

# Inspection of safeguarding and looked after children services Lancashire

---

**Inspection dates:** 23 January – 3 February 2012

**Reporting inspector** Gary Lamb HMI

**Age group:** All

**Published:** 9 March 2012

---

© Crown copyright 2012

Website: [www.ofsted.gov.uk](http://www.ofsted.gov.uk)

This document may be reproduced in whole or in part for non-commercial purposes, provided that the information quoted is reproduced without adaptation and the source and date of publication are stated.

Further copies of this report are obtainable from the local authority or at [www.ofsted.gov.uk](http://www.ofsted.gov.uk)

# Contents

<b>About this inspection</b>	<b>2</b>
<b>The inspection judgements and what they mean</b>	<b>2</b>
<b>Service information</b>	<b>3</b>
Overall effectiveness	5
Capacity for improvement	7
Areas for improvement	9
Children and young people are safe and feel safe	10
Quality of provision	12
The contribution of health agencies to keeping children and young people safe	
Ambition and prioritisation	18
Leadership and management	19
Performance management and quality assurance	22
Partnership working	23
<b>Services for looked after children</b>	<b>25</b>
Overall effectiveness	25
Capacity for improvement	26
Areas for improvement	28
<b>How good are outcomes for looked after children and care leavers?</b>	<b>29</b>
Being healthy	29
Staying safe	31
Enjoying and achieving	32
Making a positive contribution, including user engagement	33
Economic well being	35
Quality of provision	36
Ambition and prioritisation	38
Leadership and management	39
Performance management and quality assurance	41
<b>Record of main findings:</b>	<b>43</b>

---

## 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 five of Her Majesty's Inspectors (HMI), one additional inspector and two inspectors from the Care Quality Commission. The inspection was carried out under the Children Act 2004.
2. The evidence evaluated by inspectors included:
  - discussions with 87 children and young people and 32 parents receiving services, front line staff and line managers, senior officers including the Director of Children's Services and the Chair of the Local Safeguarding Children Board, elected members 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 serious case reviews undertaken by Ofsted in accordance with *'Working Together To Safeguard Children'*, 2010,
  - a review of 84 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 in December 2010,
  - interviews and focus groups with front line professionals, managers and senior staff from NHS Lancashire Cluster which was formed in partnership between NHS Central Lancashire, NHS East Lancashire, NHS North Lancashire and NHS Blackpool and NHS Blackburn with Darwen in April 2011, acute, community and mental health trusts and general practitioners (GPs).

## 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
-----------------------	---

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. Lancashire has a resident population of approximately 278,200 children and young people aged 0-19 years. They make up just under 24% of the total population of the county. In January 2011, 14% of the school population were classified as being of an ethnic group other than White British, the largest minority ethnic group being of Pakistani heritage (6%). The May 2011 School Census reported 11% of pupils with English as an additional language.
5. According to the most recent Government statistics, Burnley is the most deprived of the 12 Districts in Lancashire, containing seven areas that fall within the most deprived areas nationally, amongst a total of 14 in Lancashire. Ribble Valley is the least deprived. However there are small pockets of deprivation spread throughout the county. As at May 2011, 15% (22,800) of school pupils were eligible for free school meals.
6. There are 634 maintained schools in Lancashire. This figure includes 18 academies, and 616 local authority maintained schools (comprising 481 primary schools, 69 secondary schools, 30 special schools, 12 Pupil Referral Units and 24 nurseries). Early years services are, in the main, provided by the private and voluntary sectors, as well as through 80 children's centres.
7. The local authority social care services for children have 388 foster care households at the time of the inspection, providing 687 placements. Community based children's services are provided by nine district children and family teams and a central contact and referral team (CART), provided by the county council's strategic partnership with a leading private information and communication technology company. This handles all incoming referrals and includes the emergency out of hours service providing cover throughout the county. A range of targeted services for children are directly provided or coordinated through children's services, for example youth services, services for children with disabilities, behaviour and learning support and early years and childcare services.
8. At the time of the inspection there were 1356 looked after children, of which 449 were placed in local authority foster care, 401 were placed with agency or other local authority foster care, 91 were placed with a relative or friend, 143 were placed with parents or persons with parental responsibility, 143 were at a residential placement, including schools. A further 79 were placed for adoption and 50 were placed in another type of placement such as independent living accommodation. The local authority

utilises the virtual school approach in supporting the learning of looked after children. At the time of the inspection there were 601 children who were subject to child protection plans.

9. The Lancashire Children and Young People's Trust (LCYPT) has been in place since 2005. The LCYPT includes representatives from the local authority, health commissioners, service providers including the voluntary community and faith sector and public health, Lancashire Constabulary, Jobcentre Plus, representatives of local schools and colleges, district and borough councils and the voluntary sector. The work of the County Trust is complemented by 12 District CYPT's. This recognises the diversity of Lancashire and facilitates stronger multi-agency partnership working in local areas and a targeted focus on priorities particularly relevant to that locality. The Lancashire Safeguarding Children Board (LSCB) consists of the main organisations working together in the area providing safeguarding services and also has sub-groups on both a thematic and locality basis. A protocol exists between the LCYPT and the LSCB to enable the two partnerships to work collaboratively.
10. The council has arrangements to ensure that the voice of children and young people is heard in its decision-making and in service design. The Lancashire youth council consists of 14 young people, elected from each district, and meets regularly with county council's cabinet with an agenda set by the youth council. The district youth councils contribute to the LCYPT as do groups of school councils in many parts of the county. The Children in Care Council (CiCC) is supported by an independent children's rights service commissioned by the council and has representation on both the youth council and the corporate parenting board.
11. Commissioning and planning of children and young people's health services and primary care are undertaken in conjunction with the NHS Lancashire cluster. Jointly funded commissioning managers have been in post in two of the Lancashire Primary Care Trusts (PCTs) areas for three years to align priorities across all health services for children, young people and families. These posts form part of a joint commissioning unit which advises the LCYPT on priorities. The local authority and NHS Lancashire jointly fund an active joint strategic needs analysis team who provide regular updated information to inform planning and priority setting for all partners and the LCYPT. The shadow Health and Well Being Board has been established with senior representation from all key partners, and the links to the LCYPT are clearly defined.
12. Across Lancashire County Council area there are three legacy primary care trusts which commission services from five acute hospital trusts which operate from more than one site. Patient flow means that children may attend acute trusts outside of the Lancashire County Council area. Maternity and newborn services operate from the acute trusts within the Lancashire County Council area, but patient flow and choice means that

services may also be provided from outside of the area. Community based health services, such as health visiting, school nursing, community paediatricians and paediatric therapies, are delivered by six NHS acute/community providers. Tertiary centres for paediatric and maternity services are provided from the Liverpool and Manchester areas.

13. Child and adolescent mental health services (CAMHS) are commissioned through a specialist joint commissioning manager for the council and the NHS Lancashire cluster. The service is provided by Lancashire Care Foundation Trust across most of the county; by East Lancashire Hospitals Trust in East Lancashire, and NHS Blackpool (provider arm) in parts of North Lancashire. The service has been comprehensively reviewed and a new integrated service specification has been agreed by all partners and a new service specification is planned for implementation from April 2012. For children with disabilities and/or learning difficulties who have complex health needs, services are provided by a range of provider organisations from the NHS, local authority and independent providers.
14. Lancashire Constabulary is a partner in the work of both the LCYPT and the LSCB. They contribute with other partners to the key developments including the multi-agency safeguarding hub (MASH) linked to the CART and to the working together with families project. Lancashire has a voluntary sector who work with statutory agencies and deliver service provision as part of the greater together consortium.

## Overall effectiveness

## Grade 2 (Good)

15. The overall effectiveness of safeguarding services is good. The council's child protection service is managed very well. The authority has a consistent track record of good and improving performance across nearly all areas of children's services. The council has taken effective action to tackle areas for development identified in the previous unannounced inspections of its contact, referral and assessment service. The overview and scrutiny committees provide robust scrutiny of children's safeguarding services. Children's services are judged by Ofsted to consistently perform well. There are highly competent senior officers in nearly every agency across the partnership who provide clear strategic direction and respond effectively to the changing demands for safeguarding services. Good performance management and quality assurance systems are in place at both strategic and operational levels and are having a direct impact on improvements to the quality of work across the partnership.
16. Excellent engagement and participation opportunities for young people are provided through school councils, youth council and district youth forums. Connections with elected members at cabinet level ensure children and young people's views are heard very well. Strategic priorities are shaped by children and young people and aligned across the LCYPT, partnership and council. A high rate of children and young people report they are safe

and feel safe. There is a strong focus on commissioning, decommissioning and recommissioning of services to meet changing needs, and joint commissioning to avoid duplication and reduce cost.

