

Joint area review

Derby City Children's Services Authority Area

Review of services for children and young people

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Introduction

1. This report assesses the contribution of local services in ensuring the following for children and young people:
 - effective care for those at risk or requiring safeguarding
 - the best possible outcomes for those who are looked after
 - the best possible outcomes for those with learning difficulties and/or disabilities.
2. The following investigations were also carried out:
 - access to, and the effectiveness of, sexual health services for children and young people, including teenage pregnancy support
 - the quality, availability and suitability of accommodation for young people.

Context

3. Derby City has a population of 236,298 living within its 77.7 square kilometres. It has areas of affluence as well as significant deprivation. It ranks 44th out of the 354 local authorities in England in the national Index of Multiple Deprivation (2004). Thirty-two percent of the population live in wards which are amongst the most deprived in the country. At 4%, unemployment is slightly higher than the rate for the East Midlands and nationally. Just under a third of the child population lives in households which claim income support.
4. The city has a mix of different cultures. The proportion of the population from Black or minority ethnic backgrounds is 12.6%, which is higher than the national average of 10%. Over 60 languages are spoken in the city. Since 2001, this diversity has been further enhanced by new arrivals from Eastern Europe and refugees from a range of countries. Children and young people represent 22.4% of the city's population.
5. Pre-16 education is provided through: 402 early years settings; eight nursery schools; 78 primary schools; 14 secondary schools (including an academy) of which 12 have enhanced resource provision for pupils with special needs; six special schools; a non-maintained school for pupils who are deaf or who have a hearing impairment; and one pupil referral unit.
6. Post-16 education is provided through sixth forms in seven of the city's secondary schools, as well as through Derby College. Work-based training is provided by a network of 12 providers and Derby College. There are a further six providers with over 10% of their learners living in Derby City wards.

7. Entry to Employment (E2E) provision is managed by the Learning and Skills Council (LSC) through direct contracts with E2E providers, the majority of which are core funded work-based learning or further education providers.

8. Adult and Community Learning is provided through schools, Derby College and the Derby Adult Learning Service which has eight learning centres across the city. Family learning is provided by the Childcare and Family Learning Service. The area is served by 36 learndirect centres. Department of Work and Pensions provision is delivered by a network of 19 providers, some of whom also hold LSC contracts.

9. Primary care is provided by the Derby City Primary Care Trust (PCT). It provides, and commissions, short breaks for children with learning disabilities through a Section 31 partnership, with the council acting as the lead agency. It also provides a multi-professional learning disability therapy service, for children attending special schools in the southern Derbyshire area, and inpatient mental health services to Derby authority. Primary health care workers provide specialist health visiting services for children with special needs. The PCT provides conception and sexual health services for the southern Derbyshire and Derby city areas. Children's acute hospital services are provided by the Derby Foundation hospitals which incorporate dedicated children's services.

10. The Derbyshire Mental Health Services NHS Trust provides mental health and learning disability services across Derbyshire and also provides Child and Adolescent Mental Health Services (CAMHS) in the south of Derbyshire.

11. Children's social care services are provided through the city council's Children and Young People's Department. The council runs five children's homes and has 422 looked after children in its care. Of these, 76 are in externally purchased shared places, with the majority living outside the local authority boundary. Ten young people are in external residential placements for behavioural reasons and eight children with disabilities are in shared places. The Light House Centre, jointly funded and managed by the council and Derby City PCT, provides an integrated service for profoundly disabled children with complex needs and for those with moderate to severe learning disabilities.

12. There are no young offender institutions in the area.

Main findings

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

- The contribution of local services to improving outcomes for children and young people at risk, or requiring safeguarding, is good. There is effective interagency and preventative work to identify, and respond, to the needs of children at risk in an appropriate and timely way, although the proportion of initial assessments completed on time has fallen. There are clear separate protocols for defined groups to

identify missing children. These have not yet been brought together into an over-arching strategy.

- The contribution of local services to improving outcomes for looked after children and young people is good. Strong and effective partnerships are making a discernible difference to children's lives. The care leavers' service is good and corporate parenting responsibilities are well understood and fulfilled effectively. Further progress needs to be made to ensure that all children in care are allocated to a qualified social worker.
- Local services make a good contribution to improving outcomes for children and young people with learning difficulties and/or disabilities. There is a high commitment to their inclusion in schools and in the locality. The integrated disabled children's service is a model of good practice. The services provided by the Lighthouse and the support for the hearing-impaired are also major strengths, as are the excellent recreational facilities available for those with learning difficulties and/or disabilities. There is insufficient collation of data to give an accurate city-wide picture of attainment and progress. College courses lack flexibility and there are insufficient opportunities for work-based learning for these young people.
- Access to, and the effectiveness of, sexual health services for children and young people, including teenage pregnancy support, are adequate. A wide range of often imaginative projects has been introduced to educate young people about sexual health but their impact has not been evaluated sufficiently. The rate of teenage pregnancy remains higher than average.
- The authority offers suitable accommodation for adequately meeting the needs of most children and young people in the local population. There are effective intervention strategies to minimise homelessness and good partnership working between the authority and other agencies. However, there is insufficient accommodation to meet the needs of some vulnerable groups and data analysis does not ensure that provision is consistently targeted on those in greatest need.
- Service management is good. The council has outstanding ambitions, prioritises well and, through close collaboration with partner agencies, has extended its capacity for delivery. Some services, however, are heavily reliant on time-limited funding. Monitoring and review mechanisms are effective but action plans are not consistently detailed and best use is not always made of data. There is good capacity for further improvement.
- There are excellent mechanisms for ensuring that a wide and representative range of children and young people is able to take an active and central role in the reviewing and planning of services.

Grades

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

	Local services overall
Safeguarding	3
Looked after children	3
Learning difficulties and/or disabilities	3
Service management	3
Capacity to improve	3

Recommendations

For immediate action

The local partnership should:

- ensure that an appropriate way is found for the successful dissemination of the findings of this report to children and young people in the area
- bring together existing inter-agency protocols for identifying missing children into an overarching strategy
- ensure that all action plans clearly identify responsible officers, dates of delivery, expected outcomes, resources required and risks associated with failure to achieve.

