

Joint area review

Leeds Children's Services Authority Area

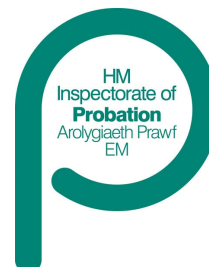
Review of services for children and young people

Audit Commission
Healthcare Commission
HM Crown Prosecution Service Inspectorate
HM Inspectorate of Constabulary
HM Inspectorate of Prisons
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Introduction

1. The most recent Annual Performance Assessment (APA) for Leeds City Council judged the council's children's services as good, and its capacity to improve as good.
2. This report assesses the contribution of local services in ensuring that children and young people:
 - at risk or requiring safeguarding are effectively cared for
 - who are looked after achieve the best possible outcomes
 - with learning difficulties and/or disabilities achieve the best possible outcomes.
3. The following investigations were also carried out:
 - the quality of services provided and the outcomes achieved by children and young people using Child and Adolescent Mental Health Services (CAMHS)¹
 - the impact of the partners' 14–19 strategy in improving outcomes for young people.

Context

4. Leeds is the second largest metropolitan authority in the country and includes some of the wealthiest and most deprived areas in England. It has an urban centre with a surrounding ring of small towns, villages and countryside. Despite rising prosperity in recent years, areas of significant and multiple disadvantage remain and there are sharp and significant differences between some areas as a result. Almost 11% of the population are from Black and minority ethnic groups, with particular concentrations in Beeston, Harehills and Chapeltown. The proportion of local people in different faith communities is broadly similar to the national average, with the exception of the relatively large Jewish and Sikh communities.
5. The population is almost 750,000, of which 180,000 are children and young people between the ages of 0 and 19. This represents 23.8% of the total population. Recent falling birth rates and other demographic change have resulted in the number of young people in the city declining. However, unlike many other cities, the population of Leeds is growing. Most recently, there has

¹ CAMHS delivers services via a national four-tier framework. Most children and young people experiencing mental health problems will be seen at Tier 1. This level of service is provided by practitioners who are not mental health specialists, such as GPs, health visitors, school nurses and teachers. At Tier 2, practitioners tend to be CAMHS specialists, such as primary care workers, psychologists and counsellors. At Tier 3, practitioners are specialised workers, such as community health workers, child psychologists, or psychiatry out-patient services for more severe and complex and persistent disorders. Tier 4 services are provided for young people with the most serious problems through, for example, highly specialised out-patient and in-patient units.

been a significant increase in the number of children and young people who are members of migrant or asylum-seeking families, or unaccompanied asylum-seeking children and young people. These demographic changes mean the proportion of children and young people from Black and minority ethnic communities is higher in the 0–19 population than in the population as a whole.

6. Leeds City Council and partners have recently established Children's Trust arrangements with six component parts. Leadership of this is provided by the Director of Children's Services Unit (DCSU), one of the component parts. Through this unit, the Director of Children's Services (DCS) leads on strategic commissioning and provides support to all partners. Council run children's services are Early Years, Youth Services and Children and Young People's Social Care. Education Leeds (EL) is a separate company wholly owned by the council. These services work with the DCSU and other services under the partnership banner of Children Leeds (CL).

7. Pre-16 education is provided by 28 children's centres; 220 primary schools, of which 141 have nurseries; 38 secondary schools (33 with sixth forms); one academy; six Specialist Inclusive Learning Centres (SILCs); five pupil referral units (PRUs); 242 private or voluntary nurseries and crèches; 917 registered childminders and 198 out-of-school providers.

8. Post-16 education and training is provided by six general further education colleges, of which four specialise around specific subject areas; two specialist colleges, including one designated a higher education institution; one sixth form college; 33 schools with sixth forms and 16 work-based learning providers.

9. There is one Entry to Employment (E2E) consortium, which is led by Future Pathways as the main contractor with delivery via a further 11 sub-contractors, supporting places for up to 1,000 learners per year. Adult and community learning, including family learning, is provided by Leeds City Council at over 230 locations across the city, providing courses for over 14,000 learners per year.

10. Five Primary Care Trusts (PCTs) were merged into one on 1 October 2006 to form Leeds Primary Care Trust. This PCT commissions and provides all primary health care and CAMHS. It is coterminous with the city council area. The main provider of children's acute hospital services is the Leeds Teaching Hospital Trust. NHS ambulance services throughout the city are provided by the Yorkshire Ambulance Services NHS Trust which was formed in July 2006. The Yorkshire and the Humber Strategic Health Authority was also formed in July 2006.

11. Children's social care services are provided by around 500 foster care households supporting 892 children and young people. The council provides 13 children's homes offering 104 places and commissions five other children's homes from external providers. There are four family resource centres. One secure children's centre provides 36 places (34 of which are contracted to the Youth Justice Board). There are 37 field social work teams. Additional specialist secondary support includes Pathway Planning (leaving care), the Children's

Asylum and Refugee Team (CART), the 0-16 CAMHS team, and Fostering and Adoption.

12. There is one young offender institution in the area at Wetherby. Services to children and young people who are at risk of offending or have offended are provided through the Leeds Youth Offending Service.

Main findings

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

- The contributions of local services to safeguard children and young people and to provide them with a safe environment are adequate. The Local Safeguarding Children Board (LCSB) is increasingly providing effective strategic leadership and there are good arrangements for sharing information and for professional development and training. The area has begun to tackle effectively the timeliness of some core assessments and initial child protection conferences. The quality of assessments of children's cases undertaken by professionals is often good, but occasionally electronic files are not updated quickly enough and this hinders the quality of recording overall.
- The contributions of local services to improve outcomes for looked after children are adequate. Multi-agency work to support families is good. A major strength is the good short and long term placement stability. This is enabling many looked after children to succeed at school, particularly at the primary phase. However, the slow pace of change in the past is still impacting on educational achievement for those aged 14 and over. Health outcomes are improving strongly but immunisation rates lag further behind. Opportunities for looked after children to influence and shape services are good, but although their involvement in reviews is improving rapidly, it is still below the national average. Services to support unaccompanied asylum - seeking children are improving well.
- The contributions of local services to improve outcomes for children and young people with learning difficulties and/or disabilities are good. An effective strategic plan for inclusion demonstrates a good level of child-centred planning and service provision. Early years settings and children's centres provide good access and support for children and their parents/carers. The progress children and young people make in schools is usually good according to Ofsted inspections. Absence and exclusion rates are reducing.
- The contribution of CAMHS provision to improve outcomes for children and young people is good. The supporting emotional health and well-being strategy is having a very positive impact in schools. Local access to services is improving and there have been significant

reductions in waiting times. The area is beginning to collate information on the range of services needed for children and young people from Black and minority ethnic groups. This is in response to a steep rise in numbers in these groups in the 0–19 population.

