



**Children and Young People Policy and Performance Board**

**Monday, 8 January 2007 at 6.30 p.m.  
Civic Suite, Town Hall, Runcorn**

A handwritten signature in black ink, appearing to read 'David W R', is centered on the page.

**Chief Executive**

**BOARD MEMBERSHIP**

<b>Councillor Mark Dennett (Chairman)</b>	<b>Labour</b>
<b>Councillor Margaret Horabin (Vice-Chairman)</b>	<b>Labour</b>
<b>Councillor Frank Fraser</b>	<b>Labour</b>
<b>Councillor Robert Gilligan</b>	<b>Labour</b>
<b>Councillor Trevor Higginson</b>	<b>Liberal Democrat</b>
<b>Councillor David Lewis</b>	<b>Conservative</b>
<b>Councillor Kelly Marlow</b>	<b>Liberal Democrat</b>
<b>Councillor Stan Parker</b>	<b>Labour</b>
<b>Councillor Ged Philbin</b>	<b>Labour</b>
<b>Councillor Margaret Ratcliffe</b>	<b>Liberal Democrat</b>
<b>Councillor John Stockton</b>	<b>Labour</b>
<b>Andy Brothers</b>	
<b>Colin Chorley</b>	

*Please contact Lynn Derbyshire on 0151 471 7389 or e-mail [lynn.derbyshire@halton.gov.uk](mailto:lynn.derbyshire@halton.gov.uk) for further information.*

*The next meeting of the Board is on Monday, 26 February 2007*

**ITEMS TO BE DEALT WITH  
IN THE PRESENCE OF THE PRESS AND PUBLIC**

**Part I**

<b>Item No.</b>		<b>Page No.</b>
<b>1. MINUTES</b>		
<b>2. DECLARATIONS OF INTEREST (INCLUDING PARTY WHIP DECLARATIONS)</b>		
	Members are reminded of their responsibility to declare any personal or personal and prejudicial interest which they have in any item of business on the agenda, no later than when that item is reached and (subject to certain exceptions in the Code of Conduct for Members) to leave the meeting prior to discussion and voting on the item.	
<b>3. PUBLIC QUESTION TIME</b>		<b>1 - 2</b>
<b>4. EXECUTIVE BOARD MINUTES</b>		<b>3 - 8</b>
<b>5. SCRUTINY TOPIC UPDATES</b>		
<b>(A) OUT OF BOROUGH SCRUTINY TOPIC UPDATE</b>		<b>9 - 10</b>
<b>(B) WORK PROGRAMME 2007/2008</b>		<b>11 - 12</b>
<b>6. YOUTH BANK PRESENTATION</b>		<b>13 - 14</b>
<b>7. REPORTS FOR ACTION</b>		
<b>(A) FINDINGS OF THE INDEPENDENT REVIEW OF THE YOUTH SERVICE UNDERTAKEN BY THE NATIONAL YOUTH AGENCY IN SEPTEMBER 2006</b>		<b>15 - 18</b>
<b>(B) COMMENTS, COMPLAINTS AND COMPLIMENTS RELATING MAINLY TO CHILD CARE SERVICES</b>		<b>19 - 27</b>
<b>(C) CLIMBIE VISITS</b>		<b>28 - 34</b>
<b>8. PROGRESS REPORTS AND POLICY UPDATES</b>		
<b>(A) ADOPTION INSPECTION</b>		<b>35 - 45</b>
<b>(B) FOSTERING AND PRIVATE FOSTERING INSPECTION</b>		<b>46 - 49</b>

**9. PERFORMANCE MONITORING**

**(A) PERFORMANCE MANAGEMENT REPORTS FOR  
2006/07**

**50 - 51**

*In accordance with the Health and Safety at Work Act the Council is required to notify those attending meetings of the fire evacuation procedures. A copy has previously been circulated to Members and instructions are located in all rooms within the Civic block.*

**REPORT TO:** Children and Young People Policy and Performance Board

**DATE:** 8<sup>th</sup> January 2007

**REPORTING OFFICER:** Strategic Director, Corporate and Policy

**SUBJECT:** Public Question Time

**WARD(s):** Borough-wide

### **1.0 PURPOSE OF REPORT**

- 1.1 To consider any questions submitted by the Public in accordance with Standing Order 33(5).
- 1.2 Details of any questions received will be circulated at the meeting.

### **2.0 RECOMMENDED: That any questions received be dealt with.**

### **3.0 SUPPORTING INFORMATION**

- 3.1 Standing Order 34(11) states that Public Questions shall be dealt with as follows:-
- (i) A total of 30 minutes will be allocated for members of the public who are residents of the Borough, to ask questions at meetings of the Policy and Performance Boards.
  - (ii) Members of the public can ask questions on any matter relating to the agenda.
  - (iii) Members of the public can ask questions. Written notice of questions must be submitted by 4.00 pm on the day prior to the meeting. At any meeting no person/organisation may submit more than one question.
  - (iv) One supplementary question (relating to the original question) may be asked by the questioner, which may or may not be answered at the meeting.
  - (v) The Chair or proper officer may reject a question if it:-
    - Is not about a matter for which the local authority has a responsibility or which affects the Borough;
    - Is defamatory, frivolous, offensive, abusive or racist;
    - Is substantially the same as a question which has been put at a meeting of the Council in the past six months; or
    - Requires the disclosure of confidential or exempt information.

- (vi) In the interests of natural justice, public questions cannot relate to a planning or licensing application or to any matter, which is not dealt with in the public part of a meeting.
- (vii) The Chairperson will ask for people to indicate that they wish to ask a question.
- (viii) **PLEASE NOTE** that the maximum amount of time each questioner will be allowed is 3 minutes.
- (ix) If you do not receive a response at the meeting, a Council Officer will ask for your name and address and make sure that you receive a written response.

Please bear in mind that public question time lasts for a maximum of 30 minutes. To help in making the most of this opportunity to speak:-

- Please keep questions as concise as possible.
- Please do not repeat or make statements on earlier questions as this reduces the time available for other issues to be raised.
- Please note that public question time is not intended for debate – issues raised will be responded to either at the meeting or in writing at a later date.

#### **4.0 POLICY IMPLICATIONS**

None.

#### **5.0 OTHER IMPLICATIONS**

None.

#### **6.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972**

There are no background papers under the meaning of the Act.

**REPORT TO:** Children and Young People Policy and Performance Board

**DATE:** 8<sup>th</sup> January 2007

**REPORTING OFFICER:** Chief Executive

**SUBJECT:** Executive Board Minutes

**WARD(s):** Boroughwide

**1.0 PURPOSE OF REPORT**

- 1.1 The Minutes relating to the Children and Young People Policy and Performance Board which have been considered by the Executive Board and Executive Board Sub since the last meeting are attached at Appendix 1 for information.
- 1.2 The Minutes are submitted to inform the Policy and Performance Board of decisions taken in their area.

**2.0 RECOMMENDATION: That the Minutes be noted.**

**3.0 POLICY IMPLICATIONS**

None.

**5.0 OTHER IMPLICATIONS**

None.

**6.0 RISK ANALYSIS**

None.

**7.0 EQUALITY AND DIVERSITY ISSUES**

None.

**8.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972**

There are no background papers under the meaning of the Act.

**Extract of Executive Board Minutes Relevant to the Children and Young People's Policy and Performance Board**

**EXECUTIVE BOARD MEETING HELD ON 2<sup>ND</sup> NOVEMBER 2006**

**CHILDREN AND YOUNG PEOPLE'S PORTFOLIO**

**EXB47 CHILDREN'S CENTRES PHASE 2 DEVELOPMENTS (KEY DECISION)**

The Board considered a report of the Strategic Director – Children and Young People providing an update on the second phase of Children's Centre Developments and proposing sites for the development of three new Children's Centres to be completed by March 2008.

It was noted that Local Authorities must plan capital investments and phase capital programmes so that all children living in the 30% most disadvantaged areas, as measured by Super Output Areas, had access to the core children's centre offer of services by March 2008. In line with Government guidance, the centres would ensure that families with young children would have easy access to these services.

Information was provided in respect of a needs analysis that had been carried out together with an outline of the proposed sites in the Castlefields, Hough Green and Mersey Wards. In addition, Ms G Derby, Divisional Manager – Early Years and Lifelong Learning, attended the meeting to give a presentation outlining progress so far.

The Board considered the following issues:

- the proposed virtual children's centre opportunity which would enable disadvantaged and vulnerable communities to access interactive service provision via cutting edge technology methods;
- the need for local performance indicators to demonstrate the improvements required and being made, which may not be reflected in national indicators;
- services were being developed to deliver at a range of venues based on a needs analysis identifying where people would go, and outreach was based around the delivery of services to people in their homes; and
- groups that found accessing services difficult would be identified and targeted.