17. Safe recruitment processes are in place. Nearly all the local authority children's service provision is judged good for staying safe by Ofsted. The previously failing local authority fostering service has consistently improved and is now judged outstanding by Ofsted. Schools perform particularly well in the area of safeguarding, and staying safe outcomes have been judged good or better by Ofsted in most schools.
18. The local authority contact, referral and assessment arrangements have been comprehensively redesigned. This has already had a positive impact. The quality of referrals made by partner agencies seen is good. Child protection enquiries are prioritised and responded to effectively to ensure children are safe. The CART has already led to improvements in the management of contacts and referrals but there are a small number of examples where referrers have not been satisfied with the CART and not all aspects of the service are subject to rigorous audit.
19. Performance on the timely completion of child protection responses is very good. Strategy discussions and meetings are timely, with good representation from partner agencies, however the quality of recording of strategy discussions is variable. The quality of initial and core assessments has improved and there are many examples of good assessments leading to improved outcomes for children. However, the wishes and feelings of children are not always recorded and they are not sufficiently involved in case conferences. There is good identification and referral of unborn children in the cases seen. However, the behaviour of pre-school age children is not consistently recorded to inform assessments and plans.
20. The performance of the LSCB is good. The independent chair provides good leadership and partners effectively support the board. Partner agencies are challenged and held to account and performance is closely monitored. The performance of Children and Family Court Advisory and Support Service (Cafcass) is being monitored closely and delays in processing care proceedings are being addressed. Partnership work in the voluntary community and faith sector is a strong feature of safeguarding partnership work. The high priority given to children's safeguarding by the Police is ensuring child protection services strategically and in the front line is very good. The arrangements for managing domestic violence referrals are good. The partnership arrangements led by the Police for the identification and safeguarding of children at risk of exploitation are very good. Multi-agency public protection arrangements (MAPPA) are good. Although the probation service provide good programmes to work with perpetrators of domestic violence there is an inequitable level of access to programmes for perpetrators before they enter the criminal justice system.

21. Early intervention and preventative services are good. Services are targeted effectively such as through children's centres. Together these services are reaching high numbers of the most deprived children and families in the diverse communities of Lancashire. This is supported by highly effective targeted programmes which are addressing the needs of minority groups very well such as in schools. Overall the impact of services to tackle aspects of equality and diversity is judged outstanding.
22. The health economy in Lancashire is complex. Three PCTs commission services from a range of NHS and non NHS organisations regionally and nationally. The pattern of delivery of services to children and young people and of maternity services is varied across the county. Nearly all health partners are well engaged with the LCYPT and the LSCB, leading to good multi-agency partnership work. Safeguarding priorities are being delivered through well organised LSCB sub-groups which are effectively implementing change. Although health care trusts demonstrate that they are prioritising the delivery of safeguarding training, monitoring arrangements are not yet capturing data to ensure that the trusts are compliant with the required safeguarding training standard.
23. Although there is some good and outstanding safeguarding provision in place in Central and East Lancashire this is not consistent across the health economy. There was evidence of poor safeguarding practice at the University Hospital Morecambe Bay NHS Foundation Trust. Governance arrangements at Royal Lancaster Infirmary are not effective. In addition the arrangements for the treatment and safeguarding of children and young people are insufficiently robust, there are significant gaps in full compliance with Section 11 safeguarding audits and the commissioning of training. The quality and timeliness of investigation and reporting to child death overview panel (CDOP) are poor.

## Capacity for improvement

## Grade 2 (Good)

24. The capacity for improvement is good. Leaders across the council and its partners through the LCYPT give the highest priority to safeguarding children. This is demonstrated by the council's commitment to increase the proportion of its overall spending on safeguarding services at a time of budget restraint. The council has strongly committed to improving the quality of front line child protection services. Effective action has resulted in considerable improvements in the recruitment and retention of qualified social work staff with good morale amongst social workers. However, independent reviewing officers' case loads are too high and management capacity in the out of hours service is insufficient.
25. Lessons learned from complaints are helping to improve the service. Arrangements for managing allegations against people who work with children through the local authority designated officer (LADO) are good

but the LSCB has not ensured sufficient priority is given to continue awareness raising programmes across the county. Good arrangements are in place to identify and monitor children missing from home, care and education. The number of young people entering the youth justice system is significantly reducing as a result of effectively targeted interventions. The work of children's centres is effective and highly valued. Early intervention officers are having a positive impact on identifying gaps and coordinating early intervention partnership work. Although there is good use of pre-common assessment framework assessments which are addressing children and families' needs early, the use of the common assessment framework (CAF) process has reduced significantly in the last year. The local authority is fully aware of the reason for this reduction. The quality of some of the assessments seen by inspectors is only adequate. Children who experience domestic violence and meet the threshold for access to child protection services receive a good level of support and have access to an effective counselling service. However, this is not consistently available for those children who are not subject to child protection plans.

26. Child protection cases are well managed. Good multi-agency work ensures child protection plans are progressed effectively. The percentage of children on a child protection plan for two years and over has reduced and is low. Core groups are held on time, they are usually well attended and most are clearly recorded. However, reports for conferences, child protection plans and core groups are insufficiently outcome focused. The quality of case recording has improved and is now good overall. However the integrated children's record system does not effectively support the comprehensive recording and swift retrieval of case records. Case management decisions are systematically recorded although the rationale for manager's decisions is not always clearly recorded on case files. Although there are examples of good records of supervision some lack analysis and reference to reflective practice.
27. There is a strong network of designated nurses who coordinate safeguarding across Lancashire. NHS Lancashire has recently reviewed and additionally resourced the designated doctor function for safeguarding and looked after children. The current level of establishment is proportionate to the complexity of provider arrangements and partnerships. This will be regularly reviewed as part of performance monitoring processes. There is insufficient named nurse capacity in Royal Lancaster Infirmary. Although there has been improved access to CAMHS for children with Autistic Spectrum Disorder (ASD) or Attention Deficit Hyperactivity Disorder (ADHD), commissioning contracts do not specify the arrangements for the medical care of young people aged 16-18 accessing hospital services and community paediatric services. Specialist and outreach genito-urinary medical services across Lancashire are good with good take-up by young people who value these services.

## Areas for improvement

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

### **Immediately:**

- urgently and comprehensively review the governance and safeguarding arrangements for children and young people within University Hospital Morecambe Bay NHS Foundation Trust and Royal Lancaster Infirmary to ensure children are effectively safeguarded
- urgently and comprehensively review the safeguarding arrangements across out of hours, walk-in and accident and emergency health services across Lancashire to ensure children are effectively safeguarded.

### **Within three months:**

- improve the arrangements for recording strategy discussions so that there is a single record of discussions and actions required by the agencies involved
- ensure that the views of the child are represented in child protection case conferences
- ensure all health trusts have robust systems for capturing data to report on compliance with the required safeguarding training standard, and that full compliance is achieved
- ensure that there is sufficient capacity in designated and named health professional roles across the county, and that roles and responsibilities are specified in job descriptions or service level agreements
- ensure assessment and plans include the wishes and feelings of children, including the behaviours of pre-school age children and reports for conferences, child protection plans and core groups are outcome focused
- ensure the LADO arrangements are disseminated across the diverse communities of Lancashire so all sectors are aware of their responsibilities to make notifications.

### **Within six months:**

- review the existing domestic violence service provision to determine future needs and requirements including a commitment to fund early intervention programmes for perpetrators of domestic violence

before they enter the criminal justice system and counselling support for children who experience domestic violence before they reach the threshold for access to child protection services

- ensure there is sufficient management capacity to support the out of hours service to consolidate the improvements made in child protection and safeguarding responses
- ensure systems for completing pre-CAF assessments and CAF assessments are consistent and of good quality to provide a sound basis for early intervention work with families and where appropriate to assist social workers when cases escalate into the child protection system
- accelerate plans to improve the electronic integrated recording system to improve the efficiency of case recording, supervision and recording the rationale for management decisions

## **Children and young people are safe and feel safe**

### **Grade 2 (Good)**

29. The effectiveness of services to ensure that children and young people are safe and feel safe is good.
30. The safeguarding and child protection needs of children and young people are identified and responded to effectively and in a timely way to ensure children are safe. Child protection enquiries are prioritised effectively, enquiries are timely, risk evaluation and analysis is good and children are seen and seen alone appropriately. There has been good progress since the unannounced inspection to strengthen the social care workforce and improve the quality of assessments. As a result social worker case loads are manageable and their direct work with families has improved and is consistently good. The quality of initial and core assessments is improving and there are many examples of good assessments leading to improved outcomes for children. The identification and referral of unborn children in the cases seen is good. When these children are identified there are robust plans to safeguard them. Joint agency safeguarding work led by the Police on child sexual exploitation is recognised nationally as a model of good practice.
31. All the local authority children's homes are judged good or outstanding for staying safe by Ofsted. In addition, the two local authority residential special schools are judged outstanding for staying safe by Ofsted. The local authority adoption service is judged good for staying safe and the local authority fostering service is judged outstanding by Ofsted. Arrangements in children's centres for keeping children safe have recently been strengthened as a result of an action plan from a serious case review and nearly all children's centres are judged good by Ofsted. Schools

perform particularly well in the area of safeguarding, and staying safe outcomes have been judged good or better by Ofsted in most schools.

