CiN cases have not been actioned promptly.
36. There is insufficient capacity for child protection chairs to effectively monitor and track all child protection cases. Although the responsibility for making child protection conference decisions is clear effective decision making is being compromised by trying to determine decisions through agreement and consensus. New arrangements are now in place to support child protection chairs and ensure that child protection plans are progressed effectively through the use of a scrutiny panel. This has already had an impact on reducing the high number of children and young people subject to child protection plans and for those who stay on plans for longer than two years. Although decisions made at child protection conferences are communicated promptly there are delays in disseminating the conference minutes.
37. Parents who spoke with inspectors report they are treated respectfully and generally have good working relationships with their social worker and child protection chairs. However, they find the number of transfer points across the range of services from early intervention to child protection difficult to understand. They also find changes in their social worker difficult because they have to repeatedly tell their stories to professionals.

The contribution of health agencies to keeping children and young people safe Grade 3 (adequate)

38. The contribution of health agencies to keeping children and young people safe is adequate.
39. Health partners are well represented on the CYPT and the MSCB. Health partners have established effective governance structures that provide the CYPT and the MSCB with assurance about the arrangements to safeguard children within their organisations. There is good use made of key safeguarding indicators in the Quality and Outcome Schedule used by managers, to influence and monitor safeguarding practice. For example, the requirement for provider organisations to increase the number of staff who receive supervision in safeguarding children practice is not clear. However, the provision of supervision overall remains variable. Although there is good supervision in Tees, Esk and Wear Valley NHS Foundation Trust, the South Tees Hospitals NHS Foundation Trust is exploring an alternative model of supervision. This has not been agreed and authorised by the MSCB.
40. Arrangements are in place for a designated nurse and designated doctor to be in post as part of the Tees-wide cluster of PCTs operating as NHS Tees. The named safeguarding children professionals for South Tees Hospitals NHS Foundation Trust and Tees, Esk and Wear Valley NHS Foundation Trust are appropriately line managed and well supported with good and effective access to the trust executive board's lead for safeguarding children. Progress in ensuring all health staff receive appropriate safeguarding training is adequate, with good take up by community health staff. There is an effective recovery plan in place to ensure that all staff are appropriately trained by March 2012. Good progress is being made to deliver training for GPs and dentists in safeguarding children. The PCT offers good support to primary care with good progress being made in the number of GPs that now either attend or submit reports to child protection meetings. However, the arrangements for GPs to meet regularly with health visitors to discuss families where there are safeguarding concerns are variable.
41. The arrangements to safeguard children and young people who attend A&E are good. The initial assessment and triage processes in which injuries are assessed for any child protection concerns are well documented in A&E. Good arrangements are in place to check for children's repeated attendance as well as identifying if there are any child protection concerns or if they are a looked after child. Thresholds for the referral of safeguarding concerns are known and understood by A&E staff and practice is closely monitored by the named nurse who receives copies of all referrals for quality assurance. A senior clinician reviews all attendances by children under five years to ensure the appropriateness of any safeguarding action taken and where necessary follow this up with

A&E staff and the named nurse. Procedure and practice for the communication of safeguarding concerns and notifications of all attendances is well developed and this ensures health visitors, school nurses and GPs are informed.

42. There are adequate care pathways in place to support young people who attend A&E and who require CAMHS following an incident of self-harming or who are in mental health crises. Good provision is made for all young people under 16 who attend the unit due to self-harming to be automatically admitted to the paediatric ward for assessment by the CAMHS team. Effective arrangements are in place to ensure continuity of service out of hours through an on-call Consultant Child Psychiatrist or the adult crises team. Although there are adequate arrangements for assessing the mental health needs of young people under Section 136 of the Mental Health Act 1983 there is no dedicated facility for children.
43. There are adequate partnership procedures to ensure that where possible families are protected from domestic violence. However, practice does not always ensure health visitors and school nursing staff are routinely notified when police have attended an incidence of domestic violence within a family where there are children. Staff at the James Cook University Hospital demonstrate good awareness of the impact of domestic violence on children and there is a clear referral process to the children's social care assessment team.
44. The provision of sex and relationship education is good and is delivered by a range of professionals as part of the risk reduction strategy. Current provision is mainly through schools and a 'roadshow' and take up from schools is good. The contraceptive and sexual health (CASH) service is improving with an increasing number of combined clinics offering contraception as well as genitourinary medicine. There has been some recent success in reducing the incidence of teenage pregnancy and local management data shows a recent decrease of 2.3% (December 2010), however rates remain stubbornly high.
45. Young people have good access to drug and alcohol services and the take-up of these services by young people is increasing. There is adequate support for pregnant teenagers through the work of universal midwifery services and young people can access a Baby and Me programme. However, there is no dedicated ante natal clinic for pregnant teenagers and these young women state they feel stigmatised and uncomfortable when they attend appointments. The midwifery service has good arrangements in place to identify vulnerabilities in pregnancy. They carry out comprehensive risk assessments of domestic violence, substance misuse and emotional health and wellbeing. There is good information sharing between midwifery staff and the children and families team and a robust inter-agency 'safeguarding the unborn baby' procedure.