- The contribution of the partner's 14 to 19 strategy in improving outcomes for young people is adequate. Partnership working and collaboration have improved for young people aged 14–16 but are patchy for those aged 16–18. An online prospectus and common application process are assisting young people in gaining access to a wider range of opportunities. The Youth Service makes a significant contribution to the re-engagement of many young people who had previously been disengaged from education and training although the proportion of young people not in education, employment or training is high. Young people have a good involvement in shaping and determining local services through a range of forums.
- Service management and capacity to improve further are good. Leeds undertook 'a root and branch' review of its services for children in 2006 to help drive forward improvements. The innovative Children's Trust arrangements have stepped up the pace of change and are having a positive impact. Despite some outcomes being below national expectations, the overall trajectory of improvement is positive overall and improvement compares favourably against statistical neighbours in many areas of service provision. The rate of improvement has yet to impact fully on outcomes for some children in low performing secondary schools.

Grades

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

	Local services overall
Safeguarding	2
Looked after children	2
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
- ensure all initial child protection conferences happen on time and all core assessments are of good quality
- reduce the number of fixed-term exclusions for looked after children.

For action over the next six months

The local partnership should:

- ensure the electronic case record system (ESCR) provides a fixed and permanent audit trail of entries made
- improve the proportion of looked after children in education, employment and training at age 16 and 17
- reduce the proportion of pupils who leave school with no qualifications
- increase the rate of progress made by pupils in low-performing secondary schools
- establish the mental health needs of the increasing number of 0-19 Black and minority ethnic population.

For action in the longer term

The local partnership should:

- complete the review of 14–19 provision and address the issues involving small school sixth forms, excessive competition and duplication of provision and the low outcomes for some vulnerable groups
- ensure there is sufficient good quality education and training for young people who offend.

Equality and diversity

14. The council and its partners are taking an active community leadership role in promoting equality, diversity and community cohesion. There is wide commitment and activity from all local partners on the shared aim of 'narrowing the gap'; this is clearly identified as an underpinning priority within the city's Children and Young People's Plan (CYPP). Leeds has successfully developed approaches to equality that are informing and developing practice nationally. The council has achieved Level 3 of the Local Government Equalities Standard. City-wide partnerships, such as Together for Peace, that work with inter-faith groups and have good relationships with the police have enhanced community cohesion. The Stephen Lawrence Education Standard and the Inclusion Chartermark have helped schools and children's centres to promote equality and inclusion and engage learners, families and wider communities in promoting equality and inclusion. The local Gypsy, Roma and Traveller service is leading national work to empower this vulnerable group. EL has won an award from the Home Office for its work with newly arrived refugee and asylum-seeker pupils and families. The Breeze Youth Festival and Talking Leeds DVD, for example, enable children and young people with learning difficulties and/or disabilities and those from a wide range of communities and backgrounds to mix and take part in positive activities. The fundamental role of parents and families is recognised, for instance, through the work of the Shantona Women's Group, which works with Bangladeshi heritage women to offer support for them and their families through welfare advice, budgeting and health promotion.

Safeguarding

Inadequate Adequate Good Outstanding

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

Major strengths	Important weaknesses
<p>Good collaborative work to develop local preventive safeguarding procedures.</p> <p>Effective single point of contact for social care enquiries and referrals – Contact Leeds.</p> <p>A high proportion of initial assessments undertaken.</p>	<p>The quality of some assessments undertaken by social workers.</p> <p>Some core assessments and child protection conferences do not happen within the agreed timescales.</p> <p>The computer system does not ensure a secure audit trail of entries made.</p>

<p>Effective accident reduction programme.</p> <p>The quality of, and access to, safeguarding training.</p>	
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16. Effective action on accident prevention ensures children and their carers are aware of risks to their safety. For example, the road accident education scheme is targeted in areas of the city identified by police accident data. Schools in these areas have participated in an intensive programme of education, training and publicity. This has had a positive impact, reducing the total number of child casualties in road traffic accidents by 39%. The number of children aged 0–15 killed or seriously injured has reduced by 44% from the 1998 baseline average. This is better than the national average.

17. Action taken to ensure children and young people are provided with a safe environment is good. Most schools provide good support to help pupils develop their knowledge and skills to keep themselves safe. Good initiatives have been introduced to tackle bullying and racial harassment in schools. Most of the children contributing to a recent national survey reported feeling safe around their communities.

18. The Breeze scheme is a good initiative providing a wide range of safe activities for a large number of children and young people. It also signposts children and young people to positive activities offered by youth, leisure and cultural providers. Some play areas encourage children's physical and creative development well but children reported that some are poorly lit, vandalised, and contain hazardous discarded items, such as used syringes. Strategies to tackle anti-social behaviour generally are having a strong impact. The use of anti-social behaviour orders has been more than halved over the last three years as a result. Services have been successful in reducing the number of first-time entrants into the youth justice system from the 2004/05 baseline, with prevention schemes running across the city. Re-offending rates have also reduced by 10% for the period 2002-2005.

19. Agencies are increasingly coordinating support services effectively to improve the emotional and social well-being of children. For example, social care staff contribute to shaping action plans for extended school services. A wide range of universal services and specialist projects is available across the city. One example is the CHIVA (Children in Vulnerable Accommodation) project, which is working well to improve the safety and well-being of young people who are homeless, of Traveller heritage, refugees or asylum seekers, and those who have experienced domestic violence or have run away from home.

20. Services to minimise child abuse and neglect are adequate overall and improving. Local access to screening and intervention services for children under-five is good. This is primarily aimed at supporting parents through a network of children's centres which have close links with health visitors and GP

surgeries. Screening tools to assess the quality of early maternal bonding are used by Health Visitors, and effective arrangements are in place to ensure that all children under 11 have an identified health visitor and GP. The work of children's centres is being extended to include more targeted family support. This is beginning to have a positive impact, for example, in preventing family breakdown through early intervention. The Common Assessment Framework (CAF) has been successfully piloted in one area and agencies across the city are becoming increasingly involved. The programme is on target for implementation in March 2008.

21. Contact Leeds provides an effective first point of contact for referrals to social care. It gives immediate advice or signposts a high proportion of enquiries to universal services. This results in families gaining access to services they need and has reduced unnecessary referrals and repeat referrals to social care services. Compared to similar councils, a higher proportion of children referred to social care receive an initial assessment of their needs. This is a strength. A range of measures, such as quarterly refresher training led by social care managers, and honest feedback ensure quality and consistency and are leading to service improvements.

22. Inspectors scrutinised ten case files in detail and randomly selected a wide range of others. The standard of assessment and review practice in many was good and there were clear signs of improvement in quality covering the last few years. However, some case files are not consistently good, particularly those involving a range of agencies. The electronic recording system does not create a fixed and permanent record to ensure a secure and accurate evidence trail. Historically, a number of child protection performance indicators have been well below average compared with performance in similar councils. Over the last two years, performance has improved well in two important areas. Timescales for initial assessments are now better than the national average. Those for core assessments are improving rapidly from a very low baseline although they remain below the national average. Local management information available at the time of the inspection confirms the improving trend is continuing. Most professionals are positive about the way referrals to social care are acted upon, but some report that their views were not sufficiently taken into account.