For action over the next six months

- Make further progress with recruitment and development initiatives to ensure that all children in care are allocated to a qualified social worker.
- Make better use of available data to evaluate progress and plan improvements in relation to children and young people with learning difficulties and/or disabilities.
- Ensure that there are clear strategies to evaluate the effectiveness of all initiatives relating to reducing teenage pregnancy and improving sexual health.

- Revise the methods for collecting and analysing data, to ensure that actions to improve housing capacity for young people are targeted accurately.

For action in the longer term

- Increase the opportunities for more flexible college programmes and for work-based learning for young people with learning difficulties and/or disabilities.

Equality and diversity

14. The council has achieved Level three in the equalities standard requirements of the Commission for Racial Equality. Each of the lead officers on the outcomes for the Children and Young People's Plan has been trained to conduct impact assessments on race equality within the areas for which they are responsible. The Children and Young People's Department has reviewed and refocused services to tackle the identified problem of the disproportionate number of children from Black and minority ethnic (BME) groups within the care service. The care leaving service makes dedicated provision for unaccompanied asylum seeking refugee young people who come into the area. Partners, including the statutory and voluntary service, also review the impact of policies on BME and other communities.

15. Information is available in a wide range of languages and in different formats. This includes a leaflet on safeguarding and child protection. There are clear policies to ensure the successful inclusion of looked after children and those with learning difficulties and/or disabilities within schools and the community. Concerted efforts are made to ensure that the groups of children and young people involved in the planning and review of services are fully representative of the city's communities.

Safeguarding



16. The contribution of local services to improving outcomes for children and young people at risk, or requiring safeguarding, is good.

Major strengths	Important weaknesses
Children at risk identified; responses appropriate and timely, both during and outside office hours.	The lack of an over-arching strategy to bring together existing protocols for missing children.

<p>Good range of effective preventative services available.</p> <p>Good quality training accessible to parents and staff from all agencies.</p> <p>Good multi-agency working, resulting in positive outcomes for children and young people.</p> <p>Success of the participation strategy in involving children and young people in the planning, development, and operation of services.</p>	<p>The decline in the proportion of initial assessments completed on time.</p>
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17. Services are effective in engaging with children and young people and their carers to promote their health and well-being. The Healthy Schools initiative has been very successful in Derby. There is a good range of initiatives to promote sexual health, smoking cessation and reduce alcohol and substance misuse. Staff in schools, and other services, are also well supported and trained to provide targeted help in these areas. This work has contributed to a reduction in the rate of teenage conceptions, although the latter still remains above the comparator averages. The number of children and young people killed, or seriously injured, in road accidents reduced by 43% between the 1994 to 1998 baseline and 2005.

18. There is a strong focus on ensuring that children and young people are at the centre of the development, implementation and review of strategies relating to safeguarding. There is a comprehensive participation strategy which results in young people being regularly represented on appointments panels for social care workers, teachers and other staff. Young people are provided with extensive opportunities to contribute to service development and review, through schemes such as the Shadow Board, neighbourhood fora and school councils, all of which include young people with disabilities. Careful account is taken of young people's preferences, wherever possible, in determining who should hold information about them and who should participate in their reviews.

19. The Derby Local Safeguarding Children's Board has been proactive in improving communication with member agencies and the wider public. The arrangements for identifying private fostering placements comply fully with regulations. Good use is made of the children's centres, schools and other agencies to disseminate information on a wide range of issues, including safeguarding, to young people, parents and carers. This is further supplemented by well-informed support from a range of professionals and information targeted at specific groups within the community. Safe and Sound, for example, has an innovative assertive outreach programme to help children at risk of sexual exploitation.

20. The council has a very clear anti-bullying policy which is rigorously supported by all partners. Initiatives such as Friends Against Bullying, the peer mentoring scheme and the Shadow Board provide a range of imaginative strategies for raising young people's awareness of, and readiness to challenge, racism, homophobia and other forms of discrimination. Several young people interviewed provided poignant testimony to the effectiveness of this work.
21. Children at risk of immediate harm are identified very effectively by the central Reception Team which ensures a prompt and consistent response across the city. The authority performs well in ensuring that children who are deregistered continue to be supported. Thresholds are understood by all agencies but, over the last year, performance on the timeliness of initial assessments following referral has declined by 10% from a very good level to one which is slightly below that of statistical neighbours. The authority attributes this to difficulties in inputting data into a newly introduced computer system. The timeliness of completion of core assessments is, however, very good. Care Line, the out-of-hours service, operates effectively, with good links to the Reception Service.
22. Multi-Agency Risk Assessment conferences ensure that all agencies are fully informed and engaged in focusing on safeguarding issues in domestic violence cases. The strengthening of the Domestic Violence Unit, together with the formal multi-agency protocol, has increased the capacity for dealing with incidents of domestic violence and their consequences. All training relating to domestic violence places appropriate emphasis on giving primary consideration to the needs of the child.
23. The authority has been successful in ensuring the collaboration of a full range of agencies in working together to safeguard children and to promote a culture of safeguarding. This is supported by a comprehensive programme of training at appropriate levels. Take-up is rigorously monitored by the Local Safeguarding Children's Board. Staff working with children and young people with learning difficulties and disabilities have a good awareness of safeguarding issues for this group and have the expertise to take appropriate action where necessary.
24. Enhanced Criminal Record Bureau checks are undertaken in accordance with national guidance. Service level agreements with contracted agencies ensure that they all meet the same standards as the authority. The Multi-Agency Public Protection Arrangements are well embedded and used effectively.
25. Case files examined during the inspection demonstrated a good standard of recording and supervision. All children on the Child Protection Register are allocated to a qualified social worker and all reviews are completed on time.
26. There are effective arrangements for the governance, accountability and strategic management of safeguarding through the Derby Local Safeguarding Children's Board. This includes representatives from a wide range of statutory

and voluntary agencies and, through dedicated subgroups, gives focused attention to specific aspects of the safeguarding agenda. The Board reviews its practice rigorously and makes changes appropriately. Priorities are clearly identified, costed and implemented.