46. The health visiting and school nursing services provided by South Tees Hospitals NHS Foundation Trust are good. The healthy child programme is delivered through integrated teams and there are effective arrangements in place to transfer children from the health visiting service to the school nursing service. Also there is evidence of a good level of staff with the right skills being used effectively to support families as part of child protection plans, outcomes from network meetings and CAF arrangements.
47. The provision of the CAMHS is adequate overall and is currently the subject of a service review by commissioners. However, there are some delays in accessing the service. Waiting times for core CAMHS assessment is four weeks and up to nine weeks for treatment. CAMHS support for children and young people with learning difficulties and those that are disabled are adequate. This work is supported by a good transition team that plan and facilitate the transfer of children with learning disabilities to adult services, however transition arrangements from CAMHS into adult mental health services is variable. Parents and carers report that there are often significant delays in being referred for assessment where autistic spectrum disorders were being considered.
48. There is good support offered to families and carers of children and young people with complex health needs. There are strong relationships across paediatric health services and other health professionals who provide services for children and young people with complex health needs to ensure they receive a coordinated approach to their care from familiar staff. There is good access to a range of respite care provision across Middlesbrough to support children and families where there are complex health care needs. There are adequate processes in place in both adult mental health services and adult substance misuse services to identify where service users have children or have significant child caring responsibilities. The current pathways for the referral of children who have suffered suspected sexual abuse are adequate and all acute cases are seen in Newcastle in a purpose built facility. The historical examinations are carried out by one paediatrician. However, there are no firm arrangements to ensure the continuity of the service of historical examinations when the current paediatrician retires in the near future.

Ambition and prioritisation

Grade 2 (good)

49. Ambition and prioritisation are good.
50. The strategic leadership of the council and its partners give safeguarding the highest priority. There is very good cross party commitment to the safeguarding agenda by the elected Mayor and council members who champion the needs of children and families. The council is rated as Level 4, moving towards excellence, which demonstrates good performance measured against the Equality Standards Framework. Arrangements for

undertaking equality impact assessments are robust and making a real difference, as seen in the arrangements for continued delivery of the Children's Information Service.

51. Safeguarding priorities are clearly identified in the children and young people's plan and other strategic documents. Areas of strength and weakness are in the main clearly identified and targets for service improvement are underpinned by increased funding and efficiency savings. The council and its partners face considerable challenges to tackle entrenched deprivation, worklessness, domestic violence, and substance and alcohol misuse. Effective action is taken to ensure the most vulnerable children and young people who need protection are safeguarded. There are many examples of effective early intervention and prevention programmes across the borough which are having an impact and making a difference to improve outcomes for children. However, early intervention and prevention services are insufficiently coordinated and targeted across the partnership. The capacity of the council's children's social care service has increased progressively over the last six years, and although social work caseloads have reduced, they still remain high.
52. Progress towards the achievement of targets for improvement for safeguarding services is good overall. Robust arrangements are in place for the collation of performance data and decisions are based on a rigorous needs analysis. Priorities are effectively actioned incrementally and progress is closely monitored. An example of this, is the action to reduce the number of children and young people subject to the dual process of child protection and looked after children review. Important changes have been made to the role and function of the joint Cleveland, Redcar and Middlesbrough Safeguarding Children Board with the introduction of a MSCB in April 2010, led by an independent chairperson. This has helped to improve impact by ensuring the business plan and targets for improvement are sharply focused on meeting local needs.
53. There are effective senior officers across the partnership who provide clear strategic direction, respond effectively to the changing demands for the service and prioritise the allocation of resources to support safeguarding. This has stabilised the high rate of referrals to children's social care and important decisions have been made to safely move children off child protection plans. Performance on key areas of service operation is consistently good such as the high number of children who receive a timely initial and core assessment. However, progress in improving the functionality of the ICS has been slow.
54. There is a good level of transparency in the arrangements for reporting on performance. There is effective challenge across the partnership by the council through its Scrutiny Committee, the MSCB and the CYPT. This has ensured child protection responses are well coordinated across the borough. The council has taken swift action to tackle areas for

development identified in the unannounced inspection of its front line child protection service. Robust action planning has ensured a good rate of improvement to ensure the most vulnerable children and young people who need to be protected are safe. Strategies provide a strong focus on narrowing the gap for vulnerable children and families. For example, local authority school reviews provide a good level of challenge on aspects of equality and diversity. This has ensured children with disabilities are recognised as a priority group with regard to the allocation of the Early Intervention Grant to help prevent family breakdown. There is however a lack of focus on issues of equality and diversity across some strategic and operational policies and plans.

Leadership and management

Grade 3 (adequate)

55. The leadership and management of safeguarding services across the partnership including workforce development, user engagement and the effective use of resources is adequate.
56. The council knows the needs of the local population well. Investment in safeguarding provision for children is continuing to rise to reflect the high level of deprivation and need for support in the population of the communities of Middlesbrough. There are effective joint commissioning arrangements between health and the council which provides a sound basis for multi-agency work. The council has taken swift action to respond to the findings of the unannounced inspection. The contact arrangements have recently been redesigned and the contact and referral arrangements have significantly improved. Resources are used effectively to ensure the most vulnerable children who need protection are safeguarded.
57. The number of CiN and those entering the child protection system remains high. Although partners have well established risk assessment processes for the assessment of domestic violence there is no common risk assessment tool across partner agencies and recent action has been taken to strengthen the domestic violence strategy but it is too early yet to see impact. There are many examples of effective early intervention and prevention services delivered through schools and the Families First service. The pastoral services provided by schools is well developed. However, there are missed opportunities for schools and children's social care to work together sooner to prevent children's circumstances deteriorating.
58. The council's strategy for the recruitment and retention of staff has resulted in a stable and appropriately qualified workforce within children's social care. The number of social worker staff has increased over time this demonstrates the effective implementation of actions plans based on lessons learned from serious case reviews. Additional staff resources this year have helped to meet the rising demand for the child protection service and reduce social work caseloads. Nevertheless social work

caseloads remain high. Although there is a well established development programme to support newly qualified social workers, a small number of workers experience caseloads which are not sufficiently protected from high numbers, complex cases and child protection cases.

