



**Better
education
and care**

Joint area review

Lincolnshire

Children's Services Authority Area

Review of services for children and young people

Adult Learning Inspectorate
Audit Commission
Commission for Social Care Inspection
Healthcare Commission
HM Crown Prosecution Service Inspectorate
HM Inspectorate of Constabulary
HM Inspectorate of Court Administration
HM Inspectorate of Prisons
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Introduction

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 eight inspectors from the Office for Standards in Education (Ofsted), the Commission for Social Care Inspection (CSCI), the Healthcare Commission (CHAI), the Adult Learning Inspectorate (ALI) 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 its findings 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 the Lincolnshire area and evaluates the way local services, taken together, contribute to their well-being. 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.

4. The review evaluates the collective contribution made to each outcome for children and young people by relevant services in the area. It also judges the contributions made by the council's services overall and, specifically, its education and children's social care services. Particular attention is given to joint action by local services on behalf of those groups of children and young people who are vulnerable to poor outcomes. Two such groups are covered in detail: children and young people who are looked after by the council; and children and young people with learning difficulties and/or disabilities.

5. The review took place in two stages consisting in total of three weeks over a six-week period. The first stage reviewed all existing evidence including:

- a self-assessment undertaken by local public service providers
- a survey of children and young people
- performance data
- the findings of the contemporaneous inspection of the Youth service
- planning documents
- information from the inspection of local settings, such as schools and day care provision
- evidence gathered during the earlier Youth Offending Team (YOT) inspection
- briefings from staff within inspectorates, commissions and other public bodies in contact with local providers.

6. The second stage involved inspection fieldwork. This included studies of how far local services have improved outcomes for a small sample of children and young people, some of whom have the most complex needs, and a study

of provision in one neighbourhood in Boston. It also included gathering evidence on 10 key judgements, selected because of their critical importance to improving outcomes for children and young people in the local area. This included discussions with elected members of the local authority and their equivalents in other public agencies, officers from these agencies, service users and community representatives. A review of case files for children and young people receiving support from a number of local agencies was also included.

Context

7. Lincolnshire is one of the largest and most sparsely populated counties in England. It has 670,000 residents, of whom 22% are under 18 years old. Around half live in the city of Lincoln and the main towns of Boston and Grantham. The remainder are scattered throughout the county in small towns, villages or isolated communities. Ninety-seven per cent of the population is white British. There has been a significant increase in the number of people from other European countries, particularly from Poland and Portugal. Many have settled in the south and east of the county to work in the large agricultural sector, but many also work in seasonal employment in the rural areas and in the eastern coastal region which has a high influx of tourists in the summer. The birth rate is declining but the overall population has increased by 11% since 1995, due to inward migration, one of the largest increases in the country, and is set to rise by a further 10% by 2014.

8. Unemployment is below the national average but wage levels are low. Almost one third of adults have no qualifications; in the east of the county this rises to 40%. Twenty-five wards are in the 20% most deprived areas nationally. Crime levels are lower than both regional and national averages.

9. A leader and cabinet manage the county council's strategic direction. The Lincolnshire Children and Young People's Strategic Partnership (CYPSP) has good representation and participation from all the relevant statutory and voluntary agencies and from all seven district councils, and drives the delivery of children's services. A Director for Children and Young People heads a single children's services department. A Local Safeguarding Children Board (LSCB) is in place. The Corporate Governance Inspection report in 2005 led to major change: a new executive committee of nine set out, with support from all parties and employees, to improve the county council's performance and rebuild its reputation. A new senior management team of seven, with five recruited from outside the council, was in place by April 2006, together with assistant directors and heads of service.

10. The area is served by Lincolnshire police. There are seven district councils, a Learning and Skills Council (LSC) and a Connexions service. A number of private and voluntary agencies deliver a range of commissioned services across the area.

11. Primary healthcare for children in Lincolnshire is provided by the Lincolnshire Teaching Primary Care Trust. The United Lincolnshire Hospitals NHS Trust is the main provider of acute health services. Peterborough and Stamford Hospitals NHS Foundation Trust provides other children's hospital services, including accident and emergency, is the second provider of acute health services to children in South Kesteven District Council, and also provides services to children in South Holland District Council and a number of other surrounding areas. Northern Lincolnshire and Goole Hospitals NHS Trust is the second provider of acute health services to children in East Lindsey District Council, also serving children in West Lindsey District Council and a number of surrounding areas. Children's mental health services are provided by the Lincolnshire Partnership NHS Trust. The trusts providing health services for the children of Lincolnshire, including the Ambulance Service, fall within the East Midlands Strategic Health Authority.