27. Over the last two years, the Youth Offending Service has been restructured and is now an integral element in the city's collaborative preventative work with young people in danger of offending and re-offending. Cases examined in detail demonstrated very good early intervention by this service, resulting in successful outcomes for children at risk. These cases also demonstrated the high quality of integrated working.

28. The Common Assessment Framework has been in operation since 2002. This development is well embedded and understood and has been instrumental in the promotion of preventative services. A large number of staff from a very wide range of agencies has undertaken training. Unusually, parents have also been involved in such training. The authority is on course to meet the government target for the full implementation of ContactPoint in October 2008.

29. There has been one serious case review in Derby City over the last two years. This was dealt with effectively and led to considerable improvement in processes.

30. Separate protocols for defined groups are in place to identify missing children. However, as the authority recognises, there is no overarching or co-ordinated approach to data collection and performance monitoring in relation to missing children.

Looked after children and young people

Inadequate ☐

Adequate ☐

Good ☒

Outstanding ☐

31. The contribution of local services to improving outcomes for looked after children and young people is good.

Major strengths	Important weaknesses
<p>Strong and effective partnership arrangements which make a discernible difference to children's lives.</p> <p>The good initiatives in place to involve all children in both individual and wider strategic planning of services.</p>	<p>Not all children in care allocated to a qualified social worker.</p>

<p>The good care leavers service which is rated highly by those who use it.</p> <p>Corporate parenting responsibilities understood and fulfilled.</p>	
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32. Services work effectively together to identify need and deliver services to children in care. A careful refocusing of the Children in Care Service has resulted in a reduction in the proportion of Black and minority ethnic children in care and the provision of a service better suited to their needs. The authority performs well in terms of completion and recording of health and dental assessments and in establishing the immunisation history of children coming into care. In addition, children are provided with a wider programme which includes a focus on healthy eating, being active, advice on sexual health and combating substance misuse. However, this places considerable strain on the limited resources of the designated health staff. Therefore, additional funding has been agreed with key partners in order to improve capacity in this area. Looked after children are given appropriate priority on the waiting lists for Child and Adolescent Mental Health Services. Waiting lists for all children have reduced considerably over the last year and performance is now better than average.

33. Carers and staff responsible for children in care are provided with good training, advice and support. Dedicated services for children in care are good and effective in ensuring the high stability of short-term placements. Long-term stability has also improved to be in line with national averages.

34. Care plans include an appropriate focus on permanency, and adoption is considered within the wider care needs. Despite a recent slight decline in adoption rates, performance in this area remains good. Recently, however, there have been delays in the placing of some children for adoption.

35. All children in care are allocated to a worker but only 59.2% to a qualified social worker. This is lower than the averages nationally and for similar authorities. The authority has recognised the need for improvement in this area and has been innovative in enabling local staff to achieve the relevant qualifications but there is still more work to be done to improve the situation. Despite this, case files demonstrate some very good work on the part of unqualified staff, with a clear focus on safeguarding and assessing risk. Care plans give a clear indication of the areas of need and how better outcomes can be achieved. Additionally, every effort is made to ensure care plans identify cultural needs and how to meet them. Key agencies collaborate well to ensure that plans are delivered in a timely and appropriate manner.

36. Frontline services are scrutinised, and monitored, by managers and corrective action is taken appropriately. Elected members, and council staff, have a good understanding of the corporate parenting role and, within frontline services, there are strong champions of the children's agenda. There has been

an improvement in the timeliness of reviews which is now adequate, being in line with the average for similar authorities and just below the national average.

37. Children are provided with a good range of services, including valuable input from the sexual abuse unit and the enhanced care and attachment projects. This ensures secure attachment to carers and rapid action to prevent breakdown of placements.

38. A complex cases panel provides jointly shared funding and agreement on externally purchased placements when it is required. There are some 76 children placed outside the area, in placements to meet specific needs for which the council does not have provision. The council is committed to supporting these placements despite the rising children's population. There are clear monitoring procedures for ensuring that value for money is provided.

39. There is a good range of opportunities for looked after children to contribute to the planning and evaluation of services. Several make a valuable contribution to the work of the Shadow Board and to the consultation activities organised through Kids In Care In Control (KICK). This has resulted in clear improvements, such as equal pocket money allowances for all looked after children. Young people make a valuable contribution to the recruitment and selection of key staff. Through exit interviews, care leavers have influenced improvements in service planning and delivery.

40. The educational attainment of looked after children has improved since 2003. In 2007, the proportion of these children gaining five or more A*-C grades and one or more A*-G at GCSE were above the averages for their counterparts nationally and in similar authorities. However, the gap between their performance and that of the general school population is still too wide. The ratio of care leavers, compared to the general population who are in employment, education and training, is good and remains above the averages nationally and for similar authorities.

41. At the end of the last academic year, the proportion of looked after children with personal education plans was 81%. Although this represents a considerable rise over previous years, the authority has recognised the need for further improvement and for increased monitoring and auditing of this area.

42. Absences are carefully monitored, although they are currently slightly greater than the averages nationally and for similar authorities. Good partnership work between the pupil referral unit and other agencies is having a positive impact on children who are disengaged from education and have behaviour problems. It is helping them return to mainstream education and introducing them to enhanced vocational opportunities. Education welfare officers monitor attendance diligently and take the necessary action where concerns are identified.

43. The care leaving service is good and held in high regard by those who use it. Transition planning is effective and 90% of children have plans to support them into adult services. The policy of allowing care leavers to stay in their placements beyond their eighteenth birthday ensures good stability at the point of transition. The majority of care leavers are suitably housed. Private landlords with experience and understanding of the care leaving service are selected to give particular support to these young people.