59. The most recent local management data identifies that the make up of the workforce is not representative of the population with regard to staff who are registered with a disability and those from a minority ethnic group. The council has recognised there is a need to improve the way data on equality and diversity is captured to inform the Workforce Plan. A detailed action plan has been implemented to tackle both issues.
60. There is a high level of investment in the workforce supported by good access to good quality training, including that offered by the MSCB Training is appropriate to meet the developmental needs of staff including the voluntary and community sector. A high proportion of the voluntary and community sector who responded to the local authority survey agreed that the council, in partnership with the MSCB, offers good training and safeguarding support for children and young people.
61. There are many examples of broad user engagement and consultation. These include children and young people influencing the priorities set out in the children and young people's plan. Opportunities for children and young people, parents and carers to influence the shape of service and express their views are good, such as their involvement in the review of the Families First team and the work of Parents4Change Group. The engagement of children, young people and parents has helped ensure services are sharply focused on meeting local need.
62. Almost all schools have school councils and representatives are elected by their peers. Responses are effectively coordinated through the Youth Council and Members of the Youth Council sit on the Scrutiny Committee. There has been good progress in engaging children and young people in their social care assessments. A high proportion of children and young people and their parents are involved and attend child protection conferences and there is good use of written agreements with families.
63. Service users seen by inspectors including parents/carers of some of the most vulnerable children and young people report that they are generally satisfied with the quality of services. They report that initial contacts with front line social workers are good and issues and concerns are explained clearly. Once engaged in the child protection system they are treated with sensitivity and respect. Issues and concerns are explained clearly. The arrangements to work with families whose first language is not English is supported well by good access to an effective translation service.
64. Statutory guidelines in relation to complaints are consistently applied. There are processes in place for collating and analysing statutory complaints with quarterly reports detailing numbers, outcomes and trends.

However, the authority does not measure whether lessons arising from complaints are leading to service improvements. Also the evaluation of user feedback is underdeveloped and auditing and other service feedback arrangements do not evaluate differentially for equality and diversity.

65. The partnership is using its resources effectively to ensure the most vulnerable children who need protection are safe. There is a strong focus on commissioning, decommissioning and re-commissioning of services to meet changing population needs. Examples include the joint commissioning of services to avoid duplication and reduce cost such as the merger of the Youth and Connexions services which is helping to streamline services. The partnership has established some shared budgets and combined these with joint service commissioning and this is leading to reduced cost and value for money. For example health and social care services have established the Family First programmes which is helping parents to develop their parenting skills, and the speech and language therapy services delivered in schools are supporting children and young people with additional needs.
66. There are effective systems across the partnership to evaluate value for money and the council and its partners are increasingly effective at working together to find solutions to meet local need. The council has ensured that there are always sufficient financial resources so the most vulnerable children who need protecting are safeguarded. Insufficient priority is given to early intervention and prevention services across the partnership and the cost of implementing the CAF has not delivered sufficient improved outcomes. Although the council and its partners are looking at other ways of responding to the high level of need for support which exists in the community a high proportion of children and young people are in receipt of high cost CiN and child protection services.
67. The MSCB business plan is closely aligned to the core business of child protection work. Recent changes to introduce the MSCB has increased its effectiveness in the delivery of local priorities whilst maintaining the cost benefits of cross border partnerships such as for the roll out of child protection training. However, opportunities are missed to learn from and improve services based on the work of child protection chairs.
68. Service weaknesses are generally well known and recent improvements in the front line contact, referral assessment arrangements have helped to improve the efficiency and effectiveness of this service to a good standard. Local management information shows a high number of children who are referred to children's social care benefit from an assessment. Auditing of the front line contact, referral and assessment service is having an impact on performance including the quality of initial and core assessments which have improved and are generally good. However, the ICS does not provide a robust platform for effective management

oversight of cases and the dual process for recording on ICS and hard copy files leads to duplication.

Performance management and quality assurance

Grade 2 (good)

69. Performance management and quality assurance are good.
70. The MSCB is delivering its core business effectively. There is a strong focus on performance management measured against the business plan. There are many examples where the MSCB has driven improvements.
71. Child protection procedures have been recently reviewed and thresholds for access to services have been disseminated across the work force effectively. However, the MSCB business plan only reports on safeguarding activity priorities. It does not identify any significant concerns relating to children or agency performance in Middlesbrough that requires action plans from relevant agencies. The work of the CYPT is effective. Relationships between the key agencies such as health, children's social care and police are well developed including the involvement of the voluntary and community sector. This is helping to set quality standards and drive improvements across the area. For example, partners acknowledge there is a need to establish better coordinated and targeted programmes to respond to the high levels of domestic abuse.
72. Robust multi-agency arrangements are in place to audit the effectiveness of safeguarding and child protection services across partner agencies as required by section 11 of the 2004 Children Act. Secure action plans are enabling agencies to monitor and consolidate the quality of practice. The multi-agency case file self audit undertaken for this inspection provides an accurate evaluation of practice but it is not fully comprehensive.
73. Good arrangements are in place to respond to agencies' concerns about children who they identify as being at risk of significant harm through the Risk Management group. There is an effective scrutiny panel which is helping to target children who have been on a plan more than 12 months. This safely reduces risk or escalates involvement, where necessary, to ensure children are safe. However, opportunities are missed to introduce an independent element to the auditing of these decisions.
74. There are good conflict resolution arrangements which operate across the partnership and these are set out in procedures that have been agreed by the MSCB and are known and understood by staff. The practice of peer review is being used increasingly across the partnership to harness the knowledge of professionals and improve delivery of services for families. Peer review is supported through training and service away days for staffing in order to feed forward ideas about what needs to improve. This activity is helping to shape service delivery.