32. The county council provides good, clear and accessible advice, guidance and support for schools regarding safeguarding and protecting young children such as on anti-bullying strategies; internet safety; play safety and stranger awareness, and more complex cultural needs. The council provides a good comprehensive information service for all children and young people in the county to promote safeguarding. The arrangements for children and young people to have a voice and raise their safeguarding concerns are very good through the highly effective school and youth councils. The pupil attitudinal questionnaire shows that high numbers of children and young people report they are safe and feel safe. Children and young people who met with inspectors display a good understanding of what it means to be safe in school. There are good programmes of preventative work provided in schools to promote the awareness and understanding of young people around issues such as hate crime, valuing diversity or domestic abuse and how this may impact on their relationships.
33. The well established, effective statutory children's complaints service ensures that children and families can access information on complaints through the councils' website and leaflets. There are good mechanisms to ensure lessons learned from complaints are helping to improve service. Arrangements for managing allegations against people who work with children through the LADO are good. However, the increasing rate of notifications has had an impact on the capacity of the LADO to continue delivering awareness raising sessions and engage agencies across the authority, particularly in madressahs and mosques. Safe recruitment processes are in place with clear reference to, and implementation of, safer recruitment policies and good practice guidelines. This is supported by regular audits carried out by the council to ensure consistency.
34. Supported by a comprehensive and effective protocol, good arrangements are in place to identify and monitor children missing from home, care and education. There is however, no definitive over-arching policy across the partnership to cover children who go missing in all circumstances. This is the subject of an action plan by the local authority and the LSCB. Targeted programmes to tackle anti-social behaviour have had a positive impact in Lancashire which reports some of the lowest anti-social behaviour incident rates in the North West. The performance of the youth offending team (YOT) in respect to first time entrants into the criminal justice system is good and exceeds the national target.

**Quality of provision****Grade 2 (Good)**

35. 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 good.
36. Early intervention and preventative services are good. There are effective arrangements to target services such as through children's centres which are making a difference leading to improved outcomes for some of the most deprived children and families in the diverse communities of Lancashire. There has been extensive development of locality based universal and targeted services such as the Best Start Lancashire programme. These programmes are assessing needs early, helping to reduce risk sooner and avoiding the need for children to be referred to children's social care. Early intervention officers are having a positive impact on identifying gaps and coordinating early intervention partnership work. Although there is good use of pre-CAF assessments to inform early intervention the use of CAF assessments has reduced significantly in the last year. The local authority is fully aware of the reason for this reduction. The formats used for these assessments are not consistent across the county. This has been acknowledged by the LCYPT and the LSCB and work is underway to improve the process. Overall the quality of CAF assessments seen by inspectors is adequate. It is clear from these assessments that risks are identified and actions to reduce risk are clearly stated. However, assessments are not comprehensive; they do not always cover key areas such as family history or how parent's views have contributed to the assessments.
37. The local authority has strengthened its contact, referral and assessment arrangements. The CART manages all contacts and referrals from across the county in one central location. This has already had a positive impact. The rate of repeat referrals to social care is reducing. The out of hours duty team is co-located with the CART service. This ensures good communication and continuity of service with day time staff. Good arrangements for managing domestic violence referrals are in place. Joint work with the Police who are co-located with the CART has already had an impact leading to improvements in identification of risk and appropriate referral for assessment. However, there are a small number of occasions where referrers have not been satisfied with the responses made by customer service officers and this is subject to review by managers and the LSCB.
38. The quality of referrals seen is good and the transfer of information through the CART ensures social workers have the information they need to plan and take prompt and effective action. Once children are identified as being at risk of significant harm, Section 47 child protection enquiries are prioritised, actions are timely, and risk evaluation and analysis is good. Strategy discussions and meetings are timely, with good representation

from partner agencies. However, the quality of recording of strategy discussions is variable and meetings are recorded separately by different agencies so that there is no definitive record of what action will be taken by the agencies involved. The most recent management information shows that performance on initial assessments has improved and is very good as is the percentage of child protection conferences held within required timescales.

39. Although the probation service provides good programmes to work with perpetrators of domestic violence there is an inequitable level of access to programmes for perpetrators before they enter the criminal justice system. Children who experience domestic violence and meet the threshold for access to child protection services receive a good level of support and have access to an effective counselling service. However, there is insufficient resource to meet the needs of all children who do not meet this threshold.
40. The council has made significant investment to improve the quality of front line child protection services. This has ensured that there are a sufficient number of qualified and experienced social workers to meet the rising demand for service. This work is supported by a wide range of effective training and resources for social workers to assist them in developing their skills in undertaking assessments. Good attention is given to address the range of children's diverse needs such as ethnicity, religion and disability. Good and effective arrangements to support parental involvement in assessment work is ensuring their views are represented very well and these are recorded in assessments well. Good multi-agency work is leading to a holistic assessment of their children's needs. Overall the quality of initial and core assessments have improved with examples of good assessments which identify risk factors and actions to safeguard children. Although practice is well developed and ensures children are seen and seen alone the wishes and feelings of children are not always recorded and in particular the behaviour of pre-school age children is not consistently recorded to demonstrate progress or inform further plans.
41. Child protection visits to children are regular and consistent with the child protection plan. The number of parents/carers participating in case conferences is high. Good action has been taken to improve parents' experiences of case conferences through direct engagement with them. The council recognises the need to improve the participation of young people in case conferences and information leaflets have been developed for children and young people to address this. Parents interviewed by inspectors report that they are satisfied with the service they have received from children's social care, that they are consulted with regards to decision making, and that their views are accurately represented in reports and assessments prepared by social workers.

42. Child protection conferences are chaired effectively by officers who are suitably qualified and experienced social workers. Child protection chairs are very well managed with regular supervision, provided with good opportunities for reflective learning and their practice is observed routinely to ensure the quality of decision making. There is effective multi-agency involvement in planning and assessment at each stage of the child protection process. However there are a small number of examples where reports from agencies for case conferences are not received on time and therefore they are not shared with parents before the conference.
43. Child protection cases are well managed. Good multi-agency work ensures child protection plans are progressed effectively. The percentage of children on a child protection plan for two years and over has reduced and is low. The percentage who become subject to a child protection plan for a second and subsequent time has improved and is now in line with comparators. Child protection conferences and reviews are timely and reflect the changing needs of children, young people and their families. Core groups are held on time, are usually well attended and most are clearly recorded. However, agency reports to core groups are frequently verbal rather than written so there is no audit trail of progress. Also reports for conferences, core groups and child protection plans are insufficiently outcome focused. The LSCB and local authority have recognised this and there is an action plan in place to resolve this.
44. The transfer of cases between the CART and child protection teams in children's social care is good. Transfer summary reports are good as are the arrangements for re-allocation of cases from one social worker to another. There has been an improvement in the quality of case recording which overall is good. Social work professionals can navigate and input records on the electronic integrated children's record system quickly. However, the system does not effectively support the comprehensive recording and swift retrieval of case records. Records are stored in different places which makes it difficult to gather a holistic view of the child. Core assessments are recorded in different formats and stored on different electronic systems and not all are immediately accessible, such as for out of hour service professionals. Systems of accountability in case management decisions are good. However, the rationale for managers' decisions is not always clearly recorded on case files. Although there are examples of good records of supervision, some are brief with little evidence of detailed discussion, analysis and reflective practice.

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

45. The contribution of health agencies to keeping children and young people safe is adequate.

46. The health economy in Lancashire is a complex mix. There are clear structures for the governance of safeguarding for children and young people. Representatives at an appropriately senior level from PCTs are well engaged with the LCYPT and the LSCB, leading to good multi-agency partnership work around the strategic development of safeguarding for children and young people. Programmes are being delivered through well organised LSCB sub-groups which are effectively implementing change to improve service responses in nearly all service areas. Health providers have effective safeguarding committees and clear structures for reporting to executive boards and to the LSCB.
47. The PCTs oversee contracts for the delivery of services for their locality by provider trusts, and these have been strengthened to provide a tighter focus on standards and arrangements for demonstrating safeguarding compliance. Self-assessment audits of provider trusts (Section 11 audits) indicate high levels of compliance with safeguarding requirements across most providers, with action plans being monitored by the LSCB. The LSCB and its sub-groups have appropriately challenged health providers whose practices do not meet the required standards. Deficits have been identified in the governance arrangements at the University Hospital Morecombe Bay Trust's acute hospital at Lancaster, including ineffective quality monitoring and reporting to the LSCB and CDOP, and an action plan is in place.
48. Significant gaps in full compliance with safeguarding requirements at the Royal Lancaster Infirmary have also been identified, and closer monitoring arrangements have been established. However, deficits had not been addressed at the time of this inspection. The arrangements for treatment and safeguarding of children and young people at Royal Lancaster Infirmary are insufficiently robust to ensure safe practice due to lack of appropriate systems, trained staff, capacity to respond to demand for paediatric expertise, and the lack of a paediatric liaison nurse. The governance arrangements have not ensured identification of incidents in the accident and emergency department that indicated poor practice or delayed response to concerns about children and young people using the service.
49. An effective CDOP has led targeted action on the systemic causes of infant mortality in the county, which is a key priority for the panel and the LSCB. Initiatives such as the safer sleeping campaign has had an impact in several areas where there is a high level of deprivation. There have been reductions in infant mortality and the rates of average birth weights are improving and are now close to the national average. Robust arrangements are in place to promote learning from serious case reviews and incidents leading to service improvement, for example in improving record keeping in health services. A safeguarding health forum meets bi-monthly, led by named nurses, which has been effective in widening

awareness of safeguarding children issues and promoting learning from serious case reviews.