Alternative Options Considered and Rejected

None.

Implementation Date

Centres to be completed by March 2008.

RESOLVED: That

- (1) the proposed sites for the new Children's Centres in the Castlefields, Hough Green and Mersey Wards, as outlined in the report, be approved; and
- (2) the proposal for inclusion of the virtual children's centre opportunity as part of the Phase 2 developments be endorsed.

**EXECUTIVE BOARD MEETING HELD ON 16<sup>TH</sup> NOVEMBER 2006**

**EXB55 IMPLEMENTATION OF CHILDREN IN NEED (CIN) STRATEGY, POLICY AND PROCEDURES**

The Board considered a report of the Strategic Director – Children and Young People seeking agreement to the implementation of the multi-agency Children in Need (CIN) Strategy, Policy and Procedures across the Borough. It was noted that the implementation of the Strategy, policy and procedures would be overseen by the development of a Children in Need (CIN) Mini-Trust and Halton's Local Safeguarding Children's Board.

The aim of the Strategy was that, through the timely provision of co-ordinated multi-agency support services to children and families, the need of children and families would be met at an early stage, reducing the risk to children and the need for them to be removed from home. This would allow services to refocus towards an increased range of high quality support services provided to families at their point of need, which promoted the welfare of children and the achievement of high level outcomes for children.

The Board noted that the associated policies and procedures were based on Halton Children's Planning Model, which focused on the early identification of need and provision of services. The model was outlined within the report for Members' information.

RESOLVED: That

- (1) the Children in Need Strategy, Policy and Procedures be implemented by all agencies, including those that relate to the CIN Trust;
- (2) the Children in Need Strategy, Policy and Procedures form the basis of



- the service delivery model for the Children in Need Mini-Trust;
- (3) the Children in Need Mini-Trust Action Plan focus on commissioning, aligned budgets, co-location of staff and multi-agency assessments, and be at the forefront of the development of Children and Young People Area Networks;
  - (4) the Children in Need Strategy, Policy and Procedures be overseen by the local Safeguarding Children's Board;
  - (5) the Children in Need Strategy, Policy and Procedures establish a continuum of Children in Need, thinking preventative, promotional and safeguarding Children in Need services together; and
  - (6) the Children in Need Strategy, Policy and Procedures be formally launched to all agencies.

#### EXB56 ANNUAL PERFORMANCE ASSESSMENT (CHILDREN & YOUNG PEOPLE'S DIRECTORATE)

The Board considered a report of the Strategic Director – Children and Young People outlining the outcome of the Children and Young People Directorate's Annual Performance Assessment (APA) 2005/06 undertaken by Ofsted, the Commission for Social Care Inspection (CSCI), Government Office North West (GONW) and the Department for Education and Skills (DfES).

It was noted that the APA of services for children focused mainly on the operational responsibilities of the Children and Young People's Directorate and how it achieved the five outcomes for children set out in Every Child Matters. Partnership working with other Council Directorates, and with all agencies working with children in Halton, was taken into account with a grade determined for each of the five outcomes. In addition, the APA made three judgements in relation to:

- the Council's Children's Social Care Services;
- the Council's Services for Children and the specific contributions they made to improving outcomes for children and young people; and
- the Council's management of its services for children and young people and its capacity to further improve those services.

The Board was advised that 2006 was the final year for a separate children's Social Care Judgement and the Children's Social Care Services had been assessed as outstanding. This would result in the award of an additional star taking Halton's Social Care Services to a top performing Three Star Status in this year's star ratings announcement.

The Authority's Children's Services had been assessed overall as good,

with this judgement forming a two star rating for Children's Services overall. This would feed into Halton's CPA rating.

The judgement made in respect of the Council's management of its services for Children and Young People, including its capacity to improve them further, was good, which was a maintained position from 2004/05. The areas identified for improvement, which would be a focus for inspectors in the forthcoming Joint Area Review, were outlined for the Board's consideration.

Ms. K. Tempest, and Ms. D. Westhead, of CSCI attended the meeting to outline the Commission's views on the achievement of the Authority. It was noted that the progress made reflected the considerable commitment of the Councillors and Officers involved, all of whom were commended by Ms Tempest, the Leader and by the Strategic Director – Children and Young People via the Portfolio Holder for Children and Young People. Ms Tempest stated that there was obvious engagement with young people and on-going integration between Education and Social Services. In particular, Ms. Tempest passed on her best wishes to the Strategic Director – Children and Young People.

Ms. K. O'Dwyer, Operational Director – Children and Young People's Services, attended the meeting to give a presentation regarding APA, outlining the areas for judgements, grades awarded and key quotes made at the conclusion of the process.

RESOLVED: That the report be received and the contents noted.

#### **EXECUTIVE SUB BOARD MEETING HELD ON 12<sup>TH</sup> OCTOBER 2006**

##### **ES44 - TO SEEK A WAIVER OF CONTRACT STANDING ORDERS TO PERMIT THE SETTING UP OF A SERVICE LEVEL AGREEMENT WITH KEY STAGE 4 PUPIL REFERRAL UNIT PROVIDERS**

There was a statutory duty on Local Authorities to provide education for pupils who were permanently excluded from school. This was carried out by most authorities through the provision of Pupil Referral Units.

At the end of the last academic year tenders were invited for provision in the following areas:

- Work-based Learning;
- Support and Emotional Literacy;
- Sport, Recreation and Leisure;
- Academic Sub GCSE; and
- Academic GCSE

Specifications for these tenders were widely distributed to organisations in the region who provided services in these areas, and expressions of interest

were requested. However, this year only single tenders were received in each area of provision. This reflected the limited number of organisations who were willing and equipped to work with some of the most demanding and challenging young people within the Borough. All the tenders received were from existing providers who were part of the recent successful Ofsted Inspection and who had met the Quality Assurance Processes administered by the Head of Key Stage 4 PRU.

RESOLVED: That

- (1) the Strategic Director Children and Young People be given delegated authority to enter into Service Level Agreements with the following providers:

Kids First;  
The Alternative Project;  
Progress Sport;  
Rathbones; and  
Riverside College; and

- (2) a further report be brought to the Sub Committee outlining what each company supplies, where they are based, approximate cost of each and how many young people are involved in each area of provision;
- (3) the waiving of Standing Orders 3.1 – 3.7 be approved due to the specialist nature of the provision and limited market.

### **EXECUTIVE SUB BOARD MEETING HELD ON 16<sup>TH</sup> NOVEMBER 2006**

#### **ES53 KS4 PUPIL REFERRAL UNIT PROVIDERS**

At a previous meeting of the Sub-Committee held on 12<sup>th</sup> October 2006, a further report was requested outlining the range of external providers that the Children and Young People's Directorate had developed service level agreements with as providers to the Council's Key Stage 4 Pupil Referral Unit. There were currently 6 providers working with KS4 PRU children, 5 of which provided curriculum and 1 who provided additional support.

The 5 curriculum providers were the Vocational Centre; Riverside College; Rathbone; and Progress Sport. The 6<sup>th</sup> provider was Kids First and their role was to provide additional support for pupils whose needs of challenging behaviour meant that they required support to access the other PRU providers. The costs and role of each provider were outlined in the report.

RESOLVED: That the report be noted.

<b>REPORT TO:</b>	Children and Young People's Policy and Performance Board
<b>DATE:</b>	8 <sup>th</sup> January 2007
<b>REPORTING OFFICER:</b>	Acting Strategic Director Children and Young People
<b>SUBJECT:</b>	Out-Borough Scrutiny Topic Update
<b>WARDS:</b>	Borough-wide

### **1.0 PURPOSE OF THE REPORT**

- 1.1 To provide an update of the work undertaken by the scrutiny topic group considering Out-Borough School Admissions and to outline the next key tasks.

### **2.0 RECOMMENDATION: That**

- (1) the progress of the Scrutiny Topic Group be noted.

### **3.0 BACKGROUND**

- 3.1 There have been two meetings of the Scrutiny Topic group. At the first meeting in October 2006, the topic brief was considered. It was agreed that the review would outline the current Out of Borough position. It would seek to identify why a significant number of parents choose to place their children out of borough. An assessment would be undertaken of the financial implications and the impact on the Authority's performance.
- 3.2 The following data was provided to the group for information and consideration at the second meeting:-
- Parental preferences for Halton Secondary Schools;
  - Parental preferences for Out-of-Borough Schools;
  - Total numbers of pupils imported to the authority across phase;
  - Total numbers of pupils exported to other authorities;
  - Ethnic minority details; and
  - Geographical data identifying those Halton resident pupils attending Out-of-Borough Schools.
- 3.3 It was agreed that a questionnaire would need to be drafted and circulated to the group for comments so that the views of parents seeking out of borough provision could be collected. The views of

schools with significant out of borough provision would be sought along with information from those primary schools from which significant numbers of pupils transfer out-of-borough at the secondary transfer stage.