75. Management systems promote a good level of challenge and support for front line workers and managers are held to account for their performance. There is a positive culture of management at all levels being approachable and supportive to front line staff. Social work staff report that their managers are accessible and their leadership is valued and respected. There is a strong focus on providing staff with good quality supervision, particularly in front line social work. Standards for effective supervision have been set by the council and this has been implemented consistently. Staff who spoke with inspectors report that they receive good quality, reflective supervision. There are good arrangements in place to monitor performance across key areas of the child protection service such as multi-agency performance clinics. This is ensuring performance in relation to the quality and timeliness of initial and core assessments remains consistently good.

Partnership working

Grade 3 (adequate)

76. Partnership working is adequate.
77. There are some effective joint commissioning arrangements between health services and the council. These agencies are increasingly working together and seeking further opportunities to jointly develop services which are focused on meeting local needs. However, the development of CAF as a partnership tool, and the coordination of early intervention and prevention services are not yet established across the partnership or well targeted.
78. There are good working relationships with health, police and children's social care, and improving work relationships with schools. These help provide a broad based range of services to safeguard and protect children. There is good attendance by the police and health professionals at strategy discussions, core groups and conferences. However, there is insufficient inclusion of these agencies at an early stage of intervention and support to families, for example in CiN network meetings. There is good partnership involvement in initial and core assessments. This is ensuring that assessments include a comprehensive evaluation of risk factors. Joint work to progress plans is good.
79. New arrangements are set out in the children and young people's plan 2010 updated report. These intend to improve integrated and locality arrangements, which are at the early stage of implementation. Joint work by partners to agree priorities is leading to a better understanding of agencies' safeguarding roles and responsibilities and communication across the partnership. The new MSCB is well represented by partner agencies including the voluntary and community sector and recruitment for lay members is underway. Although attendance at the MSCB is generally good the MSCB Business Plan identifies low attendance rates for some partners. However, this is being addressed.

80. The work of the MSCB is supported by a range of appropriate working groups and the board has commissioned several training initiatives across the partnership. This is making a difference, and includes lessons learnt from serious case reviews and multi-agency safeguarding training. Effective arrangements are in place for the review of child deaths through Child Death Overview Panels (CDOPs) arrangements with neighbouring authorities. Reporting arrangements for the CDOP are appropriate, being coordinated and received by the MSCB. The LADO arrangements are robust. There are strong local and regional links with other LADOs and effective information and intelligence sharing as a result.
81. Good arrangements are in place for targeting children and young people who demonstrate high risk behaviours delivered through a multi-agency risk management group. The good arrangements are ensuring that these children receive the services they need. Robust MAPPA and MARAC processes are established with good attendance by participating agencies. However, MARAC does not sufficiently focus on work with perpetrators. Also there are some examples where health visitors and school nurses have not been informed about domestic violence incidents which impacts on these agencies' ability to contribute to the identification and assessment of risk at an early stage.

Services for looked after children

Overall effectiveness

Grade 3 (adequate)

82. The overall effectiveness of looked after children services is adequate.
83. The number of referrals to the looked after children service is very high and the high looked after population is continuing to rise. The high levels of children looked after is placing pressure on locality social workers and stretching service provision. The quality of the local authority fostering and adoption services is judged good. However, the quality of provision overall in services for looked after children and young people is only adequate. Preventative services to support children on the edge of care are insufficiently coordinated to ensure effective early intervention. The number of children placed for adoption remains comparatively low as is the use of Special Guardianship and Residence orders. There is a clear focus on providing placements which ensure the specific needs of individual children are met. The majority of looked after children and young people are placed in foster care families where overall placement stability is improving as are the arrangements for commissioning services which have benefitted from strengthened contracting arrangements.
84. The quality of core assessments is improving and recent assessments are good overall. Although practice is well developed and is meeting the diverse needs of looked after children and young people, written assessments, care and pathway plans do not always ensure identity and cultural needs are fully identified. Additionally, care and pathway plan reviews do not always ensure tasks are allocated effectively. Although recent records are generally good the quality of case recording is variable overall. The use of ICS and hard copy files is leading to duplication. Although care leavers receive very good support overall generally they are unclear about the processes to enable them to access their personal records. Good effort is made to ensure that children attend their reviews and are given the opportunity to contribute. There are many examples of good work by IROs to build and sustain meaningful relationships with children and young people. However, IROs have high caseloads which limit their capacity to maintain direct contact with some children and young people and to track and audit the quality of work. Although IROs ensure children's statutory reviews take place performance on the timely completion of reviews is inadequate although improving.
85. The leadership and management of services for looked after children and young people are adequate. Looked after children are allocated to qualified social workers but social work caseloads remain comparatively high resulting in some statutory visits for a small number of looked after children and young people being carried out by unqualified staff. Investment in staff training and development is a good feature of the

service. There are effective arrangements in place to monitor performance including robust supervision of social work staff. However, case auditing is not yet ensuring the quality of recording is consistent. Although there has been training for social workers on equality and diversity issues there is little evidence to show this is being translated into assessments, plans and records. Some aspects of partnership working for looked after children and young people are well developed for example, between the housing services and the leaving care pathway team. However, the partnership between children's social care and education is underdeveloped and virtual school arrangements are not providing strong and effective advocacy to achieve better outcomes. Looked after children's attendance at secondary schools is inadequate and the quality of personal education plans (PEPS) is too variable.

86. Although there is a commitment to ensure the health needs of looked after children and young people are being met there are reported delays in initial health assessments and health reviews for children and young people placed out of area. Health information provided to young people leaving care is underdeveloped and currently inadequate.