44. The authority has robust arrangements to keep children safe in placements. Staff visit children regularly and children are seen separately and on their own.

45. The number of first-time entrants into the judicial system is well below statistical neighbours and rates of re-offending are lower than in similar authorities. Final warnings, and convictions, have also been reduced to below the averages nationally and the authority is the lowest in its statistical neighbourhood group for these measures.

46. Most children in care are placed in Derby City homes, or with foster carers registered with the authority. Recent inspections of homes and foster homes judged virtually all provision to be good and rapid action was taken to implement recommendations relating to one home. In addition to the statutory monitoring undertaken by independent managers, councillors also visit homes to ensure standards are of good quality. Discussions with children are central to these visits. All councillors who make these visits are checked against the national Criminal Records Bureau data.

47. There has been an increase in the number of children participating, and being helped to participate, in their reviews. Performance in this area is now above the averages nationally and for similar authorities. A wide range of well-received training is provided to ensure that staff and carers understand their responsibilities to report any concerns that arise.

48. Two independent agencies provide advocacy and independent visiting services for all looked after children. A particularly good aspect of the latter service is that it continues to be available to children, who wish to make use of it, even after they have returned home.

49. Children have a clear understanding of the procedures for making complaints and offering compliments and make use of both procedures. Most complaints are resolved at an early stage and any that go to the final stage are investigated by an independent pool of appropriately qualified people.

Children and young people with learning difficulties and/or disabilities

Inadequate ☐Adequate ☐

Good

☒Outstanding ☐

50. The contribution of local services to improving outcomes for children and young people with learning difficulties and/or disabilities is good.

Major strengths	Important weaknesses
<p>The flexible and solution focused approach shown by services in supporting families and enabling children to remain within the locality.</p> <p>The model of good practice provided by the integrated disabled children's service.</p> <p>The quality of accommodation and resources at the Lighthouse.</p> <p>The successful promotion of inclusion in schools.</p> <p>The work of all partners to meet the needs of the hearing impaired in the city.</p> <p>The work to support parents and build their confidence and skills.</p> <p>The opportunities for children and young people to contribute to the planning and review of services.</p> <p>The range of specialist and integrated leisure activities and the access to universal activities.</p>	<p>Insufficient use of a wide range of data to monitor progress across schools.</p> <p>The number of young people with learning difficulties and/or disabilities who are not in education, employment or training.</p> <p>Insufficient flexibility in courses and insufficient work-based learning opportunities.</p>

51. Services work together well to identify, and assess, the needs of this group of children and young people. A flexible and solution focused approach is successful in supporting families and enabling children to remain within the locality. The integrated disabled children's service is a model of good practice and ensures that the best possible use is made of information and resources to meet the needs of children who need early intervention. Information sharing is highly effective and ensures comprehensive packages of care. This approach is

seen operating well in other services throughout the local area, including the good support children receive from the specialist children's hospital. Safeguarding children and young people with learning difficulties and/or disabilities takes high priority in all services.

52. The delegation of special and additional educational needs funding to schools has been achieved successfully and the commitment of schools to inclusion is strong. The proportion of children receiving education in enhanced resource provision is higher than that found nationally or in similar authorities. Because of the increase in this provision, and the successful efforts to ensure a shared understanding of inclusion, the number of new statements has fallen and there are far fewer appeals to the special educational needs tribunal than found regionally or nationally. The success of work to support the greater inclusion of children and young people who have behavioural difficulties is reflected, for example, in the decreasing number of children permanently excluded from primary schools. Permanent exclusions from special schools are rare and, between 2006 and 2007, there was a significant reduction in the proportion of children with statements who were permanently excluded.

53. The presence of the Royal School for the Deaf within the city attracts a large number of families whose children have a hearing impairment, and 29 of the 59 children with statements placed out of the authority attend this school. As a result, the council and its partners have developed a range of very good specialist services and are continuing to extend the expertise available in the city. This includes the service for the deaf, covering both children and adults, which helps ensure smooth transitions. Another example is the very good work of the youth service which both provides opportunities for young deaf people to meet together and enables them to access universal services.

54. There are some staff shortages which affect access to therapy services, although targets have been met. However, several helpful initiatives have been established to develop the expertise of school staff in these areas. The work of specialist nurses is helping schools manage a wider range of needs and one local service received an award from the PCT for its work with children who have life-limiting conditions. Services are working together well to meet children and young people's mental health needs. The new Challenging Behaviour service is beginning to demonstrate a good impact on reducing the burden on regional specialist residential provision.

55. Parents and carers are closely involved in making decisions and there is a good range of support to help them care for their children and to be partners in developing their children's skills. An example of this is the successful completion of the 'Fun Pals' programme by parents and family members, many of whom are of Asian heritage. Voluntary organisations and settings all provide good support and information once a child is known by them. However, some parents report they do not receive this soon enough. There is a good range of short break and respite services available to support families. The provision at the

Lighthouse is particularly good with users benefiting from the purpose built accommodation and excellent range of facilities.

56. Children and young people have good opportunities to contribute to decisions about important events in their lives and to influence the development of services. Examples include pupils from a special school helping to appoint the school nurse, and the good involvement of this group in school councils. There is an excellent range of leisure activities, which include specialist and integrated activities, as well as strong support to access mainstream activities.

57. Standards for young people identified as having special educational needs mirror the pattern for all pupils across the city. Pupils with statements achieve better than those in similar authorities and nationally at Key Stage 4. The proportion achieving five or more A* to G grades at GCSE showed good and steady improvement from 2003 to 2007, and that for five or more A* to C grades at GCSE rose at a fast rate from 2003-2006. There is a good trend of improvement in GCSE results for students attending the pupil referral unit.

58. Children's progress is measured, and tracked, well at individual pupil level in all schools. Pupils in special schools make good progress. The authority has recently begun to analyse its data in greater detail and is using the information effectively to challenge and support individual schools where outcomes fall below expectations. It has begun to sample a proportion of schools to analyse progress. Evaluation from the first complete year shows that almost all pupils at Key Stage 1 and 2 at School Action Plus made at least satisfactory progress and almost half made good progress. However, the authority does not yet make best use of the data it collects to demonstrate overall progress and attainment.