**4.0 POLICY IMPLICATIONS**

None at this stage.

**5.0 OTHER IMPLICATIONS**

None at this stage.

**6.0 RISK ANALYSIS**

Halton's school admission arrangements are in place to maximise parental preference. In seeking to identify why parents choose out-of-borough schools the LA may be in a position to respond and retain pupils in the borough.

**7.0 EQUALITY AND DIVERSITY ISSUES**

N/A.

**8.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972**

<b>Document</b>	<b>Place of Inspection</b>	<b>Contact Officer</b>
Overview and Scrutiny Toolkit	2nd Floor Municipal Building	A Villiers
Minutes of the Overview and Scutiny Group – 31 <sup>st</sup> October 2006 and 19 <sup>th</sup> December 2006	Grosvenor House – 1 <sup>st</sup> Floor	Martin West

**REPORT TO:** Children and Young People Policy & Performance Board

**DATE:** 8<sup>th</sup> January 2007

**REPORTING OFFICER:** Acting Strategic Director for Children & Young People

**SUBJECT:** Work Programme 2007/2008

**WARDS:** Borough-wide

### **1.0 PURPOSE OF THE REPORT**

- 1.1 To consider a work programme for the Board for the coming year and how it should be taken forward.

### **2.0 RECOMMENDATION: That**

- (1) a work programme and timetable be agreed for 2007/08 approved and appropriate Lead Members identified; and
- (2) the lead officer for each topic agree a detailed scope with the Chair and the nominated Lead Member(s).

### **3.0 BACKGROUND**

- 3.1 The Board is asked to agree a list of topics for review during the year. Lead Officers will be nominated to each topic and it is suggested one or more Lead Members be identified for each topic as a point of contact.

### **4.0 POLICY IMPLICATIONS**

None at this stage.

### **5.0 OTHER IMPLICATIONS**

None at this stage.

### **6.0 RISK ANALYSIS**

N/A.

**7.0 EQUALITY AND DIVERSITY ISSUES**

N/A.

**8.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972**

<b>Document</b>	<b>Place of Inspection</b>	<b>Contact Officer</b>
Overview and Scrutiny Toolkit		

**REPORT TO:** Children and Young People Policy & Performance Board

**DATE:** 8<sup>TH</sup> January 2007

**REPORTING OFFICER:** Acting Strategic Director – Children and Young People

**SUBJECT:** The Youthbank

**WARD:** Boroughwide

**1.0 PURPOSE OF REPORT:**

- 1.1 To draw Members' attention to the work of The Youth Bank; and
- 1.2 To receive a presentation from the Youthbank.

**2.0 RECOMMENDATIONS: That**

- 2.1 The contents of the presentation are noted.

**3.0 SUPPORTING INFORMATION**

- 3.1 Following the launch of the Green Paper Youth Matters – Next Steps, a grant has been received to enable young people to determine “Places to go and things to do”.
- 3.2 Halton Youthbank has been formed consisting of a panel of young people who have been given the opportunity to allocate funding to groups or individuals aged 13-19.

**4.0 POLICY IMPLICATIONS**

- 4.1 This is a key policy development relation to the implementation of key Government policy.



**5.0 OTHER IMPLICATIONS**

5.1 This supports the strategy of involving young people in shaping service delivery relevant to their needs.

**6.0 RISK ANALYSIS**

6.1 Monitoring mechanisms and standards of priority are applied to ensure minimum risk in financial management.

**7.0 EQUALITY AND DIVERSITY ISSUES**

7.1 The Youthbank is inclusive of all young people 13-19.

**8.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972**

None.

**Report to:** Children & Young People PPB

**Date:** 8<sup>th</sup> January 2007

**Presented by:** Acting Strategic Director – Children & Young People Directorate

**Subject:** Findings of the independent review of the Youth Service undertaken by the National Youth Agency in September 2006

## **1.0 PURPOSE OF REPORT**

- 1.1 To provide information on the quality of the Youth Service being delivered to the young people of Halton and the value for money this service represents to Halton Borough Council.

## **2.0 RECOMMENDATIONS**

- 2.1 That the information be noted and action plan to be presented to the next PPB.

## **3.0 BACKGROUND**

- 3.1 The Youth Service was inspected by OfSTED in March 2004 and found to be a poor service offering poor value for money. The report highlighted 10 areas for service improvement. The service was re inspected against the 10 recommendations in March 2005 and found to have made limited progress in all areas. This result meant the service had not made “reasonable progress” or “good progress” and therefore was not signed off as “adequate” or “satisfactory” by inspectors and Government Office at that point.
- 3.2 The roll out of the government’s restructure of services to children and young people through the Children’s Act, and reform of OfSTED systems of inspection to Joint Area Reviews around the Every Child Matters outcomes for children, means there is no longer a formal process for signing off an underperforming youth service prior to the Joint Area Review Process.
- 3.3 In consideration of the above, an independent assessment of the current performance of the service, measuring the impact of its strategies to secure improvement, would be a useful process ensuring actual service improvement matched perceived service improvement.
- 3.4 Earlier in the year the National Youth Agency (NYA) agreed to undertake a full internal inspection of the service against the Ofsted framework for the inspection of local authority youth services in September 2006. This would represent a half-way point between the re inspection in March 2005 and the JAR in March 2008. The NYA worked with the service to develop an agreement for the consultancy. The following aim and objectives for this piece of work were identified:

3.5 The aim was to provide an assessment of youth service performance in relation to the Ofsted framework for the inspection of local authority youth services and its contribution to the outcomes in *Every Child Matters*.

3.6 Objectives:

- Enhance the management team's knowledge and skills in relation to self assessment
- Provide an external review and commentary on the service's self assessment report
- Design and undertake an internal inspection of the service with the management team
- Provide a report on the inspection findings
- Assist the service to develop an action plan to address any areas for improvement

3.7 The Inspection took place from 25<sup>th</sup> to 29<sup>th</sup> September and the resulting review document presented to the local authority and Connexions Partnership on Tuesday 7<sup>th</sup> November by the lead inspector Harriet Gore

#### 4.0 Main Findings of the Review

4.1 Effectiveness and Value for Money

***Halton Borough Council provides a good service which provides good value for money.*** Young people, at risk of exclusion achieve well and make good progress. The resources available to the service are sufficient and are used efficiently. Partnership arrangements are generally good and support young people to achieve high standards. Elected members and senior managers in the council and the Connexions Partnership provide good support and strategic direction and have good knowledge about the quality and performance of the service. The service acknowledges the need to build on improvements that have been secured during the past two years.

4.2 Strengths

- Young people from priority groups make good progress
- Good structures for involving young people in decision making at area and borough levels
- Strong strategic and operational leadership and management
- A broad based, well co-ordinated curriculum and good quality assurance arrangements secure continuous improvement
- Partnership work enhances the achievement and support of young people

4.3 Areas for Development

- Improve the quality of young people's involvement in planning, implementation and evaluation of youth work programmes
- Planning, evaluating and recording young people's learning and achievement requires further development
- Young people are insufficiently involved in negotiating challenging learning outcomes and experiences

- Issues of equality and diversity are insufficiently addressed within the curriculum and youth work programmes

#### 4.4 Table 1: Key aspect inspection grades

Key Aspect	Grade
Standards of young people's achievement	3
Quality of youth work practice	2
Quality of curriculum and resources	3
Strategic and operational leadership and management	3

The table above shows the overall grades for the service. Judgements are made on the following scale:

**Grade 4:** a service that delivers well above the minimum requirements for users

**Grade 3:** a service that consistently delivers above minimum requirements for users

**Grade 2:** a service that delivers only minimum requirements for the user

**Grade 1:** a service that does not deliver minimum requirements for the user

#### 4.5 The Youth Services Contribution to Every Child Matters

The service makes an effective contribution in a number of areas. The service plan is clearly linked to the priorities and objectives of the borough's Children's and Young People's Plan. The service has a strategic lead for youth participation and borough wide and area youth forums involve young people in making decisions and influencing the services provided by the Children and Young People's Alliance.