12. There are five nursery schools and 287 primary schools. The smallest primary school has 23 full-time pupils on roll and the largest has 640. There are 63 secondary schools of which 34 have sixth-form provision. There are 21 special schools and five pupil referral units. There are three speech and language units, three sensory hearing impaired units and three learning support units. There are 318 providers of non-maintained early years provision and 871 registered childminders. There are 558 looked after children and young people, most of whom live in families with foster carers. A small number are placed for adoption.

13. Lincolnshire and Rutland LSC, together with Connexions, are partners with the local authority, colleges, training providers and schools in addressing the 14–19 strategy. Post-16 education and training is provided by four Further Education colleges, one specialist land-based college, 33 schools with sixth forms, and nine special schools for pupils with moderate, severe or profound and/ or complex learning difficulties. Alternative Key Stage 4 provision is offered by the Solutions 4 programme, four pupil referral units, 17 local and regional work based training providers and some national providers. For Entry to Employment provision, the local LSC has individual contracts with ISIS, LRAC, Hill Holt Wood, Options, Lincoln YMCA, Skegness Vocational College, South Holland ITEC, the Youth service and C.G. Partnership.

14. There is one young offender institution in the area.

Summary Report

Outcomes for children and young people

15. **Outcomes for children and young people in Lincolnshire are adequate overall.** Children and young people are generally healthy. Breast-feeding rates are rising; teenage pregnancy is falling overall, though not in all areas, and smoking in pregnancy is reducing. Immunisation rates for children under two years are high, but rates are too low for those under five. Children's

health is compromised by the variable access to services across the area. The health needs of looked after children are met well. Most children and young people appear safe. Higher numbers than in comparator councils are on the child protection register, however they are all allocated to qualified social workers and there is good multi-agency working to keep them safe. In some cases involving the Family Support and Family Support Provider Teams, delays in putting services in place and in completing timely risk assessments leave some children without the services they need to support them and ensure their protection. Most looked after children live in good quality, safe placements. Children with learning difficulties and/or disabilities are adequately safeguarded. The number of looked after children is reducing, and more are supported to live with their families. Children and young people achieve well at school. The majority of children and young people make good progress but too many children are excluded from primary and special schools. Trends in performance are good. Children and young people have an adequate range of opportunities to make decisions and take personal responsibility; many make a good contribution to their schools and communities. The rate of youth offending is in line with similar areas and those nationally. The proportion of looked after children receiving final warnings, reprimands and convictions is below comparators and is on a downward trend. Children and young people are able to achieve economic well-being and are prepared well for working life. Progression to further education, training or employment is good for the great majority of young people, including those with learning difficulties and /or disabilities and young people leaving care. The number of young people progressing to higher education is too low.

The impact of local services

16. The impact of local services in improving outcomes for children and young people is adequate overall. Many children and young people are well supported to maintain good health by effective partnership working. However, access to a number of services is variable both across the area and for vulnerable groups, such as families from Black and minority ethnic communities and children with learning difficulties and/or disabilities. Health services have insufficient capacity to ensure equal access. Children's social care services are adequate. Children and young people who are most at risk are protected well through good inter-agency collaboration and professional practice. Adequate child protection processes are in place, with good management oversight and a prompt response to more urgent need. However, significant delays in the completion of some risk assessments, and in putting support services in place for some cases, leave these children without the protection and support they need. Services for looked after children and for most care leavers are good.

17. The impact of the education service is good. Most children and young people, including those from vulnerable groups, achieve well in school, enjoy their education and are safe and happy. The school improvement service has taken a strong lead in raising performance. Behaviour is good in most schools

and excellent in many. Attendance is satisfactory overall and continues to improve. Support for children from travelling families is excellent. Children and young people are encouraged to participate in making decisions on issues that affect their own lives but their influence remains limited. Consultation with children and young people is good but they do not consistently receive feedback on the outcomes of major consultations and on the difference their views have made. Connexions and the Youth service provide good support. Effective action is also taken to prevent children and young people offending and to reduce the incidence of re-offending. Young people are given good support through effective partnership working to achieve economic well-being. Progression into further education, employment and training is good.