23. Children who are the subject of child protection plans are safe and are allocated to suitably qualified and trained social workers. The area is aware that it needs to eradicate any delay between a formal enquiry starting and an initial child protection conference and subsequent child protection conference reviews to discuss risk and make decisions. The number of children on the child protection register has increased since 2006, and the rate is now in line with comparators. This suggests that thresholds for child protection have been too high in the past but are now at an appropriate level.

24. Good progress has been made in developing the LSCB. The appointment of an experienced LSCB manager in April 2007 has accelerated this. The independent chair has brought wide experience and strengthened independent oversight and direction. The LSCB is well managed. A comprehensive business

plan has been approved and sets out an appropriate work programme. This includes plans to appoint an independent author for serious case reviews, systems for the board to monitor safeguarding arrangements and the involvement of children and families in the safeguarding processes. Unfortunately, some organisations are not yet represented on the board, such as those working with asylum seekers and East Moor Secure Unit.

25. The LSCB is proactive in reviewing and updating inter-agency policies and procedures. For example, new guidance on thresholds is to be introduced shortly and compliance with private foster regulations has now been implemented. Good collaborative work is taking place with other councils to develop West Yorkshire procedures for safeguarding, with benefits arising from a unified approach across the region. There are some good arrangements for sharing information between agencies to promote safeguarding, such as access to police records. The partnership has identified the information-sharing protocol between the police and social care services in cases of domestic violence needs to be improved and this features in the LSCB business plan.

26. Safeguarding of children and young people with learning difficulties and/or disabilities is good. There are clear procedures to guide staff in relation to invasive care and managing challenging behaviour. However, the information booklet for parents and foster carers makes no reference to the length of time children are allowed to be missing and does not include contact telephone numbers. The guidance on permissible forms of control in children's residential care has not yet been updated in accordance with legislation.

27. Services are effective in establishing the identity and whereabouts of children and young people. Policies and procedures surrounding children missing from education were implemented in September 2006 and highlighted by the government office as best practice in the region. There has been a strong focus on developing effective preventative services, resulting in a reduction in the number of children registered as missing from education.

28. The quality and coverage of safeguarding training is good, with strong links to local universities. Action plans from serious case reviews have been effectively incorporated into training. There are good arrangements for monitoring the effectiveness of training, including high compliance in participant evaluations, and follow-up after three months to analyse the impact on practice. Requirements for schools and services to have designated teachers for safeguarding are met, and staff with this responsibility feel well supported and supervised.

29. Recruitment practices within the council are sound. Procedures are up to date, based on national guidelines and this includes arrangements for vetting staff working in the voluntary, community and faith sector. An audit of partner agency compliance with inter-agency recruitment and selection procedures, conducted by the LSCB manager, is due to be completed in January 2008. Procedures for Criminal Records Bureau (CRB) checks are being implemented

across all services, although it was noted that a few CRB renewals for staff in a particular service are outside the procedural timescale.

Looked after children and young people



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

Major strengths	Important weaknesses
<p>Good placement stability that is contributing well to improving outcomes.</p> <p>High quality support for carers and professionals.</p> <p>Successful early intervention programmes to prevent family breakdown.</p> <p>Good work with young unaccompanied asylum seekers.</p> <p>Good accommodation, support and re-engagement by care leavers at age 19.</p>	<p>Poor participation of looked after children in their reviews.</p> <p>The increasing number of fixed-term exclusions.</p> <p>The relatively high proportion not in education, employment or training at age 16 and 17.</p>

31. Meeting the demands of the large population of looked after children and young people and those with multiple and complex needs presents a real challenge for the city. The range of placement options is very well developed with most children and young people placed locally and numbers in residential care are low. These are important strengths. The proportion of looked after children fostered by relatives or friends and those in foster placements or placed for adoption is good. These placements are managed very well leading to good placement stability. Foster care and family centre support for young mothers and their babies is good. Looked after children and young people with multiple and complex needs have their needs met very well.

32. Action taken by CL to avoid the need for children and young people to become looked after is adequate. The rate of looked after children per 10,000 population aged under 18 in 2006/07 was significantly higher than statistical neighbours and the national average. CL recognised rates were too high and gave this issue prominence in the current CYPP. It has stabilised the numbers carefully, taking care to ensure that the level of risk to the children and young people falls within acceptable levels. This is an important turning point,

particularly as it coincides with an increase over the last two years of unaccompanied asylum seeking children.

33. Health outcomes for looked after children are adequate. Services are increasingly working effectively with each other and targeted work is leading to improved outcomes. Support for carers who are responsible for children with behavioural difficulties, and links with CAMHS, are good. Sexual health advice is being targeted effectively and is helping to reduce the proportion of looked after young women who experience an unwanted pregnancy. The rate of teenage pregnancies is now in line with rates experienced by all children in the city. The proportion of looked after children who had their teeth checked and received an annual health assessment improved in 2006 from 74% to 80%, although this remains slightly below the national average of 84%. The rate of immunisations is low at 58% when measured against the regional performance average of 72%. This outcome is a key target for improvement for the local partnership.

34. Looked after children and young people appear safe. Overall, performance to ensure looked after children live in safe environments and are protected from abuse and exploitation is adequate. Performance on the compliance of children's homes with national minimum standards has historically been weak, but there has been rapid and significant improvement to address this. For example, the percentage of residential staff achieving a Level 3 qualification is now good. Performance on the proportion of looked after children who were reviewed on time during 2006/07 was low at 34% when measured against the performance of statistical neighbours at 91%. Capacity for this work has been increased and local evidence shows there has been a rapid and significant improvement to 60%

35. Services to meet the needs of unaccompanied asylum seekers are improving rapidly. The recent growth in the number of unaccompanied asylum seekers requiring accommodation has put considerable strain on capacity, leading to some young people being placed in temporary placements. The CL partnership, recognising a step change was needed to address the rapidly changing pattern of need, acted swiftly to resolve this by commissioning residential accommodation and purchase of foster care placements. Schools and colleges are working very well with other agencies to meet the educational needs of unaccompanied asylum seekers and other new arrival children and young people. The EL Refugee and Asylum Seekers New Initiatives team achieved Beacon status in its 2005 star rating assessment by the Home Office for its work in this area. Looked after children and young people have access to good social and leisure opportunities.

36. A comprehensive strategy to improve educational outcomes for looked after children has been implemented. Targeted work, such as mentoring and the Stepping Stones programme, has raised young people's aspirations. Nearly 70% of looked after children sat at least one GCSE or equivalent exam last year. This is better than the national average and demonstrates a continuing upward trend since 2003/04. In 2006/07, the proportion of these young people

who achieved at least one GCSE at grade A*–G or a GNVQ was in line with similar authorities. However, the number achieving five or more GCSEs at grades A*–C was slightly below the achievement of statistical neighbours and the national average. These figures are significantly below the level achieved on average by children and young people who are not looked after in the city.