Young people clearly enjoy taking part in youth work programmes and through their involvement, many achieve high standards and gain nationally recognised awards. For example, young people undertaking the Duke of Edinburgh Award learned and practiced valuable skills in working as a team, planning expeditions and responses to critical incidents.

In relation to safeguarding young people; programmes and activities are risk assessed and safeguarding procedures are well understood by staff. A project in Victoria Park has involved the youth service and other local agencies in working with young people who are at risk of drifting into anti social behaviour.

Health and well being are an integral part of the curriculum, providing young people with opportunities to learn about issues such as emotional well being, sexual health, and drug misuse and to take part in physical and sporting activities. Young women at Kingsway Youth Centre worked well together to explore issues of self esteem in a supportive environment. At Grangeway Youth Centre, young people enjoyed taking part in football skills training organised by detached youth workers and young volunteers. The group's efforts are being accredited using a football skills award. Many young people also learn about healthy eating and healthy lifestyles through

interactive sessions in youth clubs and projects that encourage them to try new foods and develop healthy alternatives to 'junk food'.

- 4.6 The service's strengths clearly outweigh its weaknesses. The performance of the service is good overall. In the light of the resources available, the efficient way in which they are managed and the outcomes for young people, the service provides good value for money.

## **5.0 NEXT STEPS ACTIONS**

- 5.1 The service has recently finalised an improvement plan, which will address, over the next 12 months, the areas indicated in the review as needing development. This should lead to a strong robust service delivering and supporting the delivery of ECM outcomes through universal and targeted services to young people.
- 5.2 The improvement plan will concentrate on areas of development, these being:
- quality of young people's involvement in planning, implementation and evaluation of youth work programmes
  - further develop the planning, evaluating and recording of young people's learning and achievement
  - involvement of young people in negotiation challenging learning outcomes and experiences
  - issues of equality and diversity within the curriculum and youth work programmes
  - further develop the service partnership with the voluntary sector
  - how the service demonstrates the impact of its contribution to the Every Child Matters outcomes for children.
- 5.3 A number of ways to publicise the inspection findings have been agreed these include:
- Local Press
  - Halton Borough Council newsletters
  - Direct to Members
  - Children and Young Peoples Alliance Board Communication Links

**REPORT TO:** Children & Young People's Directorate Policy & Performance Board

**DATE:** 8 January 2007

**REPORTING OFFICER:** Acting Strategic Director – Children & Young People

**SUBJECT:** Comments, Complaints and Compliments relating mainly to Child Care Services

**WARDS:** Borough-wide

### 1. PURPOSE OF REPORT

To provide:

- 1.1 A report on the Directorate's process for managing complaints and compliments during 2004/5 and 2005/6;
- 1.2 A brief on the key issues and implications of the revised regulations and guidelines for the Social Services Complaints Procedure for Children and Young People
- 1.3 To outline the opportunities available to initiate a comprehensive complaints service across the Children & Young People's Directorate.

### 2. RECOMMENDED THAT THE BOARD:

- 2.1 Support initiatives leading to an integrated complaints service across the Directorate.
- 2.2 Agree a cycle of reporting on a six-monthly basis, which will include the annual report.

### 3. SUPPORTING INFORMATION

#### Statistical Information

- 3.1 In recent years the Health Policy & Performance Board has been presented with a report on representations (comments, complaints and compliments) relating to Social Care issues. A report now needs to be presented to the Children & Young People's Policy & Performance Board to report on Customer Care issues in 2004/5 and 2005/6.
- 3.2 The service areas from which comments and complaints at Stage 1 came in 2004/5 and 2005/6 are as follows:

Service Area	2004-05			2005-06		
	28 days or less	More than 28	Total	28 days or less	More than 28	Total
Children in Need	23	6	29	19	5	24
Looked-after Children	13	7	20	23	13	36
Quality Assurance	2	1	3	1		1
Total	38	14	52	43	18	61

In 2004/5 five (10%) of the complainants were children and young people. In 2005/6 the number had increased to 15 (29%).

3.3 Complaints taking longer than the prescribed 28 days for adults and 14 for children have been reviewed with the aim of minimising the number overdue in future include:

3.4 Overall, for the two directorates (C&YP, Health & Community) in 2005/6 67% of all complainants received a response at Stage 1 within timescales compared with 52% in 2004/5. For C&YP alone the respective percentages were 70% and 73% – see table in para. 3.2.

3.5 Examples of comment and complaint included:

- Foster child not made to feel part of the family.
- Young person in temporary placement wanted it to be made permanent.
- Young person wished to remain at same school post-16.
- Mother wished to access more care hours for her son.
- Issues around Direct Payments and purchase of appropriate care.
- Level of preparation/training for foster-parents recruited to look after a hard-to-place child.
- Lack of commitment to provide ongoing financial support for relatives having obtained a Residence Order.
- Lack of communication following change of status of grandson.
- Lack of information regarding status/plans for the baby of a young person.

3.6 Complaints progressing to Stage 2

- Originating in 2004/5 – 2;
- Originating in 2005/6 – 4.

3.7 Complaints progressing to Stage 3

- 2004/5 – 2
- 2005/6 – 4

3.8 Complaints progressing to the Ombudsman after exhausting the 3-stage procedure

- 2003/4 – 1 (the Ombudsman has closed her investigation awaiting judicial review)
- 2004/5 – 1 (No maladministration)
- 2005/6 – 0

3.9 In her letter dated 21 June 2006 to the Council's Chief Executive, the Ombudsman (O) reported that she had dealt with 6 complaints which related to Children & Young People's care issues involving 3 complainants (2 each):

3.9.1 One of the complaints (X) was referred back by the O as the Council had not been given opportunity to respond to the issues raised. With the second complaint the O decided to visit to review the case files. The outcome here is not yet known.

3.9.2 With another complainant (Y) a detailed response was made to the O but no reply has been received. The second complaint was responded to but the O could not complete her inquiries, as it proved impossible to contact the complainant.

3.9.3 The third complainant (Z) had made 2 complaints, one of which was dealt with under Child Protection case conference procedures. However, the second complaint had been dealt with at Stage 1 when the complainant had been advised of his right to progress to Stage 2. Instead the complainant elected to go straight to the Ombudsman who found no evidence of maladministration.

### 3.10 Compliments

<b>Service Area</b>	<b>2004/5</b>	<b>2005/6</b>
Children in Need	28	11
Children Looked After	10	18
Quality Assurance	0	2
Total	38	31

Compliments covered such areas as:

- Judges' comments on the quality of court reports.
- Training.
- Support and advice given to foster carers in managing a young person with challenging behaviour.
- Support given to young person at risk of exclusion and who had a deteriorating relationship with his mother.
- Multi-agency work in preparing a child for placement.
- Support given by a CSW in keeping parents informed of contact arrangements.
- Support given to young person to maintain his education
- Time and support given to parents by SW regarding child's rehabilitation.

### 4.0 Improvements and Promotion

4.1 During 2004/5 a dedicated mobile phone number was set up to offer children and young people the facility of text messaging.

4.2 Asking complainants about how they think we handled their complaint is about to get underway as part of the implementation of the revised Social Services Complaints Procedure Regulations and Procedures. A look is being taken at how other LAs handle this information gathering

4.3 The collection and processing of information relating to comments, complaints and compliments would be enhanced by the development of a more robust database to help with the production of statistical reports for managers. A business plan has



been prepared and is awaiting the identification of corporate resources to develop further. Our case has been strengthened by the new Guidelines, which lay greater emphasis upon recording complaints information.

- 4.4 During 2005/6 a series of training sessions on the Social Services Complaints Procedure were held for staff generally and for managers involved with Stage 1 and Stage 2 investigations.
- 4.5 The policy and procedures in operation during 2004/5 and 2005/6 are outlined in Appendix 1.
- 4.6 In 2004/5 the Commission for Social Care Inspection, the Department of Health and the Department for Education and Skills invited local authorities and interested parties to comment on proposals for changes to the Social Services Complaints Procedure in England. After some delay a Statutory Instrument was laid before Parliament on 29 June with implementation being on 1 September 2006. See Appendix 2 for a summary of the changes.
- 4.7 Briefing sessions on the revised regulations and procedures are taking place.

## **5.0 POLICY IMPLICATIONS**

- 5.1 Complaints and compliments provide the Council with practical guidance on the effectiveness of policies.
- 5.2 Practice and procedure may be changed as a result of the outcome of a complaint investigation.