18. Service management is adequate. Ambitions are challenging but do not reflect the needs of Black and minority ethnic communities and there is a lack of leadership with respect to equality and diversity. Current priorities are clear and appropriate. Overall, capacity is adequate but access to some services across the area is inconsistent. Commitment to partnership working is strong. Members and managers regularly review performance, but performance systems are new and not embedded. The capacity to improve further is good

Being healthy

19. **The impact of all local services in securing the health of children and young people is adequate.** Young children and their parents or carers generally receive good health support in areas served by Sure Start and children's centres. Schools provide a wide range of health education and good progress is being made to encourage healthy eating and exercise. There are insufficient health visitors and school nurses to provide a comprehensive health promotion and prevention service. Good partnership working delivers programmes that discourage smoking and substance abuse, but the impact of these on the increasing incidence is limited. Sexual health services are delivered in a wide variety of settings and provide adequate access for young people, but the specialist hospital service has insufficient capacity, resulting in long waiting times. The teenage pregnancy strategy is successful in targeting vulnerable groups, but, in some areas, the rates are rising. Access to NHS dental services in some areas is inadequate. There are some good services to support children and young people with mental health needs. A full range of specialist mental health services is, however, not available across the whole county and there is no specialist team for those children and young people with learning difficulties and/or disabilities. The health care provision for children who are looked after is good and they have fast-track access to dental services. There is inadequate provision for some families from ethnic minority Black and minority ethnic communities. While there are some good examples of effective multi-agency working to support children and young people with learning difficulties and/or disabilities, communication with many parents is poor as is coordination of services.

Staying safe

20. **The impact of all local services in keeping children and young people safe is adequate.** Children and young people who are most at risk are protected well through good inter-agency collaboration and professional practice. The LCSB takes a strong lead in safeguarding, and ensures that children's safety and protection are key priorities across all agencies. Adequate child protection processes are in place, with good management oversight and a prompt response to more urgent need. All children on the child protection register are allocated to a social worker and child protection plans are implemented well, with good involvement by all agencies. The quality of core assessments is good, but not all initial assessments are adequately completed. The lack of thresholds to determine eligibility for family support services leads to inconsistent responses to concerns by other agencies. The allocation of family support cases varies across the county. In some cases, significant delays in the completion of risk assessments and in putting support services in place, leave these children without the support and protection they need. Not all children identified as living in private foster placements are allocated to a key worker. Long delays in closing some cases means that an up to date assessment of children's circumstances is not available in all cases before closure.

21. Services for looked after children are good. Good quality, safe, residential foster care and adoptive homes meet the needs of most looked after children. Effective decision-making systems and improved targeted support for children most at risk of becoming looked after have led to a marked reduction in the number of looked after children overall. Most care leavers are well supported. Support for children with learning difficulties and/or disabilities has improved overall, but services for children with complex needs are insufficient. Transition arrangements from children's to adult services are weak. Waiting times for occupational therapy assessments, major adaptations and for community equipment are too long. There are no formal links between health services and education to ensure that the whereabouts of all children are known. There are no named nurses for safeguarding within the hospitals to take a proactive lead or ensure continuity in the monitoring of systems and practice.

Enjoying and achieving

22. **The impact of all local services in helping children and young people to enjoy their education and recreation and to achieve well is good overall.** Parents and carers, particularly those in more deprived areas, generally have access to a good range of advice and support. Children and families of traveller heritage receive outstanding support, but support for the growing number of families from Black and minority ethnic communities within the county is limited because of the rapidly growing number of recently arrived immigrant children. Early years provision is adequate and supports children well in their care and development, although there is not enough challenge to promote excellence in all settings. Most children and young people achieve well

in school, enjoy their education and are safe and happy. The school improvement service has taken a strong lead in raising levels of performance. Practice is effective and support for national strategies is good. Behaviour is good in most schools and excellent in many. Attendance is satisfactory overall and continues to improve, and unauthorised absence is well below the national average. Exclusions have started to reduce, but in primary schools and special schools they are too high. The proportion of excluded children receiving at least 20 hours of alternative provision is very low. Children and young people educated at home and in other settings are generally well supported, and robust data and tracking mechanisms are in place to monitor progress and respond to specific needs. Children and young people with learning difficulties and/or disabilities and looked after children receive good support in the main through specialist provision. Children and young people of Black and minority ethnic heritage make satisfactory progress.