37. Attendance at school has improved and is now better overall than in similar authorities and the national average. Attendance in primary schools is good and there is effective transition support to the secondary phase. However, attendance in some secondary schools deteriorates, particularly at Key Stage 4. The rate of permanent and fixed term exclusions are high but showing signs of improvement as a result of a range of recently introduced initiatives.

38. Opportunities for looked after children to make a positive contribution are adequate. Aspects of corporate parenting have been strengthened leading to improvements. This is supported by the results of a recent survey completed by head teachers. The Corporate Carers' Plan sets out a strong commitment which guarantees that the views of looked after children are taken into account in what the council does at all levels. There are many examples of looked after children influencing the shape of services and this is supported by robust commissioning arrangements, for example in the children's rights service. However, the proportion of looked after children and young people who communicated their views at their statutory review during 2006/07 was significantly lower than statistical neighbours and this is an important weakness. Local data suggest that there has been recent rapid improvement.

39. Independent visiting services provide good services to support some children in residential and foster placements and a recent increase in staffing has improved capacity. The proportion of looked after children who are in the criminal justice system has reduced, but the number of offences committed by those in the system has increased and this featured as an area for improvement in the most recent APA. Recent data suggest services are beginning to make a positive difference.

40. Just over half of looked after children stayed in full-time education after leaving Year 11 and this has remained static for the last three years. Although the proportion of looked after children who are not in education, training or employment aged 16 and 17 has reduced since 2004 it is still high. However, the proportion of looked after young people who are re-engaging with education, employment and training improves by the time they reach age 19, with a very good level of take-up being realised. Programmes such as Stepping Stones have helped raise the aspirations and as a result, 40 care leavers are currently attending university, five of whom are studying at Masters Level. Ongoing support for care leavers is a strong feature. The proportion of care leavers living in suitable accommodation is very good. At 92.6%, this is higher than both the level in similar authorities and the national average. Care leavers spoken to during the course of the inspection confirmed that their needs are being met very well.

Children and young people with learning difficulties and/or disabilities

Inadequate Adequate Good Outstanding

41. 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>Good strategic plan for inclusion that is being well implemented.</p> <p>Good access for children with learning difficulties and/or disabilities to mainstream provision.</p> <p>Strong child-centred practice.</p> <p>Several examples of well-targeted work producing good outcomes for children with learning difficulties and/or disabilities.</p> <p>Low numbers of children with learning difficulties and/or disabilities permanently excluded.</p>	<p>No comprehensive register of children with a disability.</p> <p>The variable quality of some respite care.</p>

42. The partnership is making good progress in developing and implementing its inclusion strategy for vulnerable children and is increasingly effective in managing difficult behaviour and meeting needs. The Leeds Inclusive Learning Strategy (LILS) builds on work begun with earlier plans, including 'No Child Left Behind'. A significant number of schools have been adapted to enable disabled access and to provide care facilities which cater for complex health needs. As a result, since 2003, no family in the city has been denied a place for their child in a local mainstream school.

43. A good range of services is available to children with learning difficulties and/or disabilities in the early years of their care and education. The development of children's centres across the city ensures access and inclusion for children with physical disabilities. Early identification of children with sensory impairment and the consequent improvements to their language and communication skills is helping to improve the educational outcomes for these children. Speech and language therapy services are highly regarded by users, although demand currently exceeds supply. A draft service-level agreement for the provision of speech and language therapy services aims to address this and

make further improvements. Other targeted work, including the Catch Up literacy programme, Lexia Trial, and Talking Maths, demonstrate solid evidence of improving achievements for children as a result of planned support and intervention. The improvements include impact on learning, as well as social and emotional outcomes such as motivation and confidence. In spite of the significant challenges to learning for some of these young people, it is clear that teachers and other staff in mainstream schools, with the support and leadership of senior staff, are determined to facilitate inclusion and tailor programmes to meet individual needs and to secure some degree of accredited achievement where possible.

44. Schools are working well in partnership with all agencies to reduce the numbers of children with learning difficulties and/or disabilities who are excluded. Pupil planning teams and re-inclusion panels are having a positive impact. There have been no permanent exclusions of children with learning difficulties and/or disabilities from primary schools and SILCs throughout the last three years. This compares very well to the performance of comparator groups. Fixed-term exclusions are also reducing but are still higher than found in similar authorities and nationally in secondary schools. In 2007, authorised absence rates for children with learning difficulties and/or disabilities fell and were in line with the Leeds average. Ofsted school inspections show that provision for children with learning difficulties and/or disabilities is good in most schools and in the SILCs and PRUs. Pupils make good or outstanding progress in more than half of the schools inspected. Recent improvements, particularly in the SILCs, in the provision and use of data, including for those whose achievement is most appropriately measured by P scales², is now secure and is allowing children's progress to be tracked across a variety of measures.

45. The great majority of children with learning difficulties and/or disabilities are educated successfully within mainstream settings. Good adaptations made to many schools enable physical access, and good levels of additional resources provided by the authority ensures a wide range of educational and care needs are met. Young people attending mainstream schools report positively upon their experiences. Most parents express satisfaction with provision, and services in children's centres attract particularly high rates of satisfaction according to local surveys. The re-designation of special schools as SILCs, together with the implementation of area management boards and service clusters, are delivering increasingly effective access to good quality provision. However, planning for post-16 training provision for young people with learning difficulties and/or disabilities is not well developed and consequently there are currently insufficient opportunities for them to engage in work related learning.

46. Advisory and other support services, including clinical and educational psychology, make an effective contribution to meeting the needs of children and young people with learning difficulties and/or disabilities. Special educational needs coordinators have access to good quality professional

² *P scales: a national scheme used in schools to recognise and assess small steps in learning made by pupils with more severe and complex special educational needs who work below National Curriculum Level 1.*

development opportunities and to good support through their cluster arrangements and EL, although they report they would welcome the opportunity to access support through a city-wide network. Leadership teams in schools and centres are using external support well to challenge, reflect and enhance their practice and improve outcomes for children. An effective web-based management information system has enhanced the quality of self-assessment in relation to provision for young people with learning difficulties and/or disabilities.

47. In conjunction with its work to promote inclusion, CL works hard to improve the quality and timeliness of statutory processes. The overall proportion of children who are the subject of a statement of educational need is reducing in line with national trends and remains below the national average, which is good. Performance in complying with statutory timescales for completing SEN assessments within 18 weeks which has been poor since 2003 improved considerably in 2006-7 when the city's performance was above national levels.

48. The Early Years Funding for Inclusion (EYFFI) provides an effective framework for assessing and allocating additional support for children. This, together with the CAF and budget-holding lead professionals, demonstrates how the partnership is reducing bureaucracy, streamlining mechanisms for assessing children's needs and making clear decisions about the allocation of additional support and funding.