50. There is a strong network of designated nurses coordinating the development of safeguarding strategically and operationally across Lancashire PCTs, with plans to strengthen this by the development of a 'hub' and locality model for safeguarding. NHS Lancashire has recently reviewed and additionally resourced the designated doctor function for safeguarding and looked after children ensuring that there is sufficient capacity to deliver on the strategic direction and clinical support across the county.
51. Named nurses undertake quality assurance of practice including reviewing cases. The named nurse distribution for the East and Central Lancashire and within the community provider of NHS North Lancashire is proportionate to the local resident populations and to the complexity of provider arrangements which is in line with statutory guidance. There is however, insufficient capacity of named nurses at the Royal Lancaster Infirmary. Safeguarding has been effectively promoted across GP provision by specialist safeguarding posts.
52. Safeguarding policies are in place, and safeguarding champions have been established in community services including GP surgeries, which are effectively promoting good compliance and practice. Actions have been taken to strengthen supervision of staff in safeguarding work. Although health care trusts demonstrate that they are prioritising the delivery of safeguarding training, not all teams are compliant with the most recent safeguarding training standards, and performance monitoring arrangements are not yet capturing data to enable effective reporting and quality assurance in this area.
53. Acute hospitals across Lancashire have named doctors, nurses and midwives and clear safeguarding reporting structures, with some examples of excellent safeguarding arrangements for children and young people such as those provided by the Royal Preston Hospital. Robust arrangements are in place to safeguard children and young people who attend accident and emergency or are admitted to hospitals across Central and East Lancashire. For example, the safeguarding arrangements for children and young people at the Royal Preston, Chorley hospital and at the Ormskirk hospital are excellent.
54. Good arrangements are in place so all children's attendances at hospital are identified. Notifications are made to GPs, health visitors and school nurses. Medical examinations of children and young people who present with non-accidental injuries are undertaken by appropriately trained staff across Lancashire, and there is a dedicated 'safe centre' that provides a service across Lancashire, which is highly valued by service users. Same day health centres seen have appropriate arrangements for safeguarding

children and young people. However, some inconsistencies have been identified in the safeguarding responses of out of hours, walk-in centres and A&E. These arrangements are subject to review by the managers responsible.

55. Specialist midwives at Royal Preston and Chorley hospitals and Royal Lancaster Infirmary provide an excellent service to vulnerable women who are pregnant. Although there is insufficient capacity across maternity, midwifery and community paediatrics in North Lancashire there is an action plan in place to address this which has already resulted in staff appointments. However, commissioning contracts do not specify the arrangements for the medical care of young people aged 16-18 accessing hospital services and community paediatric services. This is leading to inconsistencies in the delivery of these services.
56. There are examples of effective joint working centred in early intervention and provision of comprehensive support to children and their families across the county. The health visitor workforce has been reviewed, with a reconfiguration to create 'link' staff for children's centres and GPs in Central and East Lancashire. Action is being taken to recruit to vacancies in North Lancashire. There are appropriate handover arrangements from health visitors to school nurses to enable monitoring of the health and welfare of young people where there are ongoing concerns, and good participation in child protection work.
57. There is a wide range of effective health services for children with disabilities and complex needs across Lancashire, including those for early years. However, there are insufficient CAMHS to support young people with disabilities aged 16-18, or to ensure a positive transition from children's to adult mental health services. The learning disabilities complex needs teams are either co-located with specialist CAMHS or have strong formal pathways to specialist CAMHS, which promotes good links and communication. For those who receive a service, CAMHS is effective and highly valued. Liaison and access to advice and information with CAMHS at hospitals has improved and this has ensured prompt responses to young people who self harm. There is improved access to CAMHS for children with ASD and ADHD. Commissioned Services (Young Addaction and Early Break) are in place to address both the substance misusing and the emotional health of the users. This support also assists in helping young people that need the service access specialist (Tier 3) CAMHS where otherwise a therapeutic intervention would not be possible if the young person was still misusing substances. Waiting times to access CAMHS services for children and young people overall is variable, but they are seen within six weeks. CAMHS is currently only available for children and young people up to age 16. This has been acknowledged and is being addressed by the imposition of new service contract from April 2012. Services to promote emotional health and well-being for children and

young people who are not looked after is variable across the county leading to inequitable access to service.

58. Effective work has been undertaken across Lancashire to develop appropriate arrangements in adult mental health services to promote identification and risk assessment where service users have children or have child care responsibilities. There are examples of good multi-agency work in coordinating care in this area. Children and young people have good access to contraceptive and sexual health services. Centres such as 'the Fold' provide excellent sexual health services targeted at local schools and communities. Lancashire has a track record of good outcomes in delivery of the national teen pregnancy strategy, which has led to a fall in teenage conception rates. Specialist and outreach genito-urinary medical services across Lancashire are good with good take-up by young people who value these services
59. Substance misuse teams, which are commissioned across all Lancashire, provide a network of services to promote awareness of, and access to, their services for children and young people. Joint working across agencies promotes early identification of young people who have substance misuse problems, and targets service delivery. There are dedicated teams to work with children and young people, such as Young Addaction. Aspire is an effective initiative to provide diversionary activities for young people as an alternative to substance misuse. The Addaction drop-in at Royal Preston hospital is effective in identifying young people who frequently attend hospital with substance misuse problems. However, this valued service is not available across the county. Numbers of referrals to the service overall have decreased, and action is being taken to identify the reasons for this.
60. Health staff are increasingly engaged in multi-agency initiatives to promote the health and protect the well-being of children and young people, such as the early identification of domestic violence or prevention of sexual exploitation which is making a difference.

## **Ambition and prioritisation**

## **Grade 1 (Outstanding)**

61. Ambition and prioritisation are outstanding.
62. Strategic and political leadership of the council and its partners through the county council and the LCYPT give the highest priority to safeguarding children. This is demonstrated by the council's commitment to increase the proportion of its overall spending on safeguarding services at a time of budget restraint. This has ensured that the capacity of the service continues to grow to meet the rising demand for service at the right quality. The overview and scrutiny committees provide robust scrutiny of children's safeguarding services and the performance of specific strategic and operational work to ensure the most vulnerable children who need to be protected are safe.

63. The council has taken effective action to tackle areas for development identified in the previous unannounced inspections of its front line child protection service. Children's services are judged by Ofsted to consistently perform well. Long term local authority budget planning, efficiency savings and target setting has enabled managers to consolidate improvements over time and tackle important organisational changes. For example the redesign of the contact, referral and assessment arrangements which has made a real difference to ensure children who need safeguarding are protected.
64. There are highly competent senior officers in nearly every agency across the partnership who provide clear strategic direction and respond effectively to the changing demands for safeguarding service. The LCYPT demonstrates outstanding strategic multi-agency leadership with clear priorities and aspirations and a shared focus on improving outcomes for children and young people. Knowledge of the local population and the level of need are very good. They are set out in the joint strategic needs assessment and other service specific needs analysis and support initiatives such as the working together with families strategy.
65. Excellent engagement and participation with young people is provided through school councils, youth council, district youth forum and their connections with elected members at cabinet level which ensure children and young people's views are heard. Strategic priorities are shaped by children and young people and aligned across the LCYPT, partnership and council. This ensures a strong focus on target setting to address known areas of weakness. For example, the lack of understanding and consistent use of the continuum of need document. This sets out the arrangements for access to early intervention, prevention and children's social care services and joint work by the Police and children's social care services to improve domestic violence responses.
66. Elected members are strong and effective champions for the children and young people who live in the diverse communities of Lancashire and are committed to improving their life chances wherever possible. For example, through the delivery of targeted and specific provision provided at Burnley and the Pendle Faith Centre. The partnership ensure vulnerable groups such as the Gypsy and Traveller communities are supported very well through schools and it ensures priority is given to children and young people with disabilities.

## **Leadership and management**

**Grade 2 (Good)**

67. The leadership and management of safeguarding services across the partnership, including workforce development, user engagement and the effective use of resources, are good.
68. There is a strong focus on commissioning, decommissioning and re-commissioning of services to meet changing needs, and joint

commissioning to avoid duplication and reduce cost. This is demonstrated very well through the voluntary community and faith sector partnership consortium who together are well organised in providing universal and targeted services to meet the needs of the diverse communities of Lancashire. The council has prioritised and committed considerable resources to improve its front line child protection contact, referral and assessment arrangements. The service has been comprehensively redesigned. This is an example of excellent collaboration with the private sector to ensure the infrastructure to support this aspect of the business service operation is robust. Although the health safeguarding arrangements are adequate overall, supported by some outstanding safeguarding provision in place in Central and East Lancashire, this is not consistent across the health economy particularly in the North of Lancashire. For example, senior managers have not ensured that there are robust safeguarding systems in all service provision and sufficient numbers of adequately trained paediatric staff in the Royal Lancaster Infirmary.

69. There is strong focus on issues of diversity across strategic and operational policies and plans which are supporting the effective assessment and provision of appropriate services to families from minority groups. The council's corporate workforce development strategy has focused on the need to retain and recruit a workforce that represents its diverse communities of Lancashire. Effective action has resulted in considerable improvements in the recruitment and retention of qualified staff; there is no use of agency staff, low levels of staff turnover and few staff vacancies which has created a stable workforce. Team managers ensure that supervision is provided regularly and they have good knowledge of specific cases. However, independent reviewing officer's case loads are too high and management capacity in the out of hours service is insufficient.
70. Newly qualified social workers report that they are well supported by their managers. Social workers and managers have good access to a wide range of effective and high quality training courses that meet regulatory requirements, address national and local issues and meet their developmental needs. Good systems are in place to evaluate the impact of training which is leading to continual improvement. The effective performance development programme for all children's social care staff demonstrates the individual progress of staff development very well. This includes important mandatory training such as equality and diversity awareness which is beginning to impact on the quality of social work assessments.
71. Very good systems are in place to promote user engagement. This is underpinned by the strong commitment of the cross party political leadership, with members taking issues and priorities forward through established methods of involving service users and staff, described as the

'Lancashire way' model. Children, young people and their family's views have been ascertained in developing the workforce strategy, such as their involvement in recruitment. The annual Pupil Attitude Survey aids school improvement by gauging the opinion of more than 25,000 pupils on a range of issues. The information gained also helps to inform wider service priorities. In addition, some 3,175 children and young people, including those with learning difficulties, made a very good contribution through the consultation to shape the priorities set out in the Children and Young People's Plan.