Making a positive contribution

23. The impact of all local services in helping children and young people to contribute to society is adequate, with some good features.

Children and young people are encouraged to participate in making decisions on issues that affect their lives, but their influence remains limited. Consultation with children and young people is good, but they do not consistently receive feedback on the outcomes of major consultations and on the difference their views have made. An active Youth Cabinet makes an increasing contribution to the work of the CYPSP, but it is insufficiently representative of the diverse range of vulnerable and other young people living in Lincolnshire. Children and young people develop good relationships at school, and most are supported well to manage the challenges and changes that they face. Connexions and the youth service provide good support. More limited support is available for those who require help with learning English. Individual looked after young people are well supported to participate in decisions that affect them, but their ability to influence service development is hampered by the slow development of corporate parenting. Concerted action and initiatives to reduce anti-social behaviour by children and young people are good. Effective action is also taken to prevent them offending and to reduce the incidence of re-offending. Those who have offended are supervised effectively and there is clear evidence of a positive impact on the lives of the young people concerned, especially in reducing the incidence of substance misuse. Restorative justice work with victims and young people is less well developed.

Achieving economic well-being

24. The impact of all local services in helping children and young people achieve economic well-being is good. The partnership work between the council, Connexions, the local LSC, schools, further education and training providers is good and is having a positive impact. The range and choice of vocational learning options for young people in most schools is good and improving. Rates of participation in pre and post-16 vocational learning are

above the national average and the development of vocational learning opportunities is satisfactory and good in some areas. Good initiatives are improving progression into employment, training and further education, although too many young people have to travel long distances to attend suitable vocational learning activities. The Aim Higher programme is well managed and raises aspirations and awareness of higher education opportunities, but has yet to achieve a significant impact. Housing and accommodation support available for most young people in Lincolnshire is good, with some very effective partnership work between local councils and accommodation providers. Resources and suitable accommodation for some vulnerable young people with complex support needs are insufficient. Young people with learning difficulties and/or disabilities have good opportunities to progress from Key Stage 4 into further education or other provision. Some young people with learning difficulties are poorly prepared for their transition reviews. Most families, particularly those living in disadvantaged areas, benefit from well coordinated, high quality support activities that promote family learning and provide valuable sources of information and guidance. A small multi-cultural team gives effective support to families from Black and minority ethnic communities, but access to this service is insufficient to meet the need.

Service management

25. **The management of services for children and young people is adequate.** Ambitions for children's services are adequate. There are shared, challenging ambitions for children's services, but these do not reflect the needs of Black and minority ethnic groups. There is a lack of leadership in the area with respect to equality and diversity. There is strong engagement with the children's agenda through portfolio holders, but it is more limited amongst non-executive councillors and other stakeholders. Prioritisation is adequate. Priorities are clear and focus on the delivery of the Every Child Matters agenda. Medium term plans have an improved focus on outcomes for children and young people, but are not yet costed. Increasingly, resources are being appropriately allocated to deliver improvements in priority areas. Progress in delivering planned improvements for children and young people is mixed. Capacity to deliver services for children and young people and achieve value for money is adequate. Management and political leadership are adequate and improving. Effective action has been taken to address staff shortages within the council's children's services, but differential access to services remains across the county. Commitment to partnership working is strong. Councillor training to meet the needs of the children's agenda is limited. Performance management is adequate. Members and managers review performance reports regularly, areas of underperformance are highlighted and action taken to address this. However, performance management systems are new and not embedded. The council's track record in delivering its own targets is mixed.

26. There is a clear understanding of the challenges and barriers to service improvement for children and young people, particularly those who are part of transient and migrant populations. The Children and Young People's Plan

2007/10 prioritises this area for action. Resources are increasingly being refocused on the priority areas. Consultation with children and young people is good. Outcomes for children looked after are good. Children from Black and minority ethnic communities make satisfactory progress in school. Support for children from travelling families is outstanding. Effective action to improve capacity is being taken within the council's children's services and partners are working closely together to find solutions to capacity problems in health services. Partnership working is an emerging strength and is already working effectively to deliver good outcomes across some areas. There is a robust corporate performance framework. The self-assessment completed for the joint area review demonstrates self awareness, and although some outcomes balanced description and context with critical analysis, others lacked sufficient rigour to identify where services were under performing. However, the council's scored judgements with respect to its current performance were accurate, with the exception of staying safe which it had assessed as good but is judged in this report as adequate.