Capacity for improvement

Grade 3 (adequate)

87. The capacity of the council and its partners to improve services for looked after children and young people is adequate.
88. Children and young people who need a service are well supported. Service provision ensures looked after children and young people are safe and the level of investment in staff development and retention is good. The majority of looked after children are placed with families where their individual needs are closely matched and met effectively. The relatively high looked after children population has stretched the capacity of the service. As a result the impact of services in the majority of outcome areas is only adequate. Nevertheless the council has ensured performance is sustained at an adequate level and no services have deteriorated. Partners have effectively prioritised services to support care leavers. This has ensured outcomes in this area are outstanding. This is particularly important as it exemplifies that in this very important area the role of corporate parenting is highly effective which is to be commended. However, high social work caseloads and poorly targeted early intervention and prevention services are reducing the impact and capacity of services to improve outcomes further.
89. Senior officers and elected members are committed to their corporate parenting responsibilities but this is not having sufficient impact on outcomes for looked after children overall. Although there is a Corporate Parenting board to monitor outcomes progress remains inconsistent. For example, the virtual school is not yet providing effective leadership to ensure that there is a clear focus on educational outcomes for looked after

children and young people and there are significant delays in the provision of alternative education following school exclusions. Arrangements to subsidise leisure and transport for looked after children and young people is not effectively coordinated or widely promoted. Young people indicate they are proud of the council's service pledge which they have helped developed but are not yet sufficiently influencing the shape of services. In addition the pledge has not been effectively disseminated across the looked after children population and the formal complaints processes is not well used by children and young people in council care.

Areas for improvement

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

Immediately:

- increase options for permanency through the use of adoption, Special Guardianship and Residence orders so children and young people do not remain looked after unnecessarily.

Within three months:

- develop ICS to avoid duplication and ensure looked after children's records are comprehensive
- ensure written assessments, care and pathway plans are comprehensive and management audits and reporting arrangements are used to monitor progress and sustain improvement
- ensure policy, procedure and practice for looked after children to access their personal records is routinely communicated to them and provision made for them to have access as they require it
- ensure looked after children are routinely informed about the local authority complaints procedure and practice and what provision is made to support them
- ensure information obtained from the strengths and difficulties questionnaires is used effectively to influence the emotional health and wellbeing of looked after children
- ensure that the emotional health and wellbeing of looked after children is not compromised throughout the period of review and recommissioning of the looked after children CAMHS.

Within six months:

- increase social worker capacity to ensure statutory visits to looked after children and young people are conducted only by qualified staff
- improve the coordination and targeting of services for children on the edge of care, CiN and those children who are subject to a child protection plan to safely reduce risk and prevent family breakdown
- increase the capacity of the IROs so they have sufficient time to spend with looked after children and young people to track and audit their cases and complete statutory reviews in accordance with the frequency set out in regulations
- strengthen the role and function of the virtual school to improve educational outcomes for all looked after children and particularly address poor school attendance, the variable quality of PEPs and ensure children's education is not inordinately disrupted through the exclusion process
- ensure all looked after children receive timely health assessments and health reviews and that care leavers receive a comprehensive summary of their health care when they leave care
- ensure all looked after children are encouraged and enabled to attend celebration events, and time is taken to explain the importance of the pledge and that they are given a personal copy for their use.

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

Being healthy

Grade 3 (adequate)

91. Services to promote the health and well-being of looked after children are adequate.
92. There is a designated nurse for looked after children who is employed full time and a lead clinician for looked after children who is also the medical advisor for adoption and fostering. The team has recently had its administrative support increased and this is now adequate. There is health representation on the multi-agency panel that meets to discuss funding and allocation of placements for looked after children and young people. This is helping to ensure the individual health needs of children and young people are adequately considered.
93. There are good arrangements in place to maintain the health of children and young people who are looked after. As a result 91% are registered with a dentist and 90% are up to date with their immunisations. There are some delays in initial health assessments and these are being addressed through the work of a multi-agency group. There has been positive feedback from children and young people on the provision made to meet their health needs.
94. The arrangements for obtaining health reviews for looked after children placed out of borough are adequate although reviews are not always completed on time. Young people are routinely asked where they would like their health review to take place. There is a clear process for requesting the medical assessment or review from the looked after children service of the receiving authority and systems are in place to provide payment where requested. There are reciprocal arrangements for carrying out health reviews by designated looked after children nurses for any child or young person placed within Tees. Partnership working between the designated nurse for looked after children, the lead clinician for looked after children and the local authority's children and family's service is good. The designated nurse and the lead clinician for looked after children have been given access to the authority's IT system and also have a local authority email address. This is ensuring that information used to inform initial health assessments and health reviews is comprehensive and accurate, and that information is shared confidentially.
95. Arrangements to provide young people leaving care with a comprehensive summary of their health needs are inadequate. Although there is ongoing consultation with the children in care council to obtain their views and involve them in the design of a 'health passport' young people are not yet provided with a comprehensive summary of their health care when they

leave care. Additionally, the designated nurse has no formal input into the pathway planning process. The involvement of the designated nurse for looked after children in training foster carers is good and the nurse regularly attends training events for foster carers to talk about health issues, including weight management, sexual health and promoting the health of looked after children.

96. The work of the specialist looked after children CAMHS is well regarded by professional staff. The team offers different forms of support ranging from advice, signposting to consultation or one to one casework. However, there are no firm arrangements for the delivery of this service beyond July 2011. Looked after children and young people have good access to substance misuse services. There is also good access to sex and relationship education and contraceptive and sexual health services within universal provision, which can be facilitated by the looked after children designated nurse. There is a multi agency care pathway for young women who are looked after and are pregnant.
97. The use of the strengths and difficulties questionnaire is minimal. These questionnaires are sent out by the looked after children health team where young people are placed within Middlesbrough and completed by carers, education professionals and where appropriate the young person. Social workers send the questionnaire to young people placed out of borough. Completion rates are variable and the looked after children CAMHS receive the scored sheets in batches. There is no agreed process in place about the use of the completed questionnaires to influence the emotional health and well-being of looked after children and young people.