72. Opportunities for young people to influence the shape of safeguarding services are very good. School councils have influenced how schools deliver help and support for young people, such as in the design of the sexual relationship education curriculum. District and county wide youth councils meet regularly and consider issues of importance to them, such as transport and locally accessible youth facilities. The youth council has exceptionally good links with the cabinet and scrutiny committee and these connections help to translate the views of young people across the county into action. Young people are actively involved in making decisions about major areas of capital spending for the delivery of youth provision and services and the allocation of specific small grants for vulnerable groups.
73. The Safeguarding Independent Reviewing Officers' annual report ensures that the views of parent and carers involved in child protection conferences are captured and analysed and these are being used to influence social work practice. This report is a model of good practice. Initial contacts between parents and front line social workers are good. Parents who spoke with inspectors report that they are treated with sensitivity and respect. Professionals report that the CART has already led to improvements in the management of contacts and referrals but there are some examples where referrers have not been satisfied with the service, which is acknowledged and subject to an action plan.
74. The council's child protection business operation is managed very well. The proportion of the council's budget spent on children's services has increased in recognition of planned growth in demand for service over the next three years. Very good systems are in place for holding key budget holders to account. Efficiency savings have led to an under spend without the loss of service this year which is supporting reinvestment in the council's priorities. Weaknesses identified at the last unannounced inspection of the contact, referral and assessment arrangements at the poorly performing district office have been tackled. Key areas of performance at this office are now good.
75. District managers have delegated responsibility to manage their own resources which is leading to improvements in efficiency. The council and LCYPT take effective action planning on identified priorities and to tackle

service weaknesses which has ensured value for money. Lessons learnt from serious case reviews are disseminated across the partner agencies very well and these have helped to shape important developments in services such as in information for parents about safe sleeping for infants.

## **Performance management and quality assurance**

### **Grade 2 (Good)**

76. Performance management and quality assurance are good.
77. Good performance management and quality assurance systems are in place at both strategic and operational levels and are having a direct impact on improvements to the quality of work across the partnership. The local authority has a consistent track record of good and improving performance across nearly all areas of children's services with comprehensive arrangements for monthly reporting on safeguarding performance. Managers receive regular data reports on all aspects of performance to identify any areas of weakness in the practice of teams. Staff interviewed by inspectors were able to evidence where performance management information had been used to improve practice and this reflects the strong performance monitoring culture of the authority.
78. District managers meet on a fortnightly basis with senior managers and have oversight of all aspects of performance management for their district. This is resulting in a more consistent delivery of services and application of thresholds for access to service across the authority and improved performance. A comprehensive range of audit activity is embedded in children's social care as one element of the LSCB quality assurance framework. The LSCB has recently agreed a multi-agency approach to quality assurance which is starting to be implemented across partner agencies. Despite the best efforts of the LCYPT and the LSCB to challenge poor performance there are examples of poor governance, safeguarding training and quality assurance monitoring arrangements across services provided by University Hospital Morecambe Bay NHS Foundation Trust.
79. Supervision is provided regularly by team managers and senior practitioners, and social workers report that they have good access to managers for informal supervision and advice. Social care staff report that they receive good quality supervision which is appropriately challenging of their practice. Morale amongst staff is good and there is a culture of positive management. Although the quality assurance arrangements for the CART service have led to improved performance not all aspects of the service are subject to the same rigorous audit arrangement. For example, customer service officer's work is not systematically undertaken by a qualified social work manager.

## Partnership working

## Grade 2 (Good)

80. Safeguarding partnership working is good.
81. The performance of the LSCB is good. All statutory requirements are met. It has appropriate structures and governance arrangements in place and effectively links to the LCYPT. The independent chair provides good leadership and partners effectively support the board by the appropriate representation of all key agencies, including adult services and the voluntary community and faith sector. Partner agencies are challenged and held to account and performance is closely monitored. For example, the independent chair of the LSCB exercised rigorous challenge when the University Hospital Morecambe Bay NHS Foundation Trust failed to deliver a good quality independent management review to support a serious case review which led to delays. Effective mechanisms for disseminating the lessons learned from serious case reviews to all agencies, including the faith sector, are well established. The LSCB provides a comprehensive range of good quality training which is attended by a range of partner agencies, including the voluntary sector.
82. The LCYPT promotes effective multi-agency partnership work which is based on committed, skilled staff who together have ensured that performance on national indicators and local priorities have improved. Good multi-agency work to support child protection and children in need plans ensures those children who need protection are safe. Prompt action to safely reducing risk has led to good performance on the length of time children spend on a child protection plan and reduction in the rate of children who are subject to a repeat child protection plan. Finding solutions together in partnership is a strong feature of the LCYPT, for example, the piloting of MASH and the co-location of health professionals in some district teams is leading to effective, holistic assessments of risk, timely interventions and better outcomes for children.
83. The Police contribution and performance on safeguarding and child protection services strategically and in the delivery of front line services is very good. Joint work between the Police and the CART has already had an impact leading to improvements in the rate of domestic violence referrals which go on to an initial assessment. Good partnership work between the Police and children's social care in undertaking Section 47 enquiries is leading to swift action to protect some of the most vulnerable children who need protection. This includes effective strategy discussions although these meetings are recorded separately by each agency.
84. Targeted work to address domestic violence has been effective with improved take up of services and more cases being identified as high risk and managed by multi-agency risk assessment conference (MARAC). Attendance is good by all agencies and actions are undertaken promptly. The partnership arrangements led by the Police for the identification and

safeguarding of children at risk of exploitation are very good. Multi-agency public protection arrangements (MAPPA) are good. They are effectively chaired and performance issues such as attendance are rigorously monitored. Meetings are well attended by all agencies at all levels and actions are delivered on time. Re-offending rates for those subject to MAPPA are very low indicating the safe management of risk. There are effective relationships with prisons and notifications of release are communicated in time for arrangements to be made to ensure the safeguarding of children within the community.

85. Partnership work in the voluntary community and faith sector is strong. Services are effectively coordinated to prevent overlap and provide shared pathways to service. There is a clear multi-agency protocol for the identification and referral of safeguarding concerns about unborn babies. This includes risk indicators that clarify thresholds, processes and timescales.

## Services for looked after children

### Overall effectiveness

**Grade 2 (Good)**

86. The overall effectiveness of looked after children services is good.
87. Strong strategic and cross party political leadership is backed by the necessary financial resources to meet the needs of the looked after children population. At a time of great financial pressure the council has maintained its high level of commitment to looked after children to ensure resources and the capacity of the service provision continue to match the growing demand for service. Corporate parenting arrangements are outstanding, supported by elected members who together effectively champion the needs of looked after children. The council, through the corporate parenting board, has high aspirations for those in its care.
88. Highly competent senior officers across the partnership provide clear strategic direction and respond effectively. All outcome areas are improving and nearly all are judged good. The local authority's fostering and adoption service and its children's homes provision are all judged good or better by Ofsted. Nearly all children are placed in provision which is judged good or better by Ofsted. The only exceptions being where the young person has made a specific request to remain in a placement and it has been assessed as being beneficial to continue this placement. Children and young people have many opportunities to make representations including very good arrangements at cabinet level which are influencing the shape of services. Councillors demonstrated a rigorous approach to Regulation 33 visits and they are holding managers to account appropriately to ensure high standards of care and service in all local authority settings. However, the rate of improvement for health outcomes is not as impressive and health outcomes are only adequate.
89. The partnership knows itself very well. Priorities are based on a clear needs analysis which identifies the partnership's strengths and areas for improvement. Strategic and operational plans are supporting the rigorous assessment of provision. Services are closely matched to meet the needs of the diverse communities of Lancashire very well. The children's social care workforce is representative of the county's diverse population and the impact of services to tackle aspects of equality and diversity is judged good overall. Effective action has led to considerable improvements in the retention and recruitment of qualified social work staff. There is a low level of reliance on agency staff, low levels of staff turnover and few vacancies. Strong commissioning, re-commissioning and decommissioning arrangements and good monitoring of all placements including external service provision ensures children receive good quality care and are safeguarded. However, family group conference provision is not consistently available to promote good outcomes across the county.

Auditing arrangements for children's services have been particularly effective at ensuring specific performance targets are met such as targeted work to improve the timely completion of personal education plan (PEP) reviews. The quality of PEPs is also improving although these are not yet consistently good. Independent reviewing officers make a valuable contribution overall to shape and improve services at a strategic and individual child level. The annual report of the looked after children independent reviewing officer service is comprehensive. However, high case loads are impacting on the timely completion on the electronic integrated recording system of case review reports.