59. Schools, and parents, are pleased with the new transitions service. Over 90% of young people have transition plans. A small number of new person-centred plans has been produced as part of a pilot. These are of good quality. There is good attendance at reviews and good support from Connexions. The work to promote the learning and skills of young people with complex behaviour difficulties and those with a hearing impairment is good. The proportion of those with learning difficulties and/or disabilities who are not in education, employment or training (NEET), improved from 19.3% to 17.3% between 2006 and 2007 but remains above that found nationally. The percentage of pupils leaving the Key Stage 4 pupil referral unit who were NEET fell from 47% in 2005 to 33% in 2006. College courses lack flexibility and there are insufficient opportunities for work-based learning for young people with learning difficulties and/or disabilities.

Other issues identified for further investigation

The contribution of local services to the access and effectiveness of sexual health services for children and young people, including teenage pregnancy support

60. The contribution of local services to the access and effectiveness of sexual health services for children and young people, including teenage pregnancy support is adequate.

Major strengths	Important weaknesses
<p>The good range of initiatives to reduce teenage pregnancy and promote sexual health.</p> <p>Good interagency and service user collaboration in this area.</p>	<p>The rates of teenage pregnancy which remain above the statistical neighbour and England averages.</p> <p>Limited formal evaluation and measurement of impact and outcome of projects.</p>

61. Despite some recent improvement, in the under 18 conception rate, the city remains above the averages nationally and for statistical neighbours. The authority recognises this and has worked with its partners to produce a good range of initiatives to tackle the situation. However, the impact of these is unclear, either because they have only recently been introduced or because of insufficient rigour in evaluating their effectiveness.

62. In August 2007, a strategic review of the teenage pregnancy partnership was completed. The plan was reviewed and refocused, taking account of the views of young people. The commissioning structures at all organisational levels, and in partner agencies, have been strengthened and there is now clear accountability to the Children's Trust Board. Dedicated health posts have been established to improve work in this area. These include a clinical nurse specialist post for abortions and a number of community matrons. The impact of their work has not yet been evaluated.

63. Good work is being undertaken by both the family nurse partnership practitioners and youth workers in educating young people about safe sexual health behaviours. Evaluations of case histories show that this is having a positive effect on the lives of individuals. Other initiatives include: SPACEMAN, a boys and young men's sexual health project; the Angels project for girls; and Delay training, focused on preventing teenage pregnancies and promoting good sexual health. These have proved popular with young people. In 2006-07, for example, over 200 young men from across the city attended SPACEMAN sessions. However, these projects have not been fully evaluated to show whether they are having any impact on reducing teenage pregnancy rates or reducing risky sexual activity.

64. Young people have a choice of different facilities and venues where they can obtain sexual health advice and contraception, including the emergency contraceptive pill which school nurses can administer under a patient group directive. Young people interviewed reported that they welcomed the services on offer, especially the school nurse drop-in sessions, and felt less intimidated using these than when attending traditional clinics.

65. Regional rates for chlamydia increased from 71.3 per 100,000 in 2004 to 80.7 in 2005. A dedicated chlamydia screening co-ordinator has been employed to implement the national screening programme. This involves a range of innovative approaches aimed at increasing the screening rates for under-25 year olds. Uptake of this pilot programme is monitored by the Health Protection Agency.

66. The Healthy Schools initiative, in which the partnership has achieved Beacon status, includes provision for relationship and sexual health education. Because of the success of work in this area, further funding has been secured for the 'body image' project in targeted schools for Year 6 pupils. This is designed to improve young people's feelings of self-worth. The theatre in education sessions, used to support personal health and relationship education amongst Year 10 pupils, have proved very successful. The evaluation of the specific sexual health plays by 144 pupils showed that they felt more able to resist peer pressure to have a sexual relationship and were more aware of how they could obtain contraceptive advice. The greatest impact was amongst girls.

67. Other strategies to educate young people about sexual health risks and teenage pregnancy have included involving them in the production of a DVD on the subject. No boys were prepared to take part and attempts to find male actors were unsuccessful. However, young men's experiences were used in the script writing. The effect that this may have on the effectiveness of the DVD, when used for professional training and to educate young men, has not been assessed as it has only recently been launched and its impact has not yet been evaluated.

68. The education welfare integration officer provides good support for school-age parents to be and their families and remains in contact with them after the baby is born. This officer enables the young women to continue with their education and gain access to a range of on-going support through good referral processes with other partner agencies

69. Derby City was one of 10 successful authorities to bid for the national pilot of the family nurse partnership project. The aim of the project is to improve the health and well-being of the most disadvantaged families and children and prevent social exclusion. The programme has successfully recruited 100 first-time mothers under the age of 24, many being teenage parents. This is a two-year programme and will be externally evaluated. Early feedback from those involved with the project is positive, with some mothers having the confidence to return to education or employment while successfully caring for their babies.

70. Derby College, in partnership with the Drug and Alcohol Team, has introduced an electronic health messaging system for young people, called 'health bytes'. This system is a series of planned 'pop up' boxes, which appear when a young person uses a college-based computer terminal. The messages include advice on safe sex, contraception and alcohol reduction. There has been no evaluation of the impact of this approach. The college has recently secured funding for a dedicated college nurse who will focus on promoting good sexual health practices.

71. A sexual exploitation strategy has recently been launched. Since 1998, Derby City has had a specialist child sexual abuse unit. The service works closely with other agencies such as Safe and Sound, which supports young people under 19 years old who are at risk of, or are being, sexually exploited. The individual service user evaluations show that it is rated highly and felt to be effective. However, there has been no authority-wide evaluation of the impact this service is having on the population it serves.