Grades

Grades awarded:

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

	Local services overall	Council services	Health services
Being healthy	2		
Staying safe	2		
Enjoying and achieving	3		
Making a positive contribution	2		
Achieving economic well-being	3		
Service management	2		
Capacity to improve	3	3	
Children's services		2	
The education service		3	
The social care services for children		2	
The health service for children			2

Recommendations

For immediate action

- Review existing organisational structures to identify and address capacity issues within the Family Support and Family Support Provider Teams. Identify risk and contingency plans to ensure risk assessments are completed in a timely manner and appropriate support put in place when needed.

- Ensure that all children identified as living in private foster placements are allocated to key workers.
- Develop and implement an appropriate training programme for all elected members which enables them to meet their responsibilities in relation to the delivery of the children's agenda and corporate parenting.
- Implement an effective system to ensure all cases are closed appropriately by agreed timescales and ensure sufficient administrative capacity to support this system.
- Apply the national guidance appropriately with regard to named nurses for safeguarding within Lincolnshire hospitals.

For action over the next six months

- Develop and implement clear thresholds for access to children's social care services that are clearly understood by all partner agencies.
- Ensure that strategies, procedures and services are in place which meet the diverse needs of all children and their families, including those who are part of transient and migrant populations.
- Develop systems to ensure effective coordination between health services and education to enable all children to be identified and their whereabouts known.
- Improve health promotion services and ill health prevention both in schools and in the community, particularly in the east of the county, and improve access to NHS dental services for children and young people.
- Improve services and transition arrangements for children and young people with learning difficulties and /or disabilities, particularly those with complex needs, and ensure they are effectively coordinated to better meet their physical and mental health needs.

. For action in the longer term

- Ensure that the involvement of all children and young people genuinely shapes services, and routinely provide feedback to them on the outcomes of consultations.

Main Report

Outcomes for children and young people

27. **Outcomes for children and young people in Lincolnshire are adequate.**

28. **Children and young people are generally healthy.** Most indicators for health are in line with, or better than, national averages, except for mortality rates which are higher in some parts of the county. Breastfeeding rates continue to rise but are below the local target. Good progress is being made to reduce the proportion of women smoking during pregnancy. Teenage pregnancy rates overall have fallen faster than the benchmark average, although in some areas they are rising. Immunisation rates of children at age two are in line with benchmark groups, but at age five are significantly below in many areas. The incidence of measles is generally lower than the England average for children under one year old, and equal to the England average for under 15 year olds. The average number of decayed, missing or filled teeth is significantly lower than the England average. Support to families living in SureStart areas is reducing avoidable hospital admissions. Children and young people's knowledge of nutrition and the importance of exercise has improved through school-based programmes. The health needs of looked after children are well met. Health outcomes for some vulnerable children are compromised due to limited resources in Child and Adolescent Mental Health Services (CAMHS) and in the speech and language therapy service.

29. **Most children and young people appear safe.** All agencies work well together to protect those most at risk. Most young people surveyed feel safe at school and in the local area. There has been an increase of children and young people killed as a result of road traffic accidents; some targets to educate young people on safe walking and road safety have not been met. Numbers of children on the child protection register are significantly higher than those of comparator councils, partly as a result of a significant reduction in the number of children looked after by the council, as risk is now better managed within the community. Children on the child protection register and most looked after children are allocated to qualified social workers. Children at risk of abuse benefit from improved multi-agency responses to child protection issues, supported by good planning at core group meetings and child protection conferences. Reviews of looked after children and children and young people on the child protection register are conducted within timescales. Comparatively low numbers of initial and core assessments are undertaken, which may leave some children without the support they need. Some children and young people also wait too long for a service once assessed, and this may leave these children unprotected and without the support they need. Care leavers receive good quality services from the Care Leavers' Team, but some have to wait too long for this service. The arrangements to identify vulnerable young people in the area are adequate, with good arrangements within children's services and between the police and council to track missing children. However, the overall

effectiveness of these systems is compromised by the lack of health services' involvement in them. The arrangements to safeguard children with learning difficulties and/or disabilities are adequate. Services for children with complex needs are underdeveloped and some families of children with learning difficulties and or disabilities do not receive cohesive or coordinated multi-agency support.