90. The quality of social work assessment reports seen by inspectors is generally good. They reflect the views, wishes and feelings of children very well. Thorough risk assessments are undertaken to support effective planning. Social work case file records seen by inspectors are up to date and appropriately detailed. Looked after children independent reviewing officers' records and reports seen by inspectors are detailed and recommendations are made appropriately. However the electronic integrated recording system does not fully support comprehensive recording and easy retrieval of records and some assessment and report templates are not conducive to recording the good work which is being done plans are already in place to address this through the procurement of a new ICT system.
91. Most care leavers report that they are in suitable accommodation and that they have choices about where they live. All those leaving care receive a grant to help with set up costs. However, the provision of formal independent living skills programmes for young people leaving care is insufficient to meet demand across the county. Nearly all care leavers have updated pathway plans and the timeliness and completion of these plans is very good at 96%. Financial support for young people attending college and university is good. However, the provision of financial support for some care leavers aged 18 who remain in education is not consistently good across the county.

## **Capacity for improvement**

## **Grade 1 (Outstanding)**

92. The capacity of the council and its partners to improve services for looked after children and young people is outstanding.
93. The council has high aspirations for young people to achieve well and to reach their full potential. The council has taken swift and decisive action to improve the poor level of service provision for looked after children reported in 2007. The local authority's track record of performance over the last four years is one of continual improvement leading to standards of service provision which are good or better. Value for money audits are used effectively to evaluate service provision and have resulted in efficiencies and cost savings which the council has appropriately re-

invested to consolidate its performance and in the continual improvement of looked after children service provision. Although the number of looked after children is increasing, the rate of children in the care system is lower than comparators. This is due to the highly effective early intervention and prevention services which are targeting families where children are on the edge of care so that they do not enter the care system unnecessarily. Social work caseloads in the looked after children and leaving care teams are manageable. Good systems are in place to evaluate the impact of training on performance. Social workers and managers can access a good range of high quality training and development opportunities and this is improving their skills.

94. Good links are in place with other local authorities in the region to share expertise and bench mark services. The advocacy service and independent visiting service is good. Children and young people know how to complain and are effectively encouraged to access support when they need it. They make their feelings known and lessons learned from complaints are leading to service improvements. The work of the looked after children independent reviewing officers is of good quality and highly valued by all children and young people, their parents, carers and professionals. There has been an increased take up of skills training and development opportunities by foster carers which are valued by them and are leading to improved outcomes such as in the stability of children's placements.
95. Strong strategic direction is provided by the virtual head teacher leading to successful partnership working with schools to meet the needs of looked after children. All schools have a designated teacher for looked after children and the impact of services on enabling looked after children and young people to enjoy and achieve is good. Although standards achieved by children aged 11 years and aged 16 years in 2011 have been adversely affected by a disproportionately high number of children with special educational needs (SEN) statements in both age groups, overall between 2007 and 2010 there was strong performance. Also current data show that the large majority of 11-year-olds with SEN are making good or better progress from their individual baselines and very good progress at 16-year-olds in English and mathematics.
96. Significant financial investment has been secured by the partnership to increase access to training and employment for young people in care to maintain this area of good performance. Children and young people who attend the CiCC have good access to senior officers and elected members through their membership on the highly effective youth council as well as the corporate parenting board. The numbers of children and young people in care known to the YOT has reduced well over the last year and the rate of those who re-offend is low.

## Areas for improvement

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

### Within three months:

- improve the timeliness of initial health assessments
- improve the rate of children who receive a routine dental health examination
- improve the arrangements and quality of looked after children's health records and ensure there is an audit trail to demonstrate all health issues are acted on promptly.

### Within six months:

- ensure looked after children independent reviewing officers' caseloads are manageable
- ensure the capacity of family group conference service provision is sufficient to meet demand
- ensure that all PEPs effectively support looked after children to achieve the best educational outcomes
- ensure that reports of looked after children's reviews are completed and distributed within a timely fashion
- ensure appropriate training in independent living skills is consistently available for young people in preparation for them leaving care
- ensure all care leavers aged 18 who remain in education are adequately supported financially
- ensure the clinical psychologist service has sufficient capacity to meet the needs of looked after children.

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

### Being healthy

### Grade 3 (Adequate)

98. Services to promote the health and well-being of looked after children are adequate.
99. There is a strong network of designated nurses for looked after children which is helping to support improving health outcomes for looked after children though not as good as elsewhere. Designated nurses provide effective strategic direction in delivery of responsibilities for looked after children and promote improvements through quality audits and monitoring. A recently appointed designated doctor undertakes the responsibilities for looked after children across all three Lancashire PCTs. This post is subject to a continual review to ensure NHS Lancashire is able to fulfil the statutory guidance for promoting the health and well-being of looked after children.
100. Named nurses for looked after children across the three health areas provide good operational direction including supervision and a clinical role in supporting harder to reach children, such as those not attending school. Looked after children nurses offer a good range of health advice and additional support to looked after children and there is effective joint working with social workers.
101. Most looked after children are offered a choice of where to have their health assessment but capacity to meet requests is limited. Looked after children's health records are not well organised or filed in chronological order, making it difficult to track a young person's pathway through health and social care services. The quality of health assessments seen is adequate. Some assessments and related action plans were overly brief, and did not consistently reflect follow-up of all the health issues identified. There has been an upward trend in timely completion of annual health assessments, but some initial health assessments are not completed within timescales. An audit by NHS North Lancashire of health care plans for looked after children in the North Lancashire area found that the quality of some records did not meet the required standards. Action has been taken to review the documentation used for health assessments to ensure health action planning is more effective, and new formats are being piloted. Young people leaving care have health plans and are signposted to health services, which promotes improved health outcomes for this group.
102. Performance in ensuring that looked after children have up to date immunisations is good. However, performance on the rate of looked after

children who have a regular dental health check has decreased and is low. This has been acknowledged and action is being taken to address this.

103. The local authority provide excellent early intervention services to support parents and carers of looked after children through the supporting carers of looked after children and young people together (SCAYT) and children looked after support service (CLASS) programmes. These teams facilitate access to CAMHS where appropriate which decreases delays as there are no 'fast track' arrangements to CAMHS for looked after children. Waiting times for access to CAMHS is currently no more than six weeks across the county. Waiting times to access clinical psychology is variable with long waits in parts of the county. CAMHS at present is only available for children and young people up to age 16. This is being addressed by new contracts from April 2012.
104. Looked after children have good access to drug and alcohol services. Action is being taken to ensure that performance data on referrals to these services is accurate, and to ensure that looked after children are accessing the service as needed. Good arrangements are in place for looked after young people who require contraception and sexual health services. A clear protocol is in place to ensure that there is pre-birth assessment and planning for young people who are looked after. This ensures that any risks are identified early and support provided for this vulnerable group. Dedicated teenage pregnancy midwifery roles are in place in North and Central Lancashire. These are effective and highly valued by young mothers and practitioners in coordinating pre-birth planning and the perinatal care of looked after young people who are pregnant. Compliance with the protocol was not consistent in areas where there was no dedicated teenage pregnancy midwife, which leads to inequity in the quality of care.
105. Protocols for the effective transfer of health information for looked after children who move across health authority boundaries are not sufficiently robust. This undermines the continuity of health care, information sharing and health planning. Although multi-agency groups have been effective in improving responses within the county, there are delays when children move out of Lancashire, and significant difficulties when looked after children are placed within Lancashire. Links are being made with independent care homes within the county to help identify looked after children who move into the local health area, but this is not yet effective across all services. Plans for a new charging tariff across NHS North West health area (including Lancashire) will establish a financial incentive for early clarification of health responsibilities. Although this is at pilot stage, it is not yet implemented.

**Staying safe****Grade 2 (Good)**

106. Safeguarding arrangements for looked after children and young people are good.
107. Decision making based on assessment of risk is timely and ensures that those children who need to be looked after are provided with placements that meet their immediate needs for protection. In all cases seen children and young people who need to be looked after are in care. The local authority's fostering and adoption service and children's home provision are all judged good or better. There are robust and thorough arrangements for monitoring all care placements where Lancashire looked after children are placed to ensure that they are safe. The council has established good contracting and monitoring arrangements of independently provided placements, including those out of the county, to ensure that children are looked after safely.
108. There is timely, responsive and effective reviewing of all cases by the looked after children independent reviewing officers. They make a significant positive contribution to ensuring that partners and carers meet the individual needs of looked after children very well and that they are safeguarded and outcomes are improving. Where necessary looked after children independent reviewing officers use the dispute resolution process effectively to ensure that children's social care and partners take prompt action to progress recommendations and actions from reviews and care plans, for example to ensure transition workers are allocated promptly.
109. Social work caseloads in the looked after children and leaving care teams are manageable. Recently qualified social workers receive good support and direction from managers on more complex cases. Children and young people are routinely seen and seen alone by their social worker and this is recorded on the case file appropriately. Nearly all statutory visits are carried out by qualified social workers. In all cases visiting arrangements are appropriate to the needs of individual children. Nearly all statutory visits are carried out within the required timescale. Children and young people seen by inspectors said they feel safe and are safe in their placements.
110. There are good commissioning arrangements which are based on children's individual needs. This has led to improvement in the choice of placements for children and young people including those with complex needs. Performance on short term placement stability has improved and is now in line with comparators. There has also been a significant improvement in long term placement stability where performance is consistently good.
111. The missing from care policy and procedures are well established and supported by comprehensive and effective protocol arrangements which ensure that any young person going missing from care is promptly

identified. Children who have been missing are seen on their return by a Police officer for a 'safe and well' check and have a return interview with their social worker. However they are not routinely offered an interview with an independent person/worker. Good partnership working with the Police contributes to the safeguarding of children and young people who may be at risk of child sexual exploitation.