## **6.0 OTHER IMPLICATIONS**

- 6.1 There is a significant cost to holding a Stage 2 investigation when an independent investigator and an independent person have to be appointed. The cost can be in the region of £2,500 to £3,000, for fees and expenses, which has a significant impact upon budgetary control given that we can never be certain how many such investigations are going to take place in any financial year and there is no specific budget to cover such costs. The importance of ensuring that we try and resolve complaints at Stage 1 is demonstrated here.
- 6.2 The revised regulations and procedures are being implemented in concert with similar action being taken within the Health & Community Directorate, who will also be implementing new regulations and procedures relating to complaints about the care of adults.
- 6.2 The arrival of these changes has coincided with structural changes following the dis aggregation of Policy and Support services between Children & Young People's Directorate and Health & Community.
- 6.3 Having a complaints specialist within the C&YP Directorate will also lead to an appraisal of the various complaints procedures relating to educational services. Where government guidance will allow, efforts will be made to introduce some consistency in practice and procedure, making processes simpler to understand

for staff and service users across the Borough. There are also advantages for management within C&YP Directorate, in gaining a fuller picture of performance across the Directorate's Services.

## **7.0 RISK ANALYSIS**

- 7.1 Listening to what children, young people, their parents, carers and close relatives have to say about our services is a most valuable form of performance monitoring. Not processing and responding to such information would put the Council at risk of failing to carry out its duties in a positive and professional manner.

## **8.0 EQUALITY AND DIVERSITY ISSUES**

- 8.1 People completing complaint forms are presently invited to declare their ethnic origin and age grouping. Under the new guidelines LAs are advised to also ask for information about gender and disability. How we listen and respond to young people will be a key focus in our forthcoming JAR.

## **Appendix 1**

### **Complaints – The 3 stage process**

#### **1. Stage 1**

- 1.1 We aim to resolve most complaints as close as possible to where the problem first arose. Teams and centres are responsible for responding to problems as quickly as possible. Sometimes, people will go direct to the team or unit to ask for their problem to be looked at. Or, they may ask the Customer Service Officer or a senior manager. Regardless of the method of entry the Principal Manager of the team which the complaint concerns will usually be asked to investigate the concerns and provide the complainant with an explanation of what has happened and why, and what would need to be done to put matters right. We aim to answer complaints at this stage within 28 calendar days, 14 if the complainant is a child or young person.
- 2.1 Registering comments and complaints with the Customer Service Team is important because it ensures we oversee the management of the complaint investigation, ensure lessons are learnt where needed, and make sure the complainant is aware of their rights to move to the next stage of the process if they remain unhappy with the outcome.

#### **2. Stage 2**

- 2.1 If someone is unhappy with the response at Stage 1 they have the right to ask for their complaint to be formally investigated at Stage 2. People also have the right to request an investigation at Stage 2 without working through Stage 1, if they prefer. Sometimes the nature or complexity of the complaint means that we recommend that the complaint is looked into at Stage 2 directly.
- 2.2 Stage 2 complaints are investigated by a nominated Investigating Officer, who is independent of the team or unit where the problem arose; they may even be independent of the Council. They should be accompanied by an Independent Person whose role is to monitor the investigation process, to ensure that it is objective and fair from the point of view of the child(ren) connected with the complaint.
- 2.3 We aim to send a report of the investigation to the complainant within 28 days or agree a different completion date (up to six months) with them if necessary. The relevant Divisional Manager is responsible for responding to the complainant, outlining what action, if any, will be taken in relation to the recommendations.

#### **3. Stage 3**

- 3.1 If a complainant remains dissatisfied with the outcome and recommendations at Stage 2 they have the right to request an independent Review Panel. They will be invited to make a submission to the Panel, which comprises two Members and/or senior managers from other directorates and an independent person in the chair who has no connection with the Council. The Panel will consider the complaint, whether it has been properly investigated, and why the complainant is dissatisfied with the outcome. The Panel will make recommendations for resolution to the Operational Director who has responsibility for responding to the complainant.

4. **Beyond Stage 3**

- 4.1 The complainant has the right, if still dissatisfied, to ask the Ombudsman to review the local authority's actions. In exceptional circumstances, a further option is judicial review.

## Appendix 2

### *Getting the Best from Complaints*

#### Changes to the Social Services Representations Procedure 2006

2. The 2006 regulations mirror the earlier ones. The key features / changes are:

- 2.1 Time limits of 12 months on making representations, but LAs are expected to show some discretion here.
- 2.2 Specified monitoring of complaints, including new recording requirements from 1 September 2006.
- 2.3 Requirement for LAs to appoint a Complaints Manager.
- 2.4 New name for Stage 1 – Local Resolution
- 2.5 Timescale for Stage 1 – 10 *working* days. Start date may be deferred. LA may extend the period by a maximum of 10 working days where representations are considered to be complex.
- 2.6 At Stage 2 (Investigation Stage) the timescale for the completion of the report is 25 working days. If unable to meet this deadline the complainant must be given the reason for the delay. There is a maximum of 65 working days.
- 2.7 At Stage 3 (Review Stage) there are revised timescales and arrangements:
  - 2.7.1 In requesting a Review Panel, the complainant must set out the reason for their dissatisfaction with the outcome of the Stage 2 investigation.
  - 2.7.2 A panel to comprise three independent people, i.e. having no connection with the LA.
  - 2.7.3 Greater involvement for the Chair who is to be appointed first, and within 10 days of the request being made to progress to Stage 3.
  - 2.7.4 The file of papers to be presented to the panel to be agreed by the Chair. Should include any information on local practice of a panel e.g. conduct, roles and responsibilities.
  - 2.7.5 Any other written material submitted for consideration within the 10 days preceding the panel will be at the Chair's discretion whether it is accepted or not.
  - 2.7.5 Within 5 working days of the panel meeting the panel must send its report to:
    - The Operational Director on behalf of the Council
    - The complainant and, where one appointed, the advocate<sup>1</sup>

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<sup>1</sup> Where an advocate is being used the LA needs to ensure that the advocate is acting with the informed consent of the young person.

- The Independent Person.

3. Any other person whom the panel consider has sufficient interest in the case to warrant receiving such a notice.
  - 3.1 Within 15 working days of receiving the panel's recommendations the LA must, *together with the IP*, consider the recommendations and determine:
  - 3.2 How the LA will respond to them
  - 3.3 What they propose to do in the light of them.
4. Diversity monitoring – further information has to be collected. People completing complaint forms are presently invited to declare their ethnic origin and age grouping. Under the new guidelines we are advised to also ask for information about gender and disability.
5. While people dissatisfied with a Council's services may complain to the Ombudsman at any time, early referral to the Ombudsman is possible after completion of Stage 2, subject to certain conditions applying.
6. Guidelines are given for the content of the annual report on complaints.

**REPORT TO:** Children and Young People Policy & Performance Board

**DATE:** 8<sup>th</sup> January 2007

**REPORTING OFFICER:** Acting Strategic Director – Children & Young People

**SUBJECT:** Climbie Visits

## **1.0 PURPOSE OF REPORT**

- 1.1 To review the procedure and impact of Climbie visits to the three childcare teams undertaken by elected members according to recommendation 41 of Lord Laming's Inquiry, into the death of Victoria Climbie, known locally as 'Climbie Visits'.
- 1.2 To recommend changes to the attached Climbie Visit Procedure and record of visit proforma as attached in Appendix 1 & 2.

## **2.0 RECOMMENDED: That**

- 2.1 Climbie visits continue to be undertaken by elected members and senior managers, but at a reduced frequency of quarterly (12 visits per year across the three childcare teams, or one visit each month) to reflect the progress made in establishing Climbie visits since July 2004. This will lead to a more sustainable level of visiting and allow the adoption of a more inspectoral approach;
- 2.2 Climbie visits maintain the focus on the key aspects of the findings of Lord Laming Inquiry; staffing, workloads and referral management in intake teams, but also to widen the focus to include; a review of team quarterly performance, and the impact the teams are having on outcomes for children, including the shift to holding electronic records (Integrated Children System);
- 2.3 Climbie visits are only undertaken by elected members who have a current enhanced Criminal Records Bureau Check and have received specific training in the key aspects and requirements of Climbie visits; and
- 2.4 The current pool of elected members undertaking Climbie visits is increased from 5 to 9, in order to ensure the visits are undertaken regularly and in accordance with the agreed frequency.

## **3.0 SUPPORTING INFORMATION**

- 3.1 Climbie visits have now been undertaken for over two years, and I am sure elected members would agree, that in the early months the visits were quite challenging and were a completely new set of duties and responsibilities. The process of local

democracy and the march of time have seen some changes to the elected members who undertake the visits. There have also been some system weaknesses, which has resulted in a 'hit and miss' approach to the agreed bi-monthly frequency of visits. That said, whilst the frequency may have dropped from the agreed level somewhat, there is no question that elected members carrying out the visits have taken their responsibilities for scrutiny and challenge very seriously.