49. A small number of children with very complex needs are placed outside Leeds. Arrangements are reviewed but there is scope to further enhance independent scrutiny, particularly where contact with a family is infrequent. CL has engaged well with schools and other learning centres to implement strategic and operational changes in services. As a result, leadership teams in schools and centres feel empowered and make important contributions to the achievement of service ambitions. A spirit of purposeful collaboration is palpable. These improvements bring tangible benefits for children. For example, in one PRU the rate of reintegration has risen from one student to 16 during the year.

50. A dedicated service managed through the East SILC provides education to children in hospital or at home. Appropriate action is being taken to ensure that children and young people receive an integrated service, with good support from health professionals. Health to Education Notifications provide robust arrangements to alert mainstream services with early and prompt information regarding the diagnosis of health-related needs. There are good arrangements for multi-disciplinary CAMHS and provision is good overall, although access to Tier 3 services remains a challenge for both parents and professionals.

51. Young people with learning difficulties and/or disabilities have good opportunities to contribute to their school's decision-making, for example through reviews and through their school council. The disabled child integrated assessment is an outstanding multi-agency tool developed in Leeds. This helps

professionals actively enable and encourage children with learning difficulties and/or disabilities to participate in the identification and assessment of their needs and effectively helps them to express any fears or worries they might have. Opportunities for young people to contribute to service-level strategic decisions are more limited. There is a range of targeted services to support and engage children with learning difficulties and/or disabilities in leisure and recreational opportunities. These include regular weekend activities and holiday play schemes. A disability sports development officer effectively promotes inclusion in physical education and school sports.

52. The Parent Partnership Services is well resourced and parent support advisors provide an important source of information and support to parents. There is good evidence of their effectiveness in helping resolve disputes or disagreements. For example, the majority of parents who initiate an appeal to a tribunal decide to withdraw following advice, support and information.

53. A range of respite and care support services that include residential, family and home-based services are in place. A review of short-break services is planned as a result of feedback from parents and carers to ensure availability matches need and demand. The Community Nursing Team provides a good range of effective care and support to children at home and through specific units such as the Hannah House respite care service. There is good attention to individual care needs, and individual plans and care arrangements seen during the inspection reflect this. However, a few plans for children attending universal services did not fully reflect the extent of practice and provision involved, and some are not refreshed when new evidence about need or outcome emerges. Over 90 children have their care arrangements managed very well through direct payments. This provides a good degree of flexibility and control for children and their families. Plans are reviewed appropriately and good efforts are made to link separate planning and review arrangements.

54. The quality of some residential respite services is variable. CL is aware of this and has well-developed plans to re-provision two units under the Private Finance Initiative (PFI). However, the first will not be available until 2010. Whilst there is no current waiting list for respite care and other services, there is no comprehensive data regarding the overall population of children with a disability in the city. Some parents make the point that a register of disability would provide opportunities to secure improved communication, enhance information, and enable CL to engage in more comprehensive consultation with parents and young people about their specific needs.

55. There are some excellent examples of support for children making the transition from primary to secondary school and between children's centres, schools and SILCs. A dedicated transitions team takes referrals for young people aged 14–18 years old and team members attend reviews in Years 9 and 11. For the children requiring a transition plan, over 90% have one.

Other issues identified for further investigation

Child and Adolescent Mental Health Services (CAMHS)

56. The quality of services provided and the outcomes achieved by children and young people using Child and Adolescent Mental Health Services (CAMHS) is good.

Major strengths	Important weaknesses
<p>High priority given to mental health and emotional well-being by all agencies.</p> <p>Well-established and very effective multi-agency approach to CAMHS.</p> <p>Good CAMHS strategy.</p> <p>Development of locally based services resulting in improved access.</p>	<p>No plan in place to address the changing needs caused by demographic change.</p>

57. The mental health and emotional well-being of children and young people is given a high priority by all agencies. A recent needs assessment together with a multi-agency agreement on priorities and joint commissioning arrangements are strengths which have resulted in a coherent framework for services at Tiers 2, 3 and 4. Good progress has been made in securing 24-hour access to assessment for those at serious risk, including young people who self-harm. Good links with the youth offending service enable prompt referral for those with mental health needs. Support for most vulnerable groups, including children and young people with learning difficulties and/or disabilities, are good.

58. Children and young people can self-refer to a range of services in various settings, including the Healthy Young People in Schools service, and the Market Place, where screening and further referral to local Tier 2 teams and specialist, city-wide Tier 3 services takes place. Other services, such as the Cardigan Centre, also have an outreach function and work closely with Connexions personal advisers. Current activities to improve protocols to develop further access routes into Tiers 2 and 3 from Tier 1, and to increase the number and use of community-based locations, for example GP surgeries, are appropriate and well focused.

59. Multi-agency and multi-disciplinary working around the needs of individual children is good. Multi-agency referral management meetings successfully agree the level and nature of intervention for complex cases. The Therapeutic Social Work Team provides dedicated, specialist support in regular consultative sessions to staff and carers of children who are looked after and adoptive families. This has contributed well to good placement stability. Two clinical psychologists provide specialist support and advice for children and young people with learning difficulties and/or disabilities.

60. A review of assessment models has resulted in significant reductions in the waiting times for access to CAMHS at Tiers 2 and 3. Fast track arrangements are in place for children and young people who have an allocated social worker. A GP-led service, which links well to CAMHS and adult mental health services, provides treatment and support to young people experiencing early onset psychoses and also offers support to their families.

61. Individually developed and mutually agreed liaison and handover arrangements are in place to support the transition from CAMHS to adult services. However, difficulties remain for some young people who have enduring needs requiring continued support through to adult services, and also for newly referred young people over the age of 17 who are supported through adult services.

62. A far-sighted, multi-agency strategy supporting emotional health and well-being at Tier 1 has been developed, and consultation on the detail of its implementation within schools and similar settings is taking place. This is being implemented within the wider context of the Healthy Schools Agenda, for which Leeds has achieved Beacon Authority (2007/08) status, employing a holistic approach to emotional health. This includes improving the confidence and self-esteem of children and young people. Several successful initiatives are underway to support this and these are having a positive impact on personal and social health. They have been developed in consultation with children and young people and their parents. Examples include the school meals strategy and activities such as the Wake up and Shake Up programme which promotes sport and exercise through play.

63. There are impressive examples of work in educational settings with young people at risk of exclusion from school, with additional support from Tier 2 CAMHS where needed. This is directed at changing dysfunctional patterns of behaviour. Early indications are that these initiatives have significant potential for improving outcomes for children by increasing life chances and reducing the costs associated with anti-social behaviours, although baselines to measure and evaluate the impact of these services are not yet fully developed.