The quality, availability and suitability of accommodation for young people

72. The quality, availability and suitability of accommodation for young people are adequate.

Major strengths	Important weaknesses
<p>The effective strategies used to reduce the numbers of homeless young people.</p> <p>Proactive policies to minimise homelessness amongst 16 to 17 year olds.</p> <p>The effective strategies used to identify the needs of minority ethnic groups.</p> <p>The close partnership between the authority and other local agencies in dealing with issues of homelessness.</p>	<p>The insufficient housing capacity for some groups of young people.</p> <p>The current methods of collecting and analysing data which do not ensure that provision is consistently targeted on those in greatest need.</p>

73. The authority offers suitable accommodation for adequately meeting the needs of most children and young people in the local population. There are currently 6,300 children and young people aged 0 to 24 years on the housing register. Ninety-eight per cent of young people are housed in good quality, decent accommodation. This is better than regional and national figures. However, the availability of accommodation is insufficient to meet all the needs of some vulnerable groups.

74. There are effective strategies to reduce the numbers of homeless young people. The number of people accepted as homeless by the authority has reduced from 1,065 in 2005 to approximately 750. Until recently, the greatest cause of homelessness was domestic violence. This is no longer the case because of the good mediation and support provided to families to reduce tensions caused by issues such as debt or drug and alcohol misuse. The situation has also been improved by a change of policy to one that involves removing the perpetrators, rather than the victims, of violence. The authority estimates that 56 children have been prevented from becoming homeless as a result of these measures.

75. The council has proactive policies to minimise homelessness amongst 16 to 17 year olds. For example, looked after children are encouraged to stay in their placement up to, and beyond, their eighteenth birthday and, through very clearly defined pathways, are given appropriate support and advice. The same approaches are used to help young asylum seekers. Other 16 and 17 year olds, who are at risk of becoming homeless, receive intensive mediation and counselling support which also embraces other members of their families. The resolution of tensions in this way has led to a reduction in homelessness amongst this age group.

76. There is a range of effective strategies to identify the needs of Black and minority ethnic groups. Through a range of surveys and research studies, which included the views of young people and providers, the authority identified that 34% of BME households were overcrowded and comparatively few people from an Asian heritage were making use of supported housing and other support services. Further investigation led to two significant findings. Firstly, more people from this group than in others aspired to own their property. Secondly, the larger, and more extended, families indicated a need for houses with a greater number of bedrooms. As a result, the development plans for housing have been modified to include the provision of more low cost and shared ownership accommodation and social housing units with a larger number of bedrooms. A research project is nearing completion which is designed to gain a better understanding of the needs of the Traveller community.

77. The close partnership between the authority, and other local agencies, is having a positive effect on homeless people. The family intervention project has been successful in reducing repeated eviction by families who have been subject to Anti-Social Behaviour Orders. Over the last 12 months, all the teenage parents supported by the English Churches Housing Group have successfully sustained their tenancies. Partners are kept well-informed about housing and support services and offer very useful advice and guidance to young people. An externally accredited qualification called the 'Passport to independent living' has been developed by the YMCA to provide homeless young people with support in gaining the skills needed for a successful move away from supported living arrangements. This programme will be offered to all young people in supported accommodation in 2008.

78. Partners are now working to build further on successful joint working, by establishing a multi-agency assessment centre for homeless people. This is due to open in April 2008. In addition, a joint housing register has been agreed. This will allow a single point of entry to services, to make access to them easier and reduce the burden of bureaucracy for all applicants.

79. Despite such successes, there is still insufficient housing for some vulnerable groups, particularly families who have been made homeless. The number of households accepted as homeless is almost twice the figure of similar authorities and nationally. At 6.7%, the availability of rented stock is lower than in similar authorities.

80. At the time of the inspection, there were 11 children in bed and breakfast accommodation with their families and 27 children up to the age of 19 in other temporary accommodation. During 2005/06, there were approximately 100 occasions when families with children, or pregnant women, were placed in bed and breakfast accommodation. The length of stay in such accommodation is above that for similar authorities but in the median quartile for England. Because of the lack of accommodation, some people live in hostels despite being assessed as ready to move onto settled accommodation. Those in supportive housing are unable to move in a timely manner. Duration of stay in supported accommodation can be considerable. In the case of some young people living on their own it can extend to two years.

81. Since 2003, the authority has developed a number of strategies for increasing housing availability. These include a programme of property refurbishment and plans to build additional housing units through a private finance initiative. The authority is also working with private landlords to increase the availability of rented stock and improve their understanding of the housing allowance. The authority and its partners recognise that the impact of these initiatives might be limited by the loss of current stock through the right-to-buy arrangements. They are adapting their strategies appropriately to meet the identified challenges. As a result, the amount of new affordable housing has increased and is now higher than for similar authorities.

Service management



Capacity to improve



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

Major strengths	Important weaknesses
<p>Strong ambition that engages a wide range of partners.</p> <p>Partnership working across the Trust based on a clear commitment to improve outcomes for children and young people.</p> <p>Strong leadership provided by senior managers and councillors.</p> <p>Innovation in engagement of children and young people.</p> <p>A clear focus on securing value for money.</p>	<p>Inconsistency in the quality of action plans.</p> <p>Service planning and development in some service sectors not being adequately supported by robust methods for collection and analysis of data.</p>

83. The council and its partners have outstanding ambitions to improve the quality of life of all children and young people in Derby. This strategic vision is clearly articulated in the Children and Young People's Plan 2006-08 which is an integral part of Derby's Community Strategy. The plan is underpinned by long-standing partnerships the council has with a range of agencies, including the voluntary sector. A distinctive element is the involvement of the business community which has led, for example, to the creation of over 100 young apprenticeship places. Ambitions are stretching and challenging.

84. The Children and Young People's Plan is based on a comprehensive needs analysis and both its creation and review have been marked by a very high level of involvement of children and young people and the community. All partners have implemented race equality schemes and carried out equality impact assessments in line with relevant legislation.

85. Prioritisation by the council and its partners is good. The six children's outcome groups of Derby City Partnership have clear and robust priorities for improvement that relate clearly to the overarching ambitions of the Children and Young People's Plan.