- 3.2 Climbie visits have been carried by elected members since July 2004, progressing from monthly to bi-monthly. Over time the role and function of the visits have been refined and elected members have become very familiar with the role and function of our three childcare teams. The focus of the visits has predominantly been on staffing levels, staff safety and support systems, with considerable progress being made on addressing these issues. The recommendation to reduce the frequency of the visits to quarterly reflects the need now to ensure climbe visits are placed on a sustainable footing and to move to a more inspectoral regime. The bi-monthly visits have highlight a number of consistent issues across the three teams that now require strategic solutions, which aren't achievable in the short term. The reduction in frequency of Climbie visiting will raise the profile and facilitate a qualitative outcome based approach rather than just a routine level of visiting.
- 3.3 The following is a summary of the issues raised during Climbie visits in the last eighteen months and the response from officers:

<b>Climbie Issue</b>	<b>Response and action taken</b>
Recruitment & Retention of Social Workers	Council has introduced new Social Student Intake Scheme to complement Traineeship Scheme
Reliability of Council's IT Infrastructure	Council's IT service has embarked on work to upgrade and strengthen infrastructure.
Employees personal safety and office reception security	Frontline staff now issued with personal attack alarms and given personal safety training. New offices in Widnes are equipped with CCTV.
Childcare 3 based in Widnes requires larger office accommodation	Team is moving to larger accommodation in Midwood House in January 08
Toilet Facilities at Grosvenor House	Programme of refurbishment to improve toilets and stair ways is underway
Increase level of employee access to mobile phones	All frontline staff in the teams have been issued with their own Council mobile phone
Workload Pressures in Childcare Team	Additional social worker resources have



3	been transferred to the team from areas of lower demand
Management of Duty Desk in Childcare Team 1	The duty desk/system is now covered by staff from both of the two Runcorn teams, thus achieving a better balance for staff to carry out ongoing casework.

#### **4.0 Summary**

- 4.1 Elected members receive a written response from officers to each report they complete after their visit. Although there aren't always immediate solutions to some of the issues raised in the reports, considerable progress has been made to address the matters listed above. The Council has now introduced a second apprenticeship scheme called the Social Work Student Intake Scheme, which is designed to recruit student social workers before they qualify, and along with our internal traineeship scheme we have increased our recruitment capacity. As a consequence social worker vacancies within the three teams currently stands at 4 out of a compliment of 20 social work posts. Employees working in the frontline teams continue to find the role challenging as the bar of accountability and scrutiny keeps being raised. We therefore need to continue to provide good quality training and further develop a broad range of effective support systems.
- 4.2 All frontline employees now have a Council mobile and they are in the process of being issued with personal attack alarm, and will shortly receive training on personal safety. Toilet facilities at Grosvenor house are now subject of a major refurbishment programme and some teams are moving to better office accommodation in the New Year, where there are improved kitchen and rest facilities. There are new systems and support mechanism in place to improve the duty desk function in Childcare team 1. Work is also underway to analyse workload across all the team in the directorate. It is also hoped that the work being carried out by corporate IT will lead to significant improvements in the reliability of the IT system, something which will be very welcomed by all our employees.

#### **5.0 FINANCIAL IMPLICATIONS**

5.1 None

#### **6.0 BACKGROUND REPORT**

Lord Laming's Report in Nigel Moorhouse's Office.



## Appendix 1

### CLIMBIE VISITS TO CHILD CARE TEAMS

Lord Lamings Inquiry into the death of Victoria Climbie resulted in a range of recommendations. One of these (Social Care Recommendation 41) states that

“Arrangements must be made for senior managers and councillors to regularly visit intake teams in the childrens services department and to report their findings to the Chief Executive and Social Services Committee” (para 5. 193)

#### Local Procedure

1. Within Halton it has been agreed that the 3 x Child Care Teams (CCT 1; CCT 2; based in Grosvenor House Runcorn and CCT 3 based in John Briggs House Widnes) will be deemed ‘intake teams’ for these purposes as they are the teams dealing with new referrals.
2. Visits will be undertaken to each team quarterly, with the Divisional Manager for Children In Need, where appropriate.
3. Visits will last approximately 1 hour and consist of: -
  - i) Discussion with Principal/Practice Manager(s)
  - ii) Discussion with team members (as available)

Within the above discussions the following issues will be considered:-

- iii) Staffing situation (vacancies/experience/skills/attendance levels)
  - iv) Workloads and performance monitoring (Outcomes for children)
  - v) Referral monitoring and management systems
  - vi) Staff support systems, eg IT, office accommodation, communication
4. Elected members will record the key issues from the visit on the attached electronic proforma and send to the Operational Director for Vulnerable Children, for a response by the Divisional Manager, Children In Need
5. The Divisional Manager for Children In Need will collate the information for these reports and present them to Children and Young People PPB on a 6 monthly basis (copy to Chief Executive).



**Appendix 2**

**HALTON BOROUGH COUNCIL  
CHILDREN AND YOUNG PEOPLE'S DIRECTORATE  
VULNERABLE CHILDREN DEPARTMENT  
CHILDREN IN NEED DIVISION**

**CLIMBIE VISITS TO TEAMS**

<b>1</b>	<p><b>Team Name:</b></p> <p><b>Team Location:</b></p> <p><b>Principal Manager:</b></p> <p><b>Visit Completed by:</b></p> <p><b>Date:</b></p> <p><b>Accompanied by:</b></p>
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<b>2</b>	<b>People spoken with: -</b>  <b>Managers:</b>  <b>Staff:</b>  <b>Others:</b>
<b>3</b>	<b>i) Workload issues/Performance:</b>  <b>ii) Referral monitoring &amp; Management Systems:</b>  <b>iii) Staffing Issues (Experience/Skills/Attendance levels):</b>  <b>iv) Any Other Issues:</b>

**Signature:**.....

**Date:**.....

.....

**Signature:**.....

**Date:**.....

.....

<b>4</b>	<b>Feedback from Divisional Manger/Operations Director:</b>
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**Signature:** ..... **Date:** .....

**Please forward the completed for to Kath O'Dwyer (Operational Director – Children's Services for a response by Nigel Moor house, Divisional Manager Children In Need)**

**REPORT TO:** Children and Young People Policy and Performance Board

**DATE:** 8<sup>th</sup> January 2007

**REPORTING OFFICER:** Acting Strategic Director – Children & Young People

**SUBJECT:** Adoption Inspection

**WARDS:** Borough-wide

### **1.0 PURPOSE OF REPORT**

1.1 To share the report and proposed action plan with DMM.

### **2.0 RECOMMENDATIONS: That**

The Children and Young People Policy and Performance Board notes the report and action plan.

### **3.0 BACKGROUND INFORMATION**

3.1 CSCI inspected the Adoption service in August 2006.

3.2 Prior to this, it had been acknowledged that there were issues for the service to address and progress had already commenced on recruiting a suitable staff team, adding management capacity and developing practice.

3.3 Whilst this progress and the plans for the future were accepted as appropriate by the inspectors, the outcome of the inspection is that overall, the service provides **Poor** outcomes for the people who use it.

3.4 Out of the five outcomes that the inspection considers, four were judged to be Adequate and one was Poor.

3.5 Unfortunately the outcome that was judged to be Poor was that of Staying Safe, with the result that the overall judgement could not be considered anything but Poor.

3.6 A number of factors contributed to this judgement but the key one was the lack of statutory checks in respect of adopters, specifically education and local authority checks.

3.7 The range of statutory checks had been increased some months ago to include education, local authority, employers, previous partners and adult children but this was not reflected on the files the Inspector selected, nor was it being consistently applied.

3.8 In addition, the Inspectors were disappointed that these issues hadn't been picked up in the decision making process.

3.9 The introduction of the Practice Manager, Adoption, and improved quality assurance systems, means that this issue has now been fully addressed and checks implemented.

- 3.10 The action plan seeks to address all the issues raised and sets realistic timescales in which to do so.
- 3.11 The Adoption Agency is the whole Directorate and actions are required in many areas, as identified in the action plan.

#### **4.0 BACKGROUND REPORTS**

Adoption Inspection Report in Chris Taylor.