64. Inequalities of access and outcomes, particularly for children and young people of Black and minority ethnic heritage in healthcare and in mental health services, are well understood. However, whilst these needs are understood because of robust needs analysis, at present there is no plan to address the increasing demand caused by demographic change within the city.

The impact of the 14–19 strategy in improving outcomes for young people

65. **The impact of the partners' 14–19 strategy in improving outcomes for young people is adequate.**

Major strengths	Important weaknesses
<p>Good improvement in the proportion of pupils achieving five or more GCSEs at grade A*-C.</p> <p>Very effective re-engagement of young people in education and training through youth service activity.</p> <p>Good involvement of young people in the shaping of services.</p> <p>Extensive range of effective 14–16 collaborative provision.</p> <p>Well targeted projects, which have improved engagement and progression for some groups of young people.</p> <p>Good and some outstanding support for learners as identified in Ofsted inspections.</p>	<p>Above average proportion of young people leave school with no qualifications.</p> <p>Few schools have taken up the careers education and guidance monitoring arrangements provided by Connexions.</p> <p>High proportion of young people not in education, employment and training and whose situation is unknown.</p> <p>Low attainment at AS and A2 in half of schools with sixth forms and in the tertiary college.</p>

66. Since the Ofsted 16–19 area-wide inspection of Leeds in 2002, the partners have made good progress in addressing report recommendations, for example: establishing effective 14–19 consortia arrangements, widening choice at 16, introducing vocational provision in schools and improving access to and participation in higher education. However, progress has been slower for some vulnerable groups, in raising attainment at Key Stage 4 and increasing participation in education, employment and training.

67. The 14–19 strategy correctly identifies the issues and challenges facing the city. It has the full support of key partners and stakeholders who are signed up to its vision, aims and actions. Annual operating plans are well developed and effectively address local needs. Progress towards targets is regularly reviewed. The 14–19 strategy group, with its sub-groups and local delivery partnerships, effectively involve all stakeholders and providers. The Skills Board has begun to engage employers much more effectively and the approach towards the development and delivery of 14–19 diplomas has greatly improved. A network of 14–19 local delivery partnerships provides a good local focus, enabling curriculum developments and provision to address the needs of young people in their local communities. Providers receive good support from the 14–19 team at EL.

68. Plans to reconfigure further education in Leeds are underway. The Learning and Skills Council proposal to merge five colleges is out to public consultation. Previous reviews have concluded that people and communities do

not benefit as well as they should from post-16 education and training. Some parts of the city do not have sufficient further education provision, whilst others have duplication and competition. The location of academies is currently being decided and will be followed by a full review of 14–19 provision, which is intended to address the issues of small school sixth forms, excessive competition and duplication of provision.

69. An extensive range of 14–16 collaborative provision has been developed through good partnership working between schools, colleges and other providers. Vocational pathways cover all subject sector areas, provide for a wide range of abilities, and progression rates are high. Achievement on young apprenticeships is good. Most schools have developed a range of in-house vocational provision and much of this is good. However, some of the provision for post-16 learners is duplicated in colleges, where very good resources already exist. Schools within delivery partnerships are collaborating well to improve the range of subjects at AS and A-level but the involvement of colleges is limited. Well-targeted projects effectively promote re-engagement, and raise attainment and progression for some vulnerable groups. The learning on most alternative programmes is highly personalised, flexible and responsive.

70. There were considerable improvements in attainment at Key Stage 3 in 2006. The average points score in all three core subjects increased. GCSE results continue to improve. The proportion of students achieving five or more GCSEs at grades A* to C, is increasing faster than nationally and is now in line with achievements in similar authorities. However, despite this a higher proportion of young people leave school without any GCSE passes than is found in similar areas. Attainment at AS and A-level is low in around half of schools with sixth forms and in the tertiary college.

71. The proportion of students with a statement of special educational need achieving 5+ A*-C in 2007 exceeded that found nationally. Outcomes for pupils from Black heritage backgrounds have improved over the last three years as a result of effective strategies but progress has been from a low level. Consequently, gaps in attainment remain for some specific Black and Minority Ethnic groups especially for pupils at Key Stages 3 and 4. Strategies to support the diverse range of language needs of the increased volume of young asylum seekers and economic migrants arriving in schools have been stretched over the last six months, due to the sudden increase in demand and the range of different languages these young people speak. Training provision for young people who offend is insufficient to meet their needs and participation is low.

72. The proportion of young people achieving Level 2 by age 19 is below the national average and statistical neighbours. The proportion achieving Level 3 by age 19 is below the national average but in line with statistical neighbours. Success rates for 16–18 year-old learners in colleges are satisfactory and improving. Progression rates from the E2E programme are high. Good improvements have been made to overall success rates on apprenticeships and advanced apprenticeships, which are now satisfactory. Participation in work-based learning is low and declining. The Aimhigher programme is particularly

effective in raising aspirations and attainment for a wide range of 14–19 learners. Progression to higher education is good and increasing.

73. The school improvement service provides appropriate challenge and support. Attainment is low in a significant number of schools although only one of the 39 secondary schools is below the 2007 floor target. A rigorous approach to improving attendance has recently brought about good improvement and a focussed partnership approach has achieved a good reduction in the number of permanent exclusions. Over the last year the high levels of fixed term exclusions have started to reduce.

74. Ofsted inspections of colleges, SILCs and PRUs have judged teaching to be good overall. Learners receive good and in some cases outstanding support from teachers, tutors and support workers in schools, colleges, SILCs and PRUs.

75. Young people have a good involvement in shaping and determining local services through a range of local forums. For example, as a result of consultation with young people the city wide transport policy has been revised to provide subsidised bus fares which enable young people to move around freely between education and training providers. This is a sound basis for the delivery of 14 – 19 diplomas.

76. Good priority has been given to the development of the integrated youth service. Funding has been increased and is being used very effectively. This has resulted in a significant increase in the numbers of young people being reached through a range of very effective integrated youth service projects. For example, a youth service worker is based in every secondary school. This has contributed significantly to the re-engagement of many young people who had previously disengaged from education, employment and training which is improving attendance and raising attainment.

77. Good progress has been made in producing an online prospectus and a common application process is currently being piloted. The new standards for careers education and guidance have been implemented in schools but too few have taken up the monitoring arrangements provided by Connexions. The Government's September Guarantee, that all young people should be made an 'offer of learning' after they complete Year 11, has been achieved and take-up is good.

78. The proportion of young people aged 16–18 in education, employment and training improved by 5% in 2007, bringing it in line with statistical neighbours. The proportion of young people not in education, employment and training whilst reducing is high for 19 year olds, young people with learning difficulties and/or disabilities, and for some Black and minority ethnic groups. Partners' ability to address this weakness effectively has been constrained by limited data on some vulnerable young people whose destination is not known. Robust action currently being taken to address this weakness by the DSCU provides early indications that corrected data will show reductions in both the proportion of young people who are not in education, employment and training

and the proportion of young people whose education, employment or training situation is not known.