86. All of the priorities identified are underpinned by action plans for delivery. Many of these are of high quality. For example, the Learning and Skills Council Strategic Review has a good implementation plan which identifies specific actions to be taken, dates for the completion of those actions and the contributions to be made by partners. However, a few other plans, such as those relating to housing and special educational needs provision, do not contain precise targets or sufficient details of resource allocation.

87. Robust action is taken to ensure the delivery of strategies. For example, partners are improving unsatisfactory primary school attendance by ensuring parents are aware of the educational and legal implications of non-attendance. They have also recognised the challenges to attendance resulting from new migrant communities by producing leaflets in a range of Eastern European languages. There is an increasing focus on preventative strategies through family support schemes such as Derwent Stepping Stones and Best Beginnings and the work on early identification of children at risk of exclusion or from domestic violence.

88. Commissioning and investment are closely aligned to the delivery of priorities. The Partnership has invested funds to review and re-commission the Teenage Pregnancy Strategy to deliver a more focused and targeted service drawing on lessons learned through review. This includes the commissioning of work to help non-specialist teachers deliver personal, social and health education modules at Key Stages 3 and 4.

89. The capacity of local partnerships to deliver services is good and there is very effective interagency working at all levels. The work of the Crown Prosecution, Youth Offending and Children's Services in ensuring that looked after children do not enter the youth justice system too early or inappropriately is a particularly good example of this.

90. There is good leadership and management at officer and councillor level. The lead councillor for children and young people and the chair of the scrutiny commission are well informed. The Corporate Director for Children and Young People has a very clear vision, provides very strong leadership and has a detailed understanding of developments at every level of the service. He is supported by a team of able senior officers.

91. Partners have established a Children's Trust that is delivering fully integrated services in Area 1 of the city as a pilot. In other areas, smaller-scale joint initiatives provide a comprehensive range of services which are sensitive to local needs. The Rosehill Children's Centre, for example, provides a women-only swimming club and links to the voluntary sector self-help groups through the Strengthening Communities team. The children's centres across the city promote effective collaboration between teams such as health visitors and family support workers.

92. Value for money is good. Outcomes for children and young people, including the most vulnerable groups, are generally good. Although the council's financial settlement is low, it retains significantly less than average and has robust systems for ensuring that delegated money is used effectively. Last year, for example, there was a claw-back of £37,000 from retained school balances.

93. Joint commissioning and investment are also used effectively to deliver value for money. Use of Invest to Save monies to create a local 5-19 service for autistic children has produced a more accessible service that delivers value for money by reducing expensive out-of-area placements.

94. Budgets are pooled to provide improved services, such as the Integrated Children's Disability Service, which consistently exceeds its assessment and delivery targets. It is noteworthy that, in Derby, pooled budgets include a contribution from Connexions as well as from health and social care. Voluntary and community agencies such as Peers Early Education Partnership are involved in delivering priorities such as family support and raising educational attainment and aspiration. Their capacity is being enhanced through partnership working with the council in areas such as administration, governance and finance.

95. The council works well with the statutory and voluntary sectors to increase capacity. As a small unitary authority, Derby faces challenges in delivering the full Every Child Matters agenda. Much of the additional resource relies on time-limited external funding and this presents a risk to the continuation of some services.

96. Sound progress is being made in workforce planning. Joint recruitment and training policies are developing well across health, children's services and the independent sector. There have been specific difficulties in recruiting to some professional groups such as speech therapists and social workers in the past. The authority has developed flexible systems for dealing with some of the shortfall in these areas but the underlying problems remain.

97. Performance management across children's and young people's services is good. There is a robust performance strategy, involving all partners in shared review of service delivery and outcomes. A rigorous approach to performance management ensures that findings are reported to responsible officers and bodies and used to ensure improvement to outcomes. The Performance Eye system and the recently introduced performance surgeries are used well to monitor analyse and review areas of underperformance. Good use is made of this information by outcome groups, the scrutiny commissions and the Children and Young People's City executive. However, there are weaknesses in the collection and analysis of data which detract from the quality of monitoring in some areas, notably housing for young people, sexual health support, and attainment and progress of children and young people with learning difficulties and/or disabilities.

98. The council is using innovative techniques to enable children to contribute to the review and planning of services. The Shadow Board is a particularly good example of how children, representing a wide range of communities, groups and interests, work with members of the executive to develop and monitor services. At a recent meeting organised around the theme of staying safe, young people were able to draw on their direct experiences to enable officers to gain a far better understanding than previously of issues relating to

gang culture. The formal 'pledges' made by the executive to the young people ensure that ideas and aspirations are delivered and that consultation leads to action.

99. Capacity to improve further is good. Strong partnership working and a joint commitment to improve outcomes for all children and young people underpin services in Derby. Good financial management is delivering value for money. Performance management is used to identify and resolve underperformance, resulting in good services being consolidated and some weaker services being improved. There have been significant improvements in recent years, such as the rise in educational attainment at Key Stages 3 and 4. Although this has dipped in 2007, analysis and planned strategies to regain previous performance are in hand. The economic wellbeing of young people is also improving. The percentage of young people over 16 in employment, education and training is increasing to meet challenging targets. Other areas for improvement, such as performance at Key Stages 1 and 2, have received investment but the impact of this is still to be seen.

Annex A

MOST RECENTLY PUBLISHED ANNUAL PERFORMANCE ASSESSMENT OF SERVICES FOR CHILDREN AND YOUNG PEOPLE IN DERBY CITY

The overall effectiveness of the council's contribution to improving outcomes for children and young people is good. The work of Children and Young People's Services is underpinned by strong leadership, clear direction and good partnership working. A good level of service has led to a number of improvements. For example, a range of partnerships are supporting improvements in the health of children and young people and robust and effective procedures are implemented to keep them safe; there is outstanding involvement of children and young people, including those who are vulnerable and hard-to-reach. Significant improvements were made in educational attainment at Key Stages 3 and 4 in 2006; this has dipped in 2007 prompting careful analysis and planned strategies to regain previous improvements. The economic wellbeing of young people is improving: the percentage of young people over 16 in employment, education and training is increasing to meet challenging targets.