### Adoption Inspection Action Plan

Number	Standard	Regulation	Requirement	Action	By Whom	Timescale
1.	AD4	A.A.R.2005,S.I2005/389, Part 4, reg. 25 (8)	A 10-day waiver notice in respect of the adopters' written assessment should be held on file, where this is applicable.	Wavier notice to be introduced to include opportunity for adopters to offer comments/observations about this assessment.	Janet Bodie	1.11.06
2.	AD4	A.A.R.2005, S.I.2005/1712, 3 (f) (iii) & LAAS Reg. '03 7 (1)(b)	The agency must ensure all statutory checks have been completed in relation to adopters, prior to approval and a child's placement.	Full range of statutory checks to be undertaken.	Janet Bodie	In place.
3.	AD4	LASS Reg. '03, 7(a)(b)	The agency must implement and maintain robust quality assurance systems for all aspects of adoption service.	Quality assurance systems to be developed.	All Principal Managers	1.11.06
4.	AD2 AD5	A.A.R.2005,S.I2005/389, part 3, reg. 17 (1)(a)(f) & Schedule 1, part 1, 13(1)(ii)	The agency must ensure that a full assessment of a child's needs has been carried out in considering adoption for a child. This information should be up-to-date and include an assessment of sibling attachments if relevant and the child's emotional, behavioural development and any related needs	Assessment of child's needs to be carried out and included in CPR.	All Principal Managers	1.10.06?



Number	Standard	Regulation	Requirement	Action	By Whom	Timescale
5.	AD2	LAAS Reg '03 9(1)(a)(b)	The agency must ensure that its child protection policies and procedures specifically refer to the measures intended to safeguard children placed for a adoption by the authority from abuse and neglect. They should also include arrangements to be made for persons working for the adoption agency, prospective adopters and children who have been placed for adoption by the authority to have access to information that will enable them to contact the Commission regarding any concern about a child's welfare and safety.	Child Protection Procedures to be amended to specifically refer to safeguarding children placed for adoption.	Christine Taylor/ Paula St Aubyn	1.11.06?
6.	AD10	A.A.R.2005, S.I.2005/389, part 3, reg. 17(1)(g) & Schedule 1, part 1, 13(a)(ii)	The adoption agency should ensure all the necessary information has been presented to the Adoption Panel, including all necessary assessments in relation to the parenting capacity of the child's parent.	Quality assurance system in place to ensure only cases where all relevant information is available, are presented to Panel.	All Principal Managers/ Practice Manager Adoption	In place

Number	Standard	Regulation	Requirement	Action	By Whom	Timescale
7.	AD11	Local Authority Adoption Service (England) Regs. 20036(2)(c), 11(3)(d), 15(1) & Schedules 3 & 4	The manager of the service must ensure that information is held on all persons who work for the adoption service in accordance with Schedule 3 and 4. This applies to all panel members.	All information an Panel Members to comply with Schedule 3 & 4.	Janet Bodie	In place
8.	AD6 AD19 AD21	Local Authority Adoption Service (England) Regs. 2003, 10(a) & 10(b).	The manager of the service must ensure that there are a sufficient number of competent, experienced social work staff working for the purposes of the adoption agency.	All social work posts currently covered by appropriately qualified staff.	Christine Taylor	1.11.06
9.	AD25	A.A.R.2005, S.I.2005/38, Part 4, 22(1)	Where the adoption agency is considering a person may be suitable to be an adoptive parent, the manager of the agency must ensure a case record is set up. This case record must contain the information specified in the Adoption Agency Regulations 1983 and 2003.	Case records which are Regulations compliant to be established for all adopters.	Janet Bodie/ Sharon Sandell	1.11.06

Number	Standard	Regulation	Requirement	Action	By Whom	Timescale
10.	AD25	A.A.R.2005, S.I.2005/389, Part 3, 12(1)(a-l)	The manager of the agency must ensure a case record is set up for a child, where the adoption agency is considering adoption for a child. This case record must contain the information specified in the Adoption Agency Regulations 1983 and the guidance provided in the local government circular.	Case records which are Regulation and Guidance compliant to be established for all children to be placed for adoption.	Nigel Moorhouse/ Sharon Sandell	1.11.06
11.	AD25	Data Protection Act 1998.	The agency must ensure that the documentation held on file relates to that person.	Guidance to be issue on information to be held on files.	John Pearce	1.11.06

### Recommendations

Number	Refer to Standard	Good Practice Recommendations	Action	By Whom	Timescale
1.	AD2	The adoption agency should review it's adoption recruitment strategy to reflect the current and precise needs of the service. The recruitment activities of the agency should be regularly evaluated to ensure the recruitment methods used are effective.	Strategy to be reviewed in conjunction with work underway via Adoption 22.	Janet Bodie/ Jenny Mac Quire	February 2007
2.	AD4	The agency should consider introducing contributions of an adopted adult and birth parent or birth family member to the preparation training.	Adopter(s) to be identified to contribute to preparation groups.  Attempts to be made to identify a birth parent to contribute to preparation groups.	Janet Bodie	Ongoing – November 2006  Ongoing

Number	Refer to Standard	Good Practice Recommendations	Action	By Whom	Timescale
3.	AD4	Consideration should be given to agency working in collaboration with another agency/agencies to provide a second time adopters' preparation groups.	Opportunity for joint training to be explored with neighbouring agencies.	Christine Taylor	December 2006
4.	AD4	All assessment of adopters should be carried out in accordance with the nationally prescribed timescales.	Tracking systems to be further developed to ensure individual monitoring of timescales, with record held by Manager, Social Workers and on files.	Janet Bodie	December 2006
5.	AD4	The agency should consider developing a systematic approach to adopters' assessments to evidence that the agency is meeting the nationally prescribed timescales for adopters' assessments.	Tracking systems to be further developed to ensure individual monitoring of timescales, with record held by Manager, Social Workers and on files.	Janet Bodie	December 2006
6.	AD4	The agency should ensure that the views of applicants' children are ascertained and taken into account in any adoption application.	Views of applicants children to be analysed/commented upon further in reports.	Janet Bodie	November 2006
7.	AD4	Consideration should be given to developing a system to ensure compliance in respect of health and safety checks undertaken in adopters' homes.	Health and Safety checks to be undertaken for all adopters.	Janet Bodie	In place
8.	AD4	Risk assessments in relation to pets kept by adopters should be developed.	Pet questionnaire to be used in all relevant situations.  Further development of the questionnaire to cover all arrivals that could impact on a child.	Janet Bodie	In place  November 2006
9.	AD5	Information regarding the matching, introductory and placement processes needs to be more effectively reinforced during the assessment and approval process.	Preparation, assessment and approval process to provide more information on the processes involved post approval.	Janet Bodie	December 2006

Number	Refer to Standard	Good Practice Recommendations	Action	By Whom	Timescale
10.	AD5	The agency needs to review their practice in relation to the introductory process and midway reviews should consistently take place and be minuted.	Introductory process to be managed by Practice Manager, Adoption in order to developed practice within department.  Mid way reviews to take place.  Training to be provided to develop understanding of the transfer of attachment.	Janet Bodie	In place  In place  February 2007
11.	AD5	The agency should consider providing further training to staff in the completion of child permanence reports.	Further training to be provided on completion of CPR's.	Janet Bodie	February 2007
12.	AD5	Consideration should be given to the matching report used by the agency being enhanced and to such meetings being chaired by a manager within the adoption team.	Matching meetings to be chaired by Practice Managers, Adoption.  Format for matching report to be further developed.	Janet Bodie	In place  November 2006
13.	AD5	The agency should consider the use of a variety of tools to record the life appreciation days. Recording of such days should be provided to all parties in a prompt manner.	Mintues to be provided within 15 working days of the Day.  Alternative tools for recording the event to be explored.	Paula St Aubyn	In place  March 2007
14.	AD5, AD8 & AD25	The agency should ensure that clear and appropriate information is obtained for the child about themselves and life before adoption. This information should be provided in a timely manner and in accordance with their needs.	Preparation for adoption and life work to be completed within appropriately agreed timescales.  Further training to be provided to those staff undertaking this work.	All Principal Managers  Wandzia Cody	December 2006  March 2007