Service management



Capacity to improve



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

Major strengths	Important weaknesses
<p>Good strategic management and Children's Trust arrangements.</p> <p>Good senior leadership and a strong sense of direction and vision.</p> <p>Determined and enthusiastic workforce.</p> <p>Good financial management and value for money.</p>	<p>Despite improvements in recent years, some outcomes, particularly for young people aged 14 and over, are below those of similar areas.</p> <p>Not all initial child protection conferences happen on time and not all core assessments are of good quality</p>

80. APAs in recent years judged service management and capacity to improve as good. The partnership's innovative approach to strategic management and Children's Trust arrangements are developing well, beginning to add value, and are well aligned to the key ambitions of the council and its partners. The DCSU, senior managers, elected members and partners are providing a strong sense of direction coupled with a realistic view of the significant challenges facing the city.

81. The level of ambition is good. The Children's Trust arrangements are innovative. The six elements of CL have rapidly agreed their respective roles and are making a difference under the strategic leadership of the DCSU. Major stakeholders, including the voluntary sector and Children's Trust staff, are actively involved in developing the children's services agenda. The ambitions of the CYPP link neatly into the long-standing Vision for Leeds, with its underpinning corporate and community strategies. These, and the comprehensive needs analysis, recognise diversity and equalities issues, and

much of the work of partners is directed at the overarching aim of 'narrowing the gap'.

82. Many aspects of Children Leeds' ambition for children and young people are building on the well-established No Child Left Behind programme of change. This is a challenging and ambitious long-term approach to tackle a range of concerns and is showing significant impact, especially in improving the inclusion and attainment of primary school pupils. Sustainability has been improved by significant investments in relevant service areas, such as parental support staff, social workers and CAMHS psychologists. The current focus is on translating priorities into activities at a local level through five local CYPPs that are targeting preventative inter-agency support down to individual need. Significant investments in 'locality enablers' to coordinate the activity within each of the five plans, as well as increased resources for the successful area management boards and fund-holding lead professionals, are all able to demonstrate impact in improving the well-being of children and young people locally.

83. The commitment to include all young people, including those with learning difficulties and/or disabilities and looked after children, is strong and has clearly informed ambitions. A recent powerful example was the way in which young people played a significant role in shaping aspects of the city's public transport plans. Following this success, the children and young people's scrutiny committee formed a shadow scrutiny committee of young people which is developing its own work programme on issues decided by the young people themselves, giving them a direct route into policy making at council level.

84. Prioritisation is good. Improving the lives of children and young people is seen as the central pillar to the realisation of the council's ambitions to be a leading city on the European stage. The original CYPP was a good starting point for the development of children's services. The thorough and honest review of that plan has brought about a sharpening of priorities, which has enabled partners to focus more clearly on identifying their respective roles. This clarity has enabled 'hosting' agreements, whereby some priorities are owned and driven by individual partners within the Children's Trust arrangements. Although ultimate accountability rests with the DCSU, hosting has ensured full buy-in from partners, with good alignment of priorities within the CYPP. This is most clearly evident in the good outcomes in preventative work, including reduced road accidents and reductions in anti-social behaviour. There has been less impact, however, on health-related issues such as teenage pregnancies and childhood obesity, where until recently the health capacity has been weaker. In a similar vein, until recently the partnership has lacked a forceful agent to drive through the 14–19 strategy and this has slowed down the rate of improvement for some outcomes for young people in this age group.

85. Children's views have been used to shape priorities, for example in raising the profile of bullying as an issue to be tackled and developing the city wide transport policy. The CYPP contains an appropriate balance between local and national priorities; and the focus on developing local solutions through the five separate plans is a sensible approach given the size of the city. The recently

introduced corporate approach to service planning is improving consistency and there are clear links between projected outcomes, timescales and accountabilities. While there are secure links between service and financial priorities, these are not always explicit in planning documents. However, the integrated strategic commissioning board (ISCB) is taking an ever-increasing role in directing significant pooled resources into areas of high priority as agreed by the Children's Trust.

86. Capacity is now good. The council made a bold but considered decision in creating innovative management arrangements for children's services in 2006. These are beginning to deliver improved outcomes in some important areas, for example social care and in the headline GCSE rate. Direct operational responsibility has been given to chief officers, enabling the director, with a small team, to act strategically in a commissioning role. The arrangement is bedding in well, with roles and accountabilities increasingly well understood by stakeholders. The leadership offered by this arrangement is good, operating on several levels, including the encouraging signs through hosting that partners are being enabled to lead on key areas of work. The council is using this as a model to transform the strategic management capacity across all its service areas. Effective political leadership is also offered by two experienced senior portfolio holders and a support team of four backbenchers. The children and young people scrutiny function is also adding value, with wide representation, a clear focus on key issues and performance, and a good tracking system to ensure that recommendations are followed through.

87. The council has demonstrated its ability to make and stick to difficult decisions, particularly evident through its extensive school rationalisation programme, and in its decision to continue with the EL partnership. Project management is strong for major initiatives, with recent capital projects completed on time and within budget. The introduction of the CAF demonstrates effective use of training, financial planning and consultation, and effective working relationships are now in place.

88. Financial management and value for money are good, which accords with the rating of the external auditor. Expenditure is below that of other core cities and outcomes are generally better. Mechanisms to ensure value for money are adequate and in line with those found in statistical neighbours; there is good work in ensuring schools stick to agreed levels of financial balances. Resources are shifted to meet emerging priorities, for example considerable effort is being directed at improving the capacity to provide good outcomes for increasing numbers of migrant workers and asylum seekers. Commissioning is developing rapidly and has already had a significant impact on improvements in both CAMHS and speech and language therapy services. As part of budget planning for the financial year 2008/09, the ISCB requested partners to allocate funding to a 'new initiatives fund'. As a result of the partners' response to this request, the ISCB will have an initiatives fund of around £1.2 million for the 2008/09 financial year including a significant contribution on a match funding basis from the Leeds schools forum.

89. CL has many skilled people with the determination and enthusiasm to deliver its priorities. Morale is good. There are only minor areas of staff shortage. A sound workforce development strategy is in place to tackle those issues of recruitment and training needed to implement the ambitious agenda of creating local integrated teams. Capacity building is helping to sustain the voluntary sector as a major provider, although a strategic approach in the health service is underdeveloped as the newly established PCT tries to clarify exactly what the voluntary sector is currently providing. Shortcomings in capacity, such as staff to complete looked after reviews, have also been recognised and are being addressed using additional resources.

90. The approach to performance management across the Children's Trust arrangements is good. It has built on earlier strengths within the separate elements of the Trust and arrangements are well underway to having a unified system. For example, protocols have been arranged and a joint database is in construction between EL and the PCT.