30. Children and young people achieve well. Educational standards are consistently above the national average. The majority of children and young people make good progress. Trends in performance are good. In 2006 the proportion of children attaining five GCSEs at grades A*–C, or equivalent, was above the national average and comparator groups. Children of Black and minority ethnic heritage make satisfactory progress, as do children with learning difficulties and/or disabilities. The proportion of looked after young people sitting GCSEs or equivalent is in line with the national average. The proportion of looked after young people achieving one GCSE at grade A*–G, or equivalent, is good and well above the national average. Behaviour is good in most schools and excellent in many. Overall, attendance at school is satisfactory. Authorised absence is in line with national averages and improving, and unauthorised absence is well below the national average. However, too many children are excluded from primary and special schools. The attendance of children of traveller heritage is good and an increasing number are taking national curriculum tests and GCSEs. Attendance at special schools is good, better than the national average, and has increased compared to a national decreasing trend. The proportion of young people involved in youth service activities is in line with national benchmarks.

31. Children and young people have an adequate range of opportunities to make decisions and take personal responsibility; many make a good contribution to their schools and communities. Children and young people in Lincolnshire are less likely to become victims of crime when compared with the rest of the country, and the number of crimes where children and young people are victims continues to reduce. Young people are aware of local crime hotspots, usually concentrated in the main towns, and know how to protect themselves and avoid being involved. The rate of youth offending is in line with similar areas and those nationally. The proportion of looked after children receiving final warnings, reprimands and convictions is below comparators and is on a downward trend. The area has achieved its targets for reducing the number of first-time entrants into the criminal justice system. The majority of schools in Lincolnshire have a school council and many young people are involved in Youth Forums, although the links between these and the Youth Cabinet are not strong. School inspections indicate that schools are good at seeking the involvement of pupils, and that children and young people in both secondary and primary schools are willing to take responsibility. The vast majority of looked after children, children with learning difficulties and/or disabilities and young people who offend communicate their views during statutory reviews of support and provision.

32. Children and young people are able to achieve economic well-being and are prepared well for working life. The very good partnership work between the council, local LSC and Connexions is improving collaboration and increasing the curriculum opportunities for young people. Connexions personal advisors work across the county to ensure that all young people at risk of not progressing to post 16 education or training are well supported with guidance and additional activities. Achievement of qualifications at Level 3 is in line with national averages. The percentage of young people not in education, employment or training has reduced over the last two years to 4.7%, better than the national target for Lincolnshire of 5%. Overall, participation in education and training has increased to 88.6%, which is above the national average. The national campaign to encourage young people into higher education, Aim Higher, is raising aspirations, although the impact of this has yet to be seen as the number of young people progressing to higher education is still low. Most care leavers and other vulnerable young people live in appropriate accommodation and have good support, but choice in terms of type and location is still insufficient to meet individual need. Good partnership working by National Children's Home (NCH) and Connexions has led to increasing numbers of care leavers in education, employment or training. Most families, particularly those living in disadvantaged areas, receive good advice and guidance from local agencies. Some parents from Black and minority ethnic communities receive effective advice from the multi-cultural development team, but its capacity is limited. Young people with learning difficulties and/or disabilities have good opportunities for progression into further education. Transition arrangements between schools and colleges are well managed, although the range of post 19 opportunities available is not clear to all young people, their families or carers. Lincolnshire is reducing its reliance on out of county placements for young people with learning difficulties and/or disabilities and the investment in further education colleges and extended care arrangements mean that some young people with complex support needs can return to their own communities for their further education.

The impact of local services

Being healthy

33. The work of all local services in securing the health of children and young people is adequate. Partnership working is effective and there is recognition of the need to address longstanding inequalities in health service provision across the county, particularly in the east. Parents and carers, particularly those living in areas of high deprivation, receive well-directed advice and support in keeping their children healthy. Good support programmes, which cover childcare, parenting skills, healthy eating, sexual health and safety in the home, are delivered through parents' groups and school-based activities, as well as Sure Start and children's centres, though these are not in place across the area. The ability of health visitors to deliver effective health promotion to parents and carers is compromised in most parts of the county by lack of sufficient staff.