Staying safe

Grade 3 (adequate)

98. Safeguarding arrangements for looked after children and young people are adequate.
99. When children and young people need protection, decision making to receive them into care is well considered and prompt. Planning arrangements ensure looked after children and young people are provided with placements that meet their immediate needs. However, social work caseloads are high and in a few cases statutory visits are being carried out by unqualified workers which is contrary to statutory requirements.
100. The majority of looked after children and young people are placed in foster care placements. The local authority fostering service and adoption services are judged good in relation to providing safe care for looked after children and young people. All children and young people are placed in provision that has been judged to be at least adequate and this is providing safe places for them to live. There are effective arrangements for monitoring safeguarding in commissioned placements to ensure action is taken where services are judged to provide inadequate care.

Performance on the timely completion of statutory reviews is below that of comparators and the national average with only 77% undertaken within set timescales.

101. Short term placement stability remains variable but this is explained by the effective plans for looked after children and young people moving to their final placements. As a result performance on long term placement stability is improving. Looked after children and young people report they feel safe in their placements and have meaningful relationships with adults with whom they can share concerns.
102. Effective multi-agency arrangements are in place for monitoring and providing targeted support for children and young people missing from care and local management data shows that fewer children and young people go missing again as a result. There is a shared commitment to managing risk through multi-agency forums and risk management meetings which is helping to prevent placement breakdown. This work is supported by a scrutiny panel which keeps under review children and young people who are at the highest risk.

Enjoying and achieving

Grade 3 (adequate)

103. The impact of services on enabling looked after children and young people to enjoy and achieve is adequate.
104. There is a commitment across the council to encourage children and young people to hold higher aspirations for their futures and to raise achievement. However, this is not underpinned by an effective strategy for driving consistent improvement across all services and with all partners. There are examples of good partnership working including highly effective work in some schools to help pupils to achieve well and in some instances early intervention and support for vulnerable families which prevents children and young people going into care. There are also individual examples where stable foster care placements together with focused support from the school and the social worker have led to good outcomes. However, the virtual school is not yet providing strong and effective advocacy to achieve better outcomes for looked after children and young people. This leads to inconsistency in the experiences of children and young people and their foster carers. Although the council has recognised the need to strengthen the partnership between education and social care this has not yet happened in a concerted way.
105. The achievement of pupils aged 11 is improving and the gap between them and all children and young people in Middlesbrough has significantly narrowed. 16 pupils were eligible to take the end of KS2 tests and over half reached the expected standard which is above the national average for looked after children. At the age of 16 the numbers achieving five good GCSEs is in line with national averages for looked after children and

the numbers achieving five good GCSEs including English and maths exceeds the national figure which is good.

106. The council is working with the local college to develop post-16 provision for those young people who leave school with no qualifications. Data is used at an authority level to benchmark the progress made by looked after young people and under performance is clearly challenged. When children and young people are placed out of the area the local authority and schools work hard to maintain the school placement and their progress is monitored and recorded through effective partnerships through the virtual school arrangements.
107. A commissioned service provides a 'looked after call' to check on pupils' attendance in school and looked after children attendance at primary school has improved to 96%. However, attendance at secondary school is inadequate and is below both statistical neighbours and the national average. Fixed term exclusions have reduced significantly over the last two years as a result of effective work with schools and an increased focus on the needs of looked after children and young people. The rate is now below the national average. However, for some looked after children and young people the time between being excluded and being placed in alternative provision is too long. There are no looked after children pupils excluded from primary schools.
108. The quality of PEPS is variable and they are not always effective in promoting educational achievement. Some plans properly record progress and targets are meaningful and helpful to the child or young person, but others do not present a full picture because out of school activities and extra support are not always recorded. This inhibits effective planning. Too often, there are examples where PEPs fail to show the educational history or provide evaluative comment on individual progress being made.
109. Schools use personal education allowances and other targeted funding in a variety of ways such as one to one tuition, the provision of laptops and support for the maintenance of cultural links. The council monitors the use of personal education allowances to ensure that they are used effectively. There are regular opportunities for designated teachers to meet together and share practice which they find valuable. Individual schools use extended school activities and trips to engage looked after children and young people in a range of sporting and leisure activities. The council provides some subsidised leisure and transport but this is not always effectively coordinated or widely promoted.

Making a positive contribution, including user engagement

Grade 3 (adequate)

110. Opportunities for looked after children and young people to make a positive contribution are adequate.

111. The council is committed to empowering children and young people to participate, review and improve services through a variety of forums. Children and young people are clear about their own priorities but they are not yet influencing the shape of services. The impact of 'the pledge' of the Director of Children Families and Learning Service to looked after children and young people is inconsistent and not all children and young people are aware of it. However, those young people who were involved in its development are proud of the pledge and ownership by this group of young people is strong. They say 'they are confident that this provides a safeguard and will be used to make life better for children and young people in the care of the authority'.
112. Children and care leavers are helped to develop effective communication skills. Children and young people say that training is being provided to enable them to speak with confidence to professionals about the issues that matter to them. The advocacy service NYAS provides suitably qualified and skilled staff to represent children and there is suitable support for children and young people with a range of communication needs to express their views. The Pathways Team provides a responsive service and young people report that they feel supported, listened to and able to fully contribute to planning. However, this could be improved by the implementation of a specific support group for care leavers.
113. Although there are some good examples of effective contribution by children and young people to their individual care plans some looked after children and young people report that their social workers have high caseloads and that they do not always feel adequately supported. A good quality and well used advocacy service provides effective support for children and young people enabling them to share their views and raise concerns about service provision. In addition, looked after children and young people are provided with good opportunities to raise concerns informally. However, the formal complaints process is not currently well used by children and young people.
114. The council celebrates the success of children and young people through an annual awards ceremony where talents and achievements are acknowledged those of school age. However, not all children and young people placed out of area are able to attend this ceremony and not all schools are aware of such events. The children's social care and YOS have effective partnerships to promote consistent working and ensure targeted support for young people who commit offences. Although the number of looked after young people who offend is small the rate of re-offending remains higher than statistical neighbours and the national average.