91. There are good systems in place for regular reporting and challenge on performance at all levels in most areas of work. Service improvements, led by good performance management, include significant reductions in waiting times for access to CAMHS, permanent exclusions and a stabilising of the numbers of children in the looked after population. Although there has been improvement in attainment at most key stages, improved outcomes have yet to feed through forcefully to the 14 to 19 age group. In a similar way, despite good recent improvement, assessments undertaken by some social workers remain of variable quality.

92. There is good leadership of the scrutiny function within children's services. Portfolio holders and officers are subject to regular challenge on service performance. Young people are active participants in the scrutiny process for example through enquiries into sexual health and adoption and secondary school achievement. The use of staff appraisals for professional development is consistently good. The council has accepted that, corporately, the use of appraisals to drive individual performance is more variable, and is taking appropriate steps to rectify this.

93. The impact of children's voices on shaping service delivery is a strong feature overall. It is noteworthy that the EL Refugee and Asylum Seekers New Initiatives team achieved Beacon status in its 2005 star rating assessment by the Home Office for its work to meet the needs of unaccompanied asylum seekers. This work is developing further through the overview and scrutiny committee, which has embarked on a wide-ranging project to improve the situation further.

94. Capacity for further improvement is good. CL has demonstrated its ability to remedy weaknesses and respond to internal and external evaluation. Operating as a Children's Trust, it has built on strengths within the partnership and is effectively tackling identified shortcomings. Improvements are clearly recognised by partners. The director, senior managers and other partners are

providing a strong sense of direction coupled with a realistic view of the significant challenges they face. Service planning is improving, with good project management arrangements for major initiatives. There is evidence of resources shifting to meet new priorities. The workforce strategy has the potential to develop the skills needed by integrated teams. There is a clear focus on providing value for money.

Annex A

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

Summary

Leeds City Council delivers a good level of service overall for children and young people. The capacity for further improvement is good and children's services are well led and managed. Good progress has been made in bringing together professionals from across the partnership to deliver high quality services that are built around the needs of children and young people. There has been significant change within the council's social care arrangements and some of these have yet to have a full impact on outcomes for children and young people. However, the council is making a good contribution in all other outcome areas in a city facing social and economic challenges.

The full APA can be found at:

http://www.ofsted.gov.uk/reports/pdf/?inspectionNumber=3097&providerCategoryID=0&fileName=\\APA\\apa_2007_383.pdf

Annex B

CORPORATE ASSESSMENT ACHIEVEMENT – CHILDREN AND YOUNG PEOPLE

1. Outcomes for children and young people in Leeds are good because of the impact of recent and rapid improvements. Standards at Key Stages 1 and 2 are in line both with similar authorities and national averages. There were considerable improvements in attainment at Key Stage 3 in 2006, and the average points score in all three core subjects increased. GCSE results continue to improve. The proportion of students achieving five or more GCSEs at grades A* to C is increasing faster than nationally and is now in line with that found in similar authorities. However, despite this, many young people are still leaving school without any GCSE passes. Attainment at AS and A-level is low in around half of schools with sixth forms and in the tertiary college.
2. Service management in Leeds is good. Recently introduced innovative Children's Trust arrangements have stepped up the pace of change and improvement. The team of senior leaders and managers is determined and energetic, with a clear shared vision and long-term strategy. Services are characterised by high levels of staff commitment. A significant number of new strategies have been introduced. These are being implemented effectively and good early progress is being made. Key joint appointments, between health and children's services, have strengthened joint working and 'locality enablers' are supporting multi-disciplinary arrangements on a more local level. Good performance management systems are being developed that align with those of partner agencies. Effective joint commissioning strategies are ensuring value for money.
3. The combined work of all local services in securing the health of children and young people is good overall. CAMHS offer good support to vulnerable groups, including looked after children and those with learning difficulties and/or disabilities. Good links between CAMHS and the youth offending service facilitate prompt referral and treatment of young offenders with mental health needs. An effective Healthy Schools programme has achieved Beacon status. Most schools provide a good range of sports activities. National targets to reduce the number of mothers smoking at the time of delivery have been met. Rates of teenage pregnancy are high.
4. Children and young people appear safe and arrangements to ensure this are adequate and improving. The LSCB is developing well and partnership working is increasing. All children on the child protection register are allocated qualified social workers. The quality of reviews varies and some core assessments are not produced within the required timeframes. The number of looked after children and young people has remained steady following a significant earlier increase in unaccompanied asylum seeking children. Placement stability for looked after children is good. The number of children in residential care is low and compliance with national standards in children's homes has improved recently.

5. The impact of all local services in helping children and young people to enjoy their education and to achieve well is good overall. School improvement work is effective and focused. Early years provision continues to be a strength. There has been a considerable reduction in the number of permanent exclusions from school. A wide range of innovative strategies have been introduced to improve attendance and there is evidence of improvement, although the number of unauthorised absences in secondary schools remains too high. There is a very good range of recreational activities and voluntary learning provision for young people to enjoy.

6. The impact of all local services in helping children and young people to contribute to society is good. Leeds has been at the forefront of a number of initiatives to support the personal and social development of young people. A well-established and effective mentoring scheme is in place to support children and young people from disadvantaged areas and from minority ethnic backgrounds. The Investors in Pupils Award and the Stephen Lawrence Educational Standard both originated in Leeds and are nationally recognised for developing engagement and supporting cultural change. Very good efforts are made to involve young people who are traditionally hard to reach. The number of anti-social behaviour orders has been more than halved over the last three years. The number of first-time offenders is falling, but there is still a high proportion of looked after children and young people involved in the youth justice system.

7. The impact of all local services in helping children and young people achieve economic well-being is adequate. There are clear signs of improvement in some areas of work. There is very good support for families. Childcare provision is expanding at a faster rate than in comparable authorities. Partnership working and collaboration is very good at 14–16 but less well developed at 16–18. Good progress has been made with the online prospectus and common applications. The integrated youth service is re-engaging many young people in education, employment and training, improving attendance and raising attainment. The proportion of young people aged 16–18 in education, employment and training improved by 5% in 2007, a figure greater than the national average. The proportion of young people not in education, employment and training whilst reducing is high for 19 year olds, young people with learning difficulties and/or disabilities, and for some Black and minority ethnic groups. Good progress has been made on providing decent housing for children and young people, and Leeds has an excellent record for providing suitable accommodation for care leavers.

8. The capacity of council services to improve is good. The council made a bold but considered decision in creating innovative management arrangements for children's services. These arrangements are strong and are beginning to have a positive impact so that, although many outcomes for children and young people are currently at or below national expectations, the overall trajectory is very positive. Recent improvement rates have been rapid and are better than those of statistical neighbours in many areas of service provision.

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 APA, 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 Leeds and evaluates the way local services, taken together, contribute to their well-being. Together with the APA of children's services, joint area reviews focus on the extent to which children and young people are healthy, safe, enjoy and achieve, make a positive contribution, and are well prepared to secure economic well-being. This review explores these issues by focusing on children with learning difficulties and/or disabilities, children who are looked after, 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, parents and carers and those who deliver services for them).