34. Good progress is being made in encouraging women to breastfeed, using mothers who have successfully breastfed as peer educators. Good support is provided by the Phoenix service to encourage women to stop smoking during pregnancy. The Smoke-free Homes project operating in some areas is effective in protecting babies and the unborn from the harmful effects of smoke and has led to fewer hospital admissions of babies in those areas. There are some good community outreach programmes, such as the provision of oral health workers, but in remote rural areas it is often difficult to access such services. Not all newly arrived families of Black and minority ethnic heritage are well supported to take up health care services, and there are insufficient interpreting services to meet demand, particularly in hospitals. There is a lack of capacity in community services in the east of the county where there is no children's nursing service to support children at home.

35. The promotion of healthy lifestyles to children and young people is effective and well coordinated. Schools make a valuable contribution, with 82% engaged in the Healthy Schools programme. Healthy eating is promoted well in schools. There are good examples of a comprehensive approach to healthy meals, snacks and drinks and of health education being reflected across the school curriculum. Teachers have access to good training on accredited courses in sexual health and drug and alcohol misuse. The contribution of the school nursing service in providing advice, support and health promotion is, however, limited by the availability of sufficient staff. Participation in sport at school is good and there are many examples of agencies working together to encourage exercise, for example, the school sports partnership, leisure centres, school travel plans and school walking clubs. Not all of these are accessible to those living in very rural areas. There is adequate provision within the schools to discourage children and young people from smoking and from substance misuse, but the impact of this is limited and there are, on average, four students excluded from school each week for substance misuse and smoking. The community based alcohol strategy is under resourced, resulting in limited promotion and preventative work with children and young people. There is some good work with Trading Standards to target under-age drinking.

36. The drugs service is effective at consulting with young people, and their awareness of the service is good. There has been a significant increase in the numbers contacting the service, reflecting rising demand and better access. A high proportion of these young people seek treatment, and the availability of treatment is good. Sex and relationship education is delivered adequately within schools. Following consultation with young people, the curriculum is being reviewed to better meet their needs. There is good multi-agency provision of sexual health advice and support for children and young people involving the Youth service and Connexions. The C Card condom scheme achieves wide coverage, and services are provided in community pharmacies and in all the further education colleges. Sexual health clinics are located in most towns, providing adequate levels of contraception and sexually transmitted disease advice, but only some provide timely diagnosis and treatment. The specialist genito urinary medicine service is not meeting the needs of most young people

as there are insufficient staff in both hospital clinics and primary care resulting in long waiting times. The teenage pregnancy strategy has been effective by targeting vulnerable groups as well as providing good universal services, and has met overall countywide targets. The impact of the strategy is inconsistent, however, and in some areas the rate of teenage pregnancy is increasing.

37. There is a comprehensive child health surveillance programme. Waiting times for assessment clinics are scored positively by young people and are within national standards. Waiting times for speech and language therapy and physiotherapy are too long for some children and young people. Health services are largely age appropriate, although there are insufficient paediatric nurses in hospital A&E departments and out-patient services to fully meet the needs of children and young people. In Lincoln County Hospital there are insufficient junior medical staff for the distantly located paediatric ward and the neonatal unit, and insufficient nurses to staff all cots. Some good progress has been made to improve access to NHS dental services, but in some areas this is inadequate, with children and young people having to travel some distance to see a dentist and then only for urgent treatment. Oral health promotion staff are effective in enabling front-line staff to deliver awareness training.

38. A good range of support is available for children and young people with emotional difficulties including learning mentors, school nurses, primary mental health workers, teenage advice centres and Connexions. The primary school-based Pyramid scheme is effective in helping to raise self-esteem and confidence, and in the east is targeting children in Black and minority ethnic communities. Good progress is being made toward delivering comprehensive CAMHS, including emergency response and services for 16 and 17 year olds. However, the full range of services is not available across the county. Many children and young people are waiting too long to receive a service.

39. Health indicators for children who are looked after are generally good, with most receiving annual health assessments. Arrangements to advise and support young people in accessing services, such as dental and sexual health services, are good. A teenage pregnancy nurse specifically supports looked after children and care leavers and provides a good level of support. Looked after children are given priority by CAMHS and receive a good service, with a nurse allocated to residential care homes. However, waiting times for child psychology services are too long.