Number	Refer to Standard	Good Practice Recommendations	Action	By Whom	Timescale
15.	AD5	Care planning process should be strengthened to ensure children's adoption plan is not compromised.	Implementation of adoption plans to be monitored by appropriate Principal Managers and Independent Reviewing Officers.	All Principal Managers and IRO's	November 2006
16.	AD6	A clear, coherent and comprehensive strategy should be developed in relation to the agency' support services.	Adoption Support Strategy to be developed.	Janet Bodie	March 2007
17.	AD6	Adoption Support plans should be developed with copies given to the adopters in a timely manner.	Adoption Support Plans to be further developed.  Copies to be provided to relevant parties including adopters.	Janet Bodie/ Wandzia Cody	December 2006  October 2006
18.	AD2	Consideration should be given to adoption staff being provided with updated safeguarding training.	Adoption team staff to be provided updated safeguarding training.	Christine Taylor	January 2007
19.	AD10	Greater attention should be paid to the adoption panels' quality assurance roles.	Adoption Panel's quality assurance role to be further enhanced via feedback forms and training.	Janet Bodie	February 2007
20.	AD10	The adoption panel policy and procedures should be revised.	Policy and procedures to be revised to reflect Standard 10.2.	Janet Bodie	December 2006
21.	AD11	Consideration should be given to another local authority social worker being appointed to panel.	Alternative social worker identified as panel member.	Christine Taylor	In place
22.	AD12	The agency should tighten up its procedure to ensure all adoption panel papers are presented in advance of the panel.	Quality assurance systems in place to ensure that only cases where all relevant information is available by the agreed deadline, are included on the Panel agenda.	Janet Bodie	January 2007

Number	Refer to Standard	Good Practice Recommendations	Action	By Whom	Timescale
23.	AD12	The panel minutes could be improved if they were more detailed and structure. The agency should consider improving the panel minutes by making them more detailed and structured.	Format for Panel minutes to be revised.	Janet Bodie	December 2006
24.	AD8	A clear, coherent and comprehensive strategy should be developed in relation to the agency's work with birth parents and families.	Strategy to be developed in relation to work with birth parents and families.	Kate Banbury	March 2007
25.	AD18	The agency should consider using the services provided by specialist advisers more proactively.	Specialist advisers to be further engaged in adoption related work.	All Principal Managers	January 2007
26.	AD7	The agency should ensure the leaflet about adoption provided to birth parents and families is consistently used evidence recording this has been completed kept on file.	All evidence of work with and information provided to birth parents and families, to be recorded.  To be monitored via file audits.	All Principal Managers  John Pearce	January 2007
27.	AD8	The independent and support service provided to birth parents and their families should be more actively promoted. Consideration should also be given to the development of a qualitative monitoring system being introduced in respect of this service.	Independent support service currently subject to review.  Contract monitoring system has been introduced.	Christine Taylor  Lorraine Crane	January 2007  In place
28.	AD20	The current work being undertaken by the adoption team should be reviewed.	Workload management system being explored.  Gatekeeping systems introduced to manage the work of the team.	Janet Bodie	December 2006  In place

<b>Number</b>	<b>Refer to Standard</b>	<b>Good Practice Recommendations</b>	<b>Action</b>	<b>By Whom</b>	<b>Timescale</b>
29.	AD25	Halton's case recording document requires updating.	Case recording document to be updated to reflect new directorate and recent legislation.	Sharon Sandell	March 2007
30.	AD25	The agency should risk assess all adoption records to ensure that they are stored in such a manner to minimise the risk of damage and fire and water.	Risk assessment to be undertaken.	Margaret Musson	November 2006
31.	AD27	The system to monitor the quality and adequacy of adoption records should be developed.	Electronic record management system being explored.	Christine Taylor	May 2007
32.	AD29	This plan should include both provision of premises and the safeguarding/back up of records.	Disaster Recovery Plan, Business Continuity Plan, Emergency Plan.	Christine Taylor	In place



**REPORT TO:** Children and Young People Policy and Performance Board

**DATE:** 8<sup>th</sup> January 2007

**REPORTING OFFICER:** Acting Strategic Director – Children & Young People

**SUBJECT:** Fostering and Private Fostering Inspection

**WARDS:** Borough-wide

## **1.0 PURPOSE OF REPORT**

1.1 To share the final reports and proposed action plan with Children and Young People Policy and Performance Board.

## **2.0 RECOMMENDATIONS: That**

Children and Young People Policy and Performance Board notes the report and action plan.

## **3.0 BACKGROUND INFORMATION**

3.1 The Fostering and Private Fostering Inspection took place in July/August 2006.

3.2 Out of the six outcomes considered, two were considered excellent, three were considered good and one was considered adequate.

3.3 The overall judgement was that the service provided **good** outcomes for those who use it.

3.4 A considerable amount of work is underway within the Fostering Team to develop existing practice and knowledge. This has been enhanced by the arrival of a new Practice Manager but attempts to recruit a new Principal Manager have so far been unsuccessful.

3.5 However, as can be seen from the report and the action plan, progress also requires compliance and response from the Child Care Teams in terms of their knowledge and practice.

3.6 There is no separate judgement for the Private Fostering service and whilst the outcome appears positive, it should be noted that there was little active work in this area on which the Inspector could make a full judgement. This may be different in the future and is an area that requires continued development.

## **4.0 BACKGROUND REPORTS**

Fostering and Private Fostering Inspection Reports in Chris Taylor's Office.

**Fostering Inspection Action Plan**

<b>Number</b>	<b>Standard</b>	<b>Regulation</b>	<b>Requirement</b>	<b>Action</b>	<b>By Whom</b>	<b>Timescale</b>
1.	FS24	17(3)	The manager must ensure that foster carers have all relevant information on children placed with them.	<p>Checklist of documentation required prior to placement to be adhered to by placing Social Workers and monitored by Supervisory Social Workers.</p> <p>Compliance to be monitored by Principal Manager, Child Care and Principal Manager AFS.</p>	All Principal Managers	<p>31.10.06</p> <p>31.10.06</p>
2.	FS8	34(3)	The management must ensure that a foster placement agreement is drawn up for each placement.	<p>Placement Plan Part 1 to be fully completed and signed by placing Social Worker for every placement.</p> <p>Compliance to be monitored by Principal Manager Child Care, Principal Manager AFS and reviewing Officers.</p>	All Principal Managers	<p>31.10.06</p> <p>31.10.06</p>

**Recommendations**

Number	Refer to Standard	Good Practice Recommendations	Action	By Whom	Timescale
1.	FS29	The manager should review the systems for payment of foster carer allowances to ensure they provide prompt payment.	Systems for payments to foster carers to be reviewed.	Christine Taylor	December 2006

Number	Refer to Standard	Good Practice Recommendations	Action	By Whom	Timescale
2.	FS5	The manager should ensure that the transition to the permanent arrangements for managing the team ensure consistency and consolidation of developments in practice and procedure.	Management of team and transitional arrangements to be monitored by DM (LAC)	Christine Taylor	Ongoing.
3.	FS19	The manager should ensure that all staff undertaking foster carer assessments are adequately trained.	Additional training in undertaking competency based assessments has been provided.	Christine Taylor	Complete
4.	FS21	The manager should ensure that foster carer reviews accurately reflect carers' practice.	System for reviewing foster carers and the information provided to reviews to be re-considered and amended as necessary.	Christine Taylor	December 2006

**REPORT TO:** Children and Young People Policy and Performance Board

**DATE:** 8 January 2007

**REPORTING OFFICER:** Chief Executive

**SUBJECT:** Performance Management Reports for 2006/07

**WARDS:** Boroughwide

## **1. PURPOSE OF REPORT**

1.1 To consider and raise any questions or points of clarification in respect of the half-year to 30 September performance management reports on progress against service plan objectives and performance targets, performance trends/comparisons, factors affecting the services etc. for:

- a) Children's Services
- b) School Support & Advisory Services
- c) Student Services & Lifelong Learning

## **2. RECOMMENDED: That the Policy & Performance Board**

- 1) Receive the second quarter performance management reports;**
- 2) Consider the progress and performance information and raise any questions or points for clarification; and**
- 3) Highlight any areas of interest and/or concern where further information is to be reported at a future meeting of the Policy and Performance Board.**

## **3. SUPPORTING INFORMATION**

3.1 The departmental service plans provide a clear statement on what the services are planning to achieve and to show how they contribute to the Council's strategic priorities. The service plans are central to the Council's performance management arrangements and the Policy and Performance Board has a key role in monitoring performance and strengthening accountability.

3.2 The quarterly reports are on the Information Bulletin to reduce the amount of paperwork sent out with the agendas and to allow Members access to the reports as soon as they have become available. It also provides Members with an opportunity to give advance notice of any questions, points or requests for further information that will be raised to ensure the appropriate Officers are available at the PPB meeting.

**4. POLICY AND OTHER IMPLICATIONS**

4.1 There are no policy implications associated with this report.

**5. LIST OF BACKGROUND PAPERS UNDER SECTIONS 100D OF THE LOCAL GOVERNMENT ACT 1972**

<b>Document</b>	<b>Place of Inspection</b>	<b>Contact Officer</b>
Quarterly Monitoring Reports	Municipal Building, 2 <sup>nd</sup> Floor	Martin Holland, Performance Management Officer