## Enjoying and achieving

## Grade 2 (Good)

112. The impact of services on enabling looked after children and young people to enjoy and achieve is good.
113. The new virtual school head teacher has a good grasp of the educational priorities and needs of children looked after by the authority having undertaken a thorough assessment and analysis of the current profile of attainment, attendance and achievement for scrutiny committee. She is supported by a small but well established and effective team of educational consultants who provide advice, guidance and support to schools, residential settings and carers across the county. All schools have a designated teacher for looked after children; this group receive regular and effective training and support from children and young people's services.
114. Educational outcomes for looked after children are satisfactory. Standards achieved by children aged 11 years and aged 16 years in 2011 have been adversely affected by a disproportionately high number of children with SEN statements in both age groups and have declined overall after strong performance between 2007 and 2010. Nevertheless the numbers of 16-year-old pupils gaining five or more A\*-C grades at GCSE, including mathematics and English, were slightly higher than predicted locally at 12.2%, which is just below the national average. The attainment levels of all children and especially those children with statements of SEN are monitored effectively and the gap in attainment between those with SEN and all other pupils in Lancashire narrowed between 2007 and 2010. Current data show that the large majority of 11-year-olds with SEN are making good or better progress from their individual baselines in reading and writing but less so in mathematics and very good progress at 16 years old in English and mathematics.
115. The personal education allowance is used constructively through one to one support and individualised programmes to help narrow the gap in achievement and improve progression for individual children. This includes the purchase of laptops for use at home if required. Robust systems are in place to monitor and track attendance closely for children within and outside of the county. The attendance of looked after children is very good and the most recent data show a strong trend of improvement at 95% across both primary and secondary phases.

116. All children have an electronic personal education plan (e-PEPS) and the timeliness and completion is good. However the virtual school team is aware that the quality of recording is too variable and plans do not always give sufficient information about achievement and progress, target setting and actions. Some provide scant evidence of the child's views about how well they are doing.
117. Children in care placements out of county receive on going and effective support from the virtual school team and designated teachers. Monitoring systems for attendance and achievement are good. There are no reported permanent exclusions so far this year and performance on fixed term exclusions is good.
118. A good range of alternative education provision is in place to ensure children receive on going education support if mainstream placements break down. Short stay schools are particularly effective in helping to re-engage children back into learning and very good working relationships have been fostered through the virtual school team between alternative education providers, schools and residential homes and foster carers. The cultural needs of looked after children from minority groups are given high priority and work is tailored to meet specific needs when appropriate.
119. Children and young people's achievements are celebrated through locally arranged activities within schools and residential homes as well as county wide events. There is a strong commitment by the council to ensure children enjoy their education. Children, including those with learning difficulties and/or disabilities, are generally extremely positive about their experiences in school and the additional support they receive when they need it. Good opportunities are available for children and young people to get involved in extended school activities, to take part in specialist programmes, such as dance and music sessions, and to access a range of leisure, cultural and recreational activities in their local communities.

### **Making a positive contribution, including user engagement**

**Grade 2 (Good)**

120. Opportunities for looked after children and young people to make a positive contribution are good.
121. The council, through the corporate parenting board, has high aspirations for those in its care. Children and young people, including those with learning difficulties and/or disabilities have been very well supported and encouraged to develop their confidence and communication skills, to 'speak out' about issues and to influence service development. Many have worked diligently and very successfully to change the way staff and services take account of their views and concerns. Excellent examples include contributions to high level discussions about children's home closures; the redesign of two new children's homes which have recently opened; training of social work staff about the experience of being in

care; and the implementation of 'golden rules for presentation'. Overall children said they that they are pleased with the quality of care and support they receive.

122. Children and young people who attend the CiCC have good access to senior officers and elected members through their membership on the highly effective and widely representative youth council as well as the corporate parenting board. The structure for the CiCC has recently been reviewed and improved but numbers of those participating in the three CiCCs across the county are still small and as a result they do not yet fully represent the views of the wider looked after children population. Participation workers are working hard with young people in developing a number of mechanisms using, for example, information technology, 'facebook', twitter, the media and arts. They are having some success in engaging more children who are looked after in activities and decision making processes through the CiCC although progress is slow.
123. Children and young people know how to complain and are effectively encouraged to access support when they need it and make their feelings known. Complaints about service provision are monitored closely, numbers have reduced and mediation at an early stage is having a positive impact in reducing the acceleration of complaints. The advocacy service and independent visiting service is good. The Pledge clearly articulates the council's commitment to this group and looked after children and young people have been involved in shaping and producing the document. However, not all children and young people who spoke with inspectors were aware of its purpose or, in some instances, its existence.
124. School age children in care are particularly pleased with the ongoing support and guidance they receive from their designated teachers, which often goes well beyond their academic needs. Some were less positive about their social workers and those approaching the age for leaving care shared concerns and anxieties about the inconsistency of planning for new placements and preparations for leaving care.
125. The numbers of children and young people in care known to the YOS has reduced well over the last year. This has been supported by improved performance management systems and a range of innovative and effective programmes delivered through a strong multi-agency approach to prevent offending and re-offending which focus on the most vulnerable groups. For example, the highly effective restorative justice programme in the East of the county led by the Police is helping those children in care known to the YOS to develop their resilience and personal strategies for managing their behaviour and taking responsibility for their actions.

## Economic well being

## Grade 2 (Good)

126. The impact of services to enable looked after children and young people and care leavers to achieve economic well-being is good.
127. The council has high aspirations for young people to achieve well and to reach their full potential. Good systems are in place to monitor the number of young people in care who are accessing education, training and employment. Performance on the rate of young people in education, employment and training has been consistently good over time however this performance is recently showing some slippage. Significant financial investment has been secured by the partnership to increase access to training and employment for young people in care. Much of this is in the planning stage and it is therefore too soon to demonstrate impact. The number of young people with a learning difficulty and/or disability who are in training or employment has improved and at 75% is good.
128. Good multi-agency work is supported by the co-location of young people's services across the county which provides care leavers with access to a comprehensive range of information and guidance to find out about and engage in education and training and employment, as well as health, welfare and benefits advice. Young people value this support. Nearly all care leavers have up to date Pathway Plans and the timeliness and completion of these plans is very good at 96%. However, young people seen were generally not convinced of their usefulness, although they described the on-going support and guidance they receive from their after care workers as excellent.
129. There is a good and developing range of training and work placements for young people in care available across the county through the partnership. Good financial arrangements are in place to support young people to attend college or work. The number of apprenticeships and access routes to them has increased. Linked to the Pledge, these schemes have been successful in preparing care leavers for work by increasing their interpersonal and employability skills. Currently 30 young people in care attend university and several spoke enthusiastically to inspectors about their aspirations to achieve higher qualifications. Those at university have received the necessary financial support. However, some care leavers described inconsistency across the districts in the financial support available for 18-year-olds in education, with some needing to access benefits to sustain their placements when others were receiving on-going foster carer support.
130. The Young People's Service and social care workers provide effective support and training for foster carers and residential settings in helping with the resettlement and accommodation needs of young people in care returning from custody. There are well established and effective joint protocols between housing, social care and preferred private providers

which ensure that care leavers are well supported to access good quality, and permanent accommodation. Most care leavers stated that they were in suitable accommodation which they had chosen. All those leaving care receive a grant to help with set up costs. However, the provision of formal independent living skills programmes for young people leaving care is insufficient and inconsistent across the county. Those care leavers in private rented accommodation expressed concerns about affordability and sustainability of the tenancy because of increased utility bills and reduced benefits while working on a minimum wage.

## Quality of provision

## Grade 2 (Good)

131. The quality of provision overall in services for looked after children and young people is good.
132. The number of children and young people becoming looked after is rising, however the rate of looked after children when compared with similar councils and the national average is low. There is effective work with children and young people and their families at the edge of care to prevent family breakdown and entry into care and to safely return children home. Decisions and actions to take children into care are timely and taken at a suitable level of seniority. This ensures that children and young people who need to become looked after are taken into care and placed in safe placements. Thresholds for coming into or remaining in care are generally understood and applied consistently. However, a review undertaken by children's social care of children subject to child protection plans for neglect in East Lancashire found that historically some children had remained at home too long. This stems from a variation between partners about levels of 'acceptability' of home conditions. The LSCB is leading on a work stream to improve shared understanding of 'thresholds for care'.
133. Children coming into care are placed in appropriate placements which are supported well by the increase of in-house foster care resources and good commissioning arrangements which prioritise matching children's individual needs. Fewer children and young people are being placed at a distance from family and community. An increasing number of children and young people are placed appropriately with foster families. Good responses to support children and young people through the SCAYT and CLASS programmes are helping to maintain children and young people in their placements. Also a positive impact of these services is that carers have a greater knowledge and understanding of the emotional needs and presenting behaviours of looked after children so they are able to respond and meet their needs more effectively.
134. Good support and training is in place for foster carers from the local authority fostering service. This is helping to extend and improve their skills in more effectively meeting the needs of children placed with them.

The quality of the council's own residential provision is good and new innovative ways of working are helping to closely align services to meet individual children's needs. This has led to the review of, and changes to, the residential services available to meet children's needs. The looked after children team and leaving care team have been amalgamated so that children and young people experience less disruption of service, often keeping the same social worker.