Economic well-being**Grade 1 (outstanding)**

115. The impact of services to enable looked after children and young people and care leavers to achieve economic well-being is outstanding.

116. The impact of partnership working to achieve economic well-being is outstanding and exemplifies the role of highly effective corporate parenting for this outcome area. Young people receive very good support to ensure that their needs are understood and that appropriately targeted provision is available. As a result over 80% of young people are in some form of education, training or employment which is significantly better than the national average. Young people are encouraged to be ambitious. Financial and practical support for young people entering higher education is very good. Although numbers of the cohort are small in recent years a consistent number have gained university places. There is an effective partnership with Teeside University where good designated support helps young people to achieve. The 'September guarantee' is a contract with the young people that aims to ensure educational provision for all post 16 pupils and 22 out of 24 have this in place for next academic year.
117. Young people are well prepared for independent living and are supported well financially. There is a very good partnership with housing and a joint protocol which prioritises looked after children and young people. As a result care leavers have access to a range of good accommodation and over 95% live in suitable accommodation which is better than both statistical neighbours and national averages. There is highly effective support to help the young people make the transition to independent living. There is support on budgeting and a 'training flat' provides first hand experience for young people to live on their own. In addition staff on the pathways team are trained to provide advice on benefits entitlement.
118. There is a very good understanding of the needs of looked after young people with learning disability and as a result pathway planning is very effective in meeting individual needs. Good partnerships with special schools ensures that young people can attend 16-19 provision where this is appropriate and the council is working with a range of providers including Middlesbrough College to provide 'taster' courses for those who do not yet have educational qualifications. Good planning and multi-agency partnership ensures that transitions at the end of year 11 are very well handled and that planning for next steps is effective. In particular, careful note is made of additional support needs to make sure that provision continues post-16.
119. Unaccompanied asylum seeking young people receive very effective services from the leaving care team. They ensure access to college courses and housing and there is liaison with social care to ensure their safety.
120. Support continues for Middlesbrough looked after children and young people until the age of 25 where this is needed and this ensures that the transition into adult care is effectively and sensitively planned. Investment in maintaining support for looked after children beyond 18 supported lodgings scheme and post 18 foster schemes are having a positive impact

on improving life chances for young people. Young people are positive about the support they receive from the pathways team. They say they feel supported, listened to and are able to develop positive relationships with social workers.

Quality of provision

Grade 3 (adequate)

121. The quality of provision overall in services for looked after children and young people is adequate.
122. There is effective decision making to ensure children who need to be looked after are cared for appropriately. Managers have ensured there is a collective approach to decision making which supports staff. However, preventative services to support children and young people on the edge of care are insufficiently coordinated to ensure effective early intervention. The local authority has identified a number of children and young people who are subject of a child protection plan where insufficient progress has been made and a Scrutiny panel has recently been set-up to evaluate this. Numbers of referrals to children's social care are high and the high looked after children population is continuing to rise. This is placing pressure on locality social workers and stretching service provision.
123. The quality of the local authority fostering and adoption services is judged good. The quality of residential and foster care services where children are placed is at least adequate. The majority of children are placed in foster care services with families where services are judged to be good or better. However, the policy for commissioning placements that are at least adequate is not setting a sufficiently high standard. The number of children placed for adoption is low. This performance has been consistently low and has been recognised by the council as a key priority for improvement. The use of Special Guardianship and Residence orders is also low and these options are not being fully considered in the context of reducing the number of children and young people currently in care.
124. There is a strong focus on providing placements which ensure the specific needs of individual children are met. Placement stability is improving supported by robust arrangements for the assessment of needs, performance clinics and a prompt multi-agency response. Placement breakdowns have been low with appropriate and alternative placements being promptly identified. There are effective levels of support to prevent placement breakdown for foster carers looking after children with complex needs. Examples include focused training, integrated support from the children's disabilities team and access to emotional support through CAMHS.
125. The quality of core assessments is improving and recent assessments are generally good. Assessments determine the level of risk and appropriate decisions are made to safeguard children and young people becoming looked after. Children and young people are seen and seen alone as part

of these assessments. Arrangements to promote and maintain contact for children and young people with their parents, family and friends are also effective. Although practice is well developed to meet the diverse needs of looked after children and young people, written assessments, care and pathway plans do not ensure identity and cultural needs are recorded sufficiently to demonstrate how these needs are being met. Parents, carers and children and young people say that visits by social workers are regular and that they have the opportunity to speak to their social worker alone. However, they also say that social workers do not have enough time to spend with them because they are too busy.