Effective partnership working is providing increasing and varied pathways for students from 14 to 19. The council is aware of its strengths and areas to develop and has good capacity to improve.

The full annual performance assessment can be found at:

http://www.ofsted.gov.uk/reports/pdf/?inspectionNumber=281528&providerCategoryID=0&fileName=\\APA\\apa_2007_831.pdf

Annex B

CORPORATE ASSESSMENT ACHIEVEMENT - CHILDREN AND YOUNG PEOPLE

1. Overall, outcomes for children and young people in Derby City are good. Education outcomes are adequate but improving.
2. Service management is good. The authority and its partners have outstanding ambitions to improve the quality of life of all children and young people in Derby. The Children and Young People's Plan articulates a clear strategic vision and is based on detailed consultation with a wide range of stakeholders and a thorough analysis of need. There are clear priorities and strategies to achieve the stated aims. Effective collaborative work with a range of agencies, including the voluntary sector and business community, is enhancing the authority's capacity to deliver its plans. Effective use is made of joint commissioning, investment and pooled budgets to support the implementation of proposals. Performance management is good and makes effective use of feedback from stakeholders.
3. The combined work of all local services in securing the health of children and young people is good. The partnership has been awarded Beacon status for its work on the Healthy Schools initiative. There is good inter-agency collaboration. Services are targeted on the areas of greatest deprivation, with a clear emphasis on preventative care. The effectiveness of sexual health services for children and young people, including teenage pregnancy support is adequate. The rates of teenage pregnancy remain above the average nationally and for similar authorities. Performance in relation to the health of looked after children is very good. Good support is also provided for young people with learning difficulties and/or disabilities.
4. Children and young people appear safe and arrangements to ensure this are good. The new safeguarding procedures are well supported by a comprehensive multi-agency training programme. Recruitment practices across the partnership accord with requirements. Robust and effective review procedures ensure that all cases on the child protection register are reviewed in accordance with guidelines. The timeliness of reviews is good. High numbers of children are adopted, although there are delays in placing some children. The stability of placements is good. All looked after children are allocated to a key worker but not all workers are qualified. There are separate protocols for defined groups of children to identify those missing but no overarching, co-ordinated approach to data relating to missing children.
5. The impact of all local services in helping children and young people to enjoy their education and to achieve well is adequate. Attainment at Key Stages 1 and 2 is below the averages nationally and for similar authorities. In 2006, there were significant improvements at Key Stages 3 where results in English and mathematics improved at a faster rate than nationally and in similar

authorities. Key Stage 4 results also improved. The numbers of young people aged 16 to 18 who are in education, employment or training have improved and are now above the average for similar authorities. Attainment and progress by children and young people with learning difficulties and/or disabilities mirror the above patterns. Looked after children tend to perform better than their counterparts nationally and in similar authorities. Through good partnership work, the range of opportunities available to children and young people within and outside school has been considerably extended. Take-up of these activities is high. Good support is provided to vulnerable children to enable them to enjoy and achieve.

6. The impact of all local services in helping children and young people to contribute to society is outstanding. A large and representative range of children and young people is actively involved in helping to plan and review provision at both strategic and operational levels. There is a strong commitment to encouraging participation in voluntary activities, with over 3200 children and young people involved. There is excellent access to mainstream leisure activities for children and young people with learning difficulties and/or disabilities. The youth service is effective in reaching a larger than average proportion of young people. Bullying is recognised as a significant issue but is being tackled vigorously through a range of imaginative initiatives which young people value highly. School inspections show good personal and social development and behaviour, particularly at secondary level. The Youth Offending Service has succeeded in reducing the numbers of first time offenders and re-offenders and in ensuring that the proportion of looked after young people receiving a final warning or reprimand are lower than averages nationally and for similar authorities.

7. The impact of all local services in helping children and young people achieve economic well-being is good. Effective partnership between Connexions, schools and providers has resulted in the good outcomes in terms of the numbers of 16 to 18 year olds, including teenage mothers and care leavers, involved in education, employment and training. The number of young people aged 16 to 18 with learning difficulties and/or disabilities who are not in education, employment or training has reduced but remains higher than in similar authorities. Intervention projects with those at risk of disengagement with education and the expansion of 14 to 19 pathways, together with apprenticeship schemes with local industries, make a further significant contribution in this area.

8. The capacity of council services to improve is good. This results from strong strategic leadership, strong partnership work, good financial management that ensures value for money and a proven ability to learn from and implement the recommendations of internal and external review.

Annex C

SUMMARY OF JOINT AREA REVIEW AND ANNUAL PERFORMANCE ASSESSMENT ARRANGEMENTS

1. This joint area review was conducted using the arrangements required under Section 20 of the Children Act 2004. It was carried out by a multi-disciplinary team of inspectors from Ofsted, the Healthcare Commission and the Audit Commission. The review was undertaken according to the requirements of the *Framework for the Inspection of Children's Services*.
2. The review was linked to the contemporaneous corporate assessment of the local council by the Audit Commission and these findings plus aspects of the most recent Annual Performance Assessment are represented in the relevant part of the corporate assessment report.
3. This review describes the outcomes achieved by children and young people growing up in Derby City and evaluates the way local services, taken together, contribute to their well-being. Together with the Annual Performance Assessment of Children's Services, joint area reviews focus on the extent to which children and young people are healthy, safe, enjoy and achieve, make a positive contribution, and are well prepared to secure economic well-being. This review explores these issues by focussing on children with learning difficulties and/or disabilities, children who are looked after and children at risk or requiring safeguarding and a few additional investigations. It evaluates the collective contribution made by all relevant children's services to outcomes for these children and young people.
4. The review took place in two stages consisting of an analysis stage (where recorded evidence was scrutinised) and a two week fieldwork stage (where inspectors met children and young people and those who deliver services for them).