135. The quality of assessments seen by inspectors is good. Children and young people said that they were regularly seen alone by their social worker and this is recorded in case files appropriately. Assessments reflect the views, wishes and feelings of children and young people well and there are examples of good care plans where children's views have been taken into account regarding placement moves and name changes. Assessments include children's identity, religious and cultural needs, and demonstrate sensitivity to how complex disabilities impact on communication, mobility and personal care needs. Good work is undertaken to ensure that children know and understand how care plans and care proceedings affect them, for example regarding special guardianship orders (SGO).
136. Although the number of children placed for adoption has reduced, the overall number of children and young people who have been placed for permanency has increased through the use of SGOs. For the children for whom adoption is the plan, performance in achieving placements within 12 months is good. Recent targeted recruitment has been successful in attracting a good number of new applicants. Thorough risk assessments are undertaken to ensure that plans to return children home to parents are undertaken safely and these are recorded well. Family group conferences are having a positive impact in improving outcomes for children and young people although this provision is not consistently available across the county.
137. Independent reviewing officers give high priority to encouraging looked after children, parents and carers to contribute to care planning and reviews. Performance on the timely completion of reviews is very good, as is the level of attendance and participation of children and young people at their reviews. However, because of their high caseloads, independent reviewing officers do not circulate review reports to children, parents, carers and professionals within the required timescale. All children and young people, parents and carers seen by inspectors report that they highly value the review process, the support provided by independent reviewing officers and they feel able to contribute and express their views.
138. Social worker case file records seen by inspectors are up to date appropriately detailed and contained children and young people's, parents' and carers' views. Looked after children independent reviewing officers records and reports seen by inspectors were detailed and contain

appropriate recommendations. However the electronic system does not fully support comprehensive recording and easy retrieval of records. Records are stored in more than one place and staff report that some templates are not conducive to recording the work which is being done. This is recognised by the council and an action plan is in place.

## **Ambition and prioritisation**

## **Grade 1 (Outstanding)**

139. Ambition and prioritisation are outstanding.
140. Highly effective early intervention strategies to safeguard children and young people and to ensure that families receive effective support is making a positive difference to the safety and care of children and young people at risk of entering and remaining in the care system. As a result the rate of looked after children in Lancashire is consistently lower than similar councils and the national average. Priorities are aligned across the LCYPT and the council. Looked after children services are based on a very accurate understanding of what is working well and what needs to improve further.
141. The council has taken swift and decisive action to improve the poor level of service provision for looked after children reported in 2007. The local authority's track record of performance over the last four years is one of continual improvement leading to standards of service provision which are good or better. For example, the local authority fostering service, failing in 2007, was judged outstanding by Ofsted in October 2011. The Children and Young People's Plan identifies clear and ambitious targets and priorities. The impact is that performance has improved and is consistently better than comparators in most key areas.
142. The commissioning strategy for looked after children is strong, ambitious and builds on a thorough analysis of need that has led to a high rate of children being placed near to the place where they live. Nearly all children are placed in provision which is judged good or better by Ofsted. The only exceptions being where the young person has made a specific request to remain in a placement and it has been assessed as being beneficial to continue this placement. The partnership arrangements with other agencies ensure looked after children are given the highest priority. There are effective arrangements to target improvement including single and multi-agency action planning which focuses on the right priorities leading to close monitoring of performance and improved outcomes for looked after children.
143. Highly competent senior officers across the partnership provide clear strategic direction and respond effectively to the competing demands for the delivery of service to meet the complex and diverse needs of the looked after population. As a result overall outcomes for looked after children and young people are good and all are improving. For example performance on short term placement stability has remained consistent

and long term placement stability has improved and is now good. However, outcomes are not yet consistently good. Also some areas of permanency planning are only adequate. The council has worked effectively with Cafcass to analyse the impact of significant delays in achieving care and adoption orders as a result of significant delays in court processes, and robust action has been taken by the LSCB to address this with the Judiciary.

144. Corporate parenting arrangements are outstanding. This work is supported by elected members who fully know and understand their safeguarding responsibilities in relation to looked after children. They effectively champion the needs of looked after children. Looked after children and young people are empowered through their active involvement with the corporate parenting board and links with the CiCC are very good. Children and young people have many opportunities to make representations including formal arrangements at cabinet level which are helping to influence the shape of services children and young people need and want, such as in the recruitment and training of staff and improvements made to the quality of children's homes. Councillor's demonstrated a rigorous approach to Regulation 33 visits which is ensuring high standards of care and service in all local authority settings and which managers say is helping to hold them to account successfully for their work.

## **Leadership and management**

## **Grade 2 (Good)**

145. The leadership and management of services for looked after children and young people are good.
146. Strong strategic and cross party political leadership is backed by the necessary financial resources to meet the needs of the looked after children population. At a time of great financial pressure the council has maintained its high level of commitment to looked after children to ensure resources and the capacity of the service provision continue to match the growing demand for service.
147. There is strong focus on issues of diversity across strategic and operational plans which are supporting the effective assessment and provision of appropriate services to families from minority groups. The council's corporate workforce development strategy has focused well on the need to retain and recruit a workforce which reflects the diverse communities of Lancashire. As a result the children's services workforce is representative of the county's population. The number of employees in children's social care who have declared a disability is higher than the rest of the council.
148. Effective action has led to considerable improvements in the retention and recruitment of qualified staff. There are low levels of staff turnover and few staff vacancies. As a result nearly all looked after children have an

allocated qualified social worker. Recently qualified social workers receive an appropriately increased level of supervision, a reduced caseload and training which is supporting their development very well. They value the additional support and direction they receive from their managers particularly when they are managing complex cases.

149. Social workers and managers can access a good range of high quality training and development opportunities that meet regulatory requirements, cover national and local issues and report that this is improving their skills. There are good systems in place to evaluate the impact of training on performance and to report progress on the workforce development plan to senior managers and scrutiny committee. An effective performance development programme is in place for all children's social care staff which includes mandatory equality and diversity training.
150. Staff respect their senior managers who demonstrate a strong commitment and continuing improvement of the looked after children service. Health outcomes of looked after children have improved although not at the same rate as other outcome areas. Strong strategic direction is provided by the virtual head teacher which is leading to successful partnership working with schools to meet the needs of looked after children. Senior leaders in schools report positively on the education of children looked after (ECLA) team and their impact on pupil's educational progress and well-being. The work of the looked after children independent reviewing officers is of good quality and highly valued by all children and young people, their parents/carers and professionals. Plans to address the independent reviewing officers' high case loads are in place, however they have not yet been implemented.
151. There has been an increased take-up of skills training and development opportunities by foster carers which they value. They report that this is having a positive impact on their skills and understanding resulting in good impact on the quality and stability of placements. Foster parents consistently report that they get excellent support and good training from the outstanding fostering team. They particularly value how the SCAYT and CLASS programmes have improved their understanding of, and ability to manage the behaviours and needs of children more effectively.
152. There is a strong focus on promoting quality for money and value for money through effective commissioning, re-commissioning and decommissioning of services to ensure that individual needs of looked after children are met very well. For example, through the 'North West 23' regional commissioning consortium. This ensures children and young people are only placed in service provision which is judged good or better. Few looked after children are placed out of county, unless this is in their best interests. This ensures that most children do not travel far from their families and local communities and so contact and links can be

maintained. There are good links with other local authorities in the region to share expertise and benchmark services. Value for money audits are used effectively to evaluate service provision and have resulted in efficiencies and cost savings so the council has been in a good position to reinvest in the continual improvement of resources such as the new children's home provision.

## **Performance management and quality assurance**

### **Grade 2 (Good)**

153. Performance management and quality assurance are good.
154. The partnership knows itself very well. Priorities are based on a clear needs analysis which identifies the partnership's strengths and what they need to do better. This leads to comprehensive action planning processes based on the findings of lessons learned from inspections, serious case reviews, audits and consultations with users. Effective arrangements to monitor key areas of service operation and priorities for improvement are in place. This has ensured that although the rate of improvement in health outcomes has not been as profound there has been rapid and sustained improvement in all of the other four outcome areas. Highly effective performance management and quality assurance systems have ensured performance is maintained at a good level and coordinated systematic improvement is made, such as in the significant improvements in the local authority fostering service.
155. Auditing arrangements for children's services have been particularly effective at tackling specific performance indicators to ensure performance targets are met. The annual report of the looked after children independent reviewing officer service provides a comprehensive evaluation of their activities and challenges. Independent reviewing officers make a valuable contribution overall to effectively quality assure every looked after child review, make appropriate recommendations and identify themes which are helping to shape and improve service at a strategic and individual level. Targeted work to improve the timely completion of PEP reviews has led to improvement. There is also improvement in the quality of PEPs, however the quality of PEPs is not yet consistently good. The virtual head teacher is working with her team to ensure all PEPs reflect the good practice seen in the best.
156. Robust, transparent reporting against key performance indicators is established across the partnership which includes rigorous review by the corporate parenting board and strategic management teams. The scrutiny committee receives reports on priority issues such as young people leaving care and not in education, employment and training. This ensures that any areas of under achievement are identified quickly and that corrective action is taken, for example improvement in choice of placements which is impacting positively on long term placement stability. The local authority

ensures the findings from research, inspection and serious case reviews are disseminated across the partnership, for example improving the quality of the local authority fostering provision. Very good commissioning arrangements and good monitoring of all placements, including external service provision ensures that children receive good quality care and are safeguarded.

## Record of main findings:

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