126. The quality of case recording is too variable and there is duplication of work in relation to keeping hard copy and electronic records. Care leavers say that they do not know their rights in relation to accessing their records or the support arrangements in place for them to do this. Good effort is made to ensure that children attend their reviews and are given the opportunity to contribute. IROs have high caseloads which effects both their ability to maintain direct contact with children and their capacity to track and audit the quality of work. Performance on the timely completion of statutory reviews is worse than comparators and the national average. Although this is improving it is currently inadequate.
127. Transition arrangements for looked after children and young people, including those with disabilities, are well planned and effectively managed. Recommendations arising from care and pathway plan reviews are outcome focused but the arrangements for allocating tasks is not always effective. Provision for the support of unaccompanied asylum seeking children and young people is good. Unaccompanied asylum seeking young people speak positively about the support provided by the service and their workers.

Ambition and prioritisation

Grade 3 (adequate)

128. Ambition and prioritisation are adequate.
129. The strength of the corporate ambition to improve looked after children outcomes is adequate. The high looked after children population is placing a strain on services. Although economic well-being is judged outstanding Being Healthy, Staying Safe, Enjoying and Achieving and Positive Contribution are only judged adequate. The council has identified a reduction in the high numbers of children and young people coming into care as a priority in the children and young peoples plan. However, numbers continue to rise. Children and young people are safe but high social work caseloads inhibit the council's ability to intervene early enough for some children to prevent family breakdown. Opportunities to reduce the care population through Special Guardianship and other means are being lost.

130. Partnership working to improve outcomes for looked after children and young people is improving. Senior officers and elected members are committed to their corporate parenting responsibilities but this is not having sufficient impact on improving outcomes for looked after children overall. There is a multi-agency board which monitors outcomes for looked after children and this is accountable to the corporate parenting board. However, the virtual school is not yet providing effective leadership to ensure that there is a consistent focus on improving educational outcomes for looked after children across all settings and services. The service works hard to meet the diverse cultural needs of looked after children and young people and ensures that appropriate support is provided for those with disabilities and asylum seekers.

Leadership and management

Grade 3 (adequate)

131. The leadership and management of services for looked after children and young people are adequate.
132. The investment in staff training and development is strong feature of the service. Staff are highly committed and dedicated to their work. However the capacity of the service does not meet the demand for services in some important areas. Although all looked after children and young people are allocated to a qualified social worker they have high caseloads which results in some statutory visits for a small number of looked after children being carried out by unqualified staff. Parents and carers report that support from social workers is not always consistent and effective.
133. There are effective arrangements in place to monitor performance across a range of key performance indicators including robust supervision of social work staff. Staff who spoke with inspectors reported feeling well supported. However, the impact of case file auditing does not ensure consistent quality of recording. There has been training for social workers on equality and diversity but learning is not always well demonstrated in the records of assessments and plans seen by inspectors. Regular performance clinics are effective in highlighting concerns and improving placement stability.
134. Aspects of partnership working for looked after children services are well developed. The commissioned arrangements for the provision of services is improving through strengthened contracting arrangements and more effective multi-agency working. The children's social care and YOS work well together and this means that young people who are at risk of offending and who are looked after receive good support. When looked after children are placed out of area they continue to receive consistent support and wherever possible care placements are maintained while young people are in secure accommodation.
135. There are examples of good partnerships to enable looked after children and young people to maintain contact with home and their communities

when they are placed out of the area and unaccompanied asylum seekers are helped to make appropriate community links. However the partnership between children's social care and education is underdeveloped and opportunities for joint working in several areas are lost. The virtual school is not providing strong and effective advocacy to achieve better outcomes for looked after children. Parents and foster carers who spoke with inspectors report that there is poor multi-agency communication. They say they have to repeat their story several times to professionals which causes frustrating delays. The partnership work between the housing services and the pathway team is outstanding and they both engage effectively with looked after children. Following recent consultation with young people there are now more supported placements which help them to be more independent. This has led to improved stability of tenancies for care leavers.

Performance management and quality assurance

Grade 3 (adequate)

136. Performance management and quality assurance are adequate.
137. Systems to monitor performance are well established. Although managers and staff know the strengths and weakness of the service well this is not yet leading to consistently good outcomes. There is variable performance in meeting the standards set nationally for looked after children. For example there is weak performance on the timely completion of looked after children's statutory reviews. Statutory obligations in relation to challenge, care planning and reviews are not consistently met because IROs have high caseloads. The council is seeking to address this by employing agency staff in the short term. There are effective arrangements in place to monitor and analyse complaints, however it is not clear how lessons learned from complaints are being used to re-shape or improve services.
138. There are effective data management systems in place to assist managers to make plans and decisions on service delivery. The local authority fostering and adoption services are effectively monitored and provide a consistently good service for children and young people. A high proportion of children are placed with families in stable placements where their needs are closely matched. There are effective systems in place to monitor the quality of children's placements although commissioning arrangements do not set the highest standards for looked after children with a small number of children placed in only adequate provision. Also arrangements for the analysis of equality and diversity issues are variable and user feedback is not evaluated differentially for equality and diversity.

Record of main findings:

Safeguarding services	
Overall effectiveness	Adequate
Capacity for improvement	Good
Safeguarding outcomes for children and young people	
Children and young people are safe and feel safe	Good
Quality of provision	Adequate
The contribution of health agencies to keeping children and young people safe	Adequate
Services for looked after children	
Ambition and prioritisation	Good
Leadership and management	Adequate
Performance management and quality assurance	Good
Partnership working	Adequate
Equality and diversity	Adequate
Services for looked after children	
Overall effectiveness	Adequate
Capacity for improvement	Adequate
How good are outcomes for looked after children and care leavers?	
Being healthy	Adequate
Staying safe	Adequate
Enjoying and achieving	Adequate
Making a positive contribution, including user engagement	Adequate
Economic well-being	Outstanding
Quality of provision	Adequate
Services for looked after children	
Ambition and prioritisation	Adequate
Leadership and management	Adequate
Performance management and quality assurance	Adequate
Equality and diversity	Adequate