40. Services vary for children and young people with learning difficulties and/or disabilities with those on the east coast having poorer provision. There are some good examples of effective multi-agency working, such as the pilot Team Around the Child scheme and the arrangements for preschool children. Many parents, however, experience poor communication and coordination of services. There is no specialist learning difficulties and/or disabilities team within CAMHS and there is insufficient capacity in the therapy services to meet the needs of many children and young people and their families. There are adequate transition arrangements to the adult health services and some

examples of good practice. In one case, an occupational therapist had been moved from adult services to a special school to support young people moving on.

Staying safe

41. **The work of all local services in keeping children and young people safe is adequate.** Children and young people are well informed about their general safety in the community. The LSCB has robust systems in place to address the wider safeguarding agenda. It has provided a good parenting handbook that covers a wide range of risk, health and safety information. Most children and young people feel safe in school but some feel less safe within their local communities. Targets for training children in walking and cycling skills have not been met. Positive action is being taken to reduce road traffic accidents, but the number of children and young people killed in road traffic accidents increased in 2004/05 and remains high.

42. Those most at risk from abuse are adequately protected by good inter-agency collaboration and professional practice. A range of preventative services provides good support to children in need through children's services, the Family Support and Family Support Provider Teams, children's centres, and the private and voluntary sector. However, the lack of agreed thresholds to determine eligibility for family support services leads to inconsistent responses to concerns by other agencies. The allocation of family support cases varies across the county. In some areas there are significant delays in allocating children in need cases and in undertaking specific risk assessments, leaving some children without the protection and support they need. Delays in putting in place support work with families undermine the move towards a more preventative approach. Most children and young people identified as living in private foster placements do not receive sufficient monitoring and support as they are not allocated to a social worker.

43. Procedures for referring and assessing children and young people are adequate, with satisfactory management oversight and a prompt response to more urgent need. There has been a notable improvement in the completion of initial and core assessments within required timescales. However, in some cases, initial assessments are closed without adequate information to inform this decision. The quality of core assessments is good. The council remains significantly below that of its comparators in the number of initial and core assessments that it undertakes. This may leave some children without the support they need. Long delays in closing cases in some teams mean that an up to date assessment of children's circumstances is not available in all cases before closure.

44. The work of agencies collaborating to safeguard children is good. The LSCB has strengthened its strategic planning processes. Sound systems are in place to ensure that safeguarding issues receive high priority across all agencies. The business plan, underpinned by a comprehensive training plan,

gives clear roles and terms of reference to each board member. The LSCB has made a good start to the training of multi-agency staff and has taken steps to improve provision to ensure this will be made available to all staff who work with children. The LSCB has robust governance arrangements in place, with a culture of open challenge amongst its membership. There is full commitment and accountability by members on behalf of their individual agencies. Appropriate action plans have been completed with regard to serious case reviews. These are subject to robust monitoring and evaluative processes by the LSCB standards sub-group.

45. All agencies prioritise safeguarding and child protection. However, there are no named nurses for safeguarding within the hospitals to take a proactive lead or ensure continuity in the monitoring of systems and practice. The police Domestic Violence Team, child protection unit and public protection unit are co-located, which aids good liaison and close joint working. The secondment of a police officer to the customer service centre ensures effective coordination of communication and action between agencies in child protection cases.

46. The number of initial child protection conferences held within timescales, while showing a marked improvement, remains significantly lower than those of similar councils. Child protection review conferences are carried out within timescales. All children on the child protection register are allocated to qualified social workers. Child protection plans have measurable objectives and outcomes, with clearly identified responsibilities for each agency, which are well implemented. A case monitoring panel provides oversight to ensure that cases do not drift and good outcomes are achieved. Delays in accessing psychological assessments of parents has led to delays in care planning for a small number of children.

47. Performance monitoring and audit work in child protection is adequate but the quality is variable across teams. Criminal Records Bureau checks are in place for newly appointed staff working with children. Not all current recruitment systems ensure that all staff appointed have full and suitable references in place prior to appointment. Multi-Agency Public Protection Arrangements to monitor serious offenders within the community are strong. There are satisfactory systems in place to track missing children through a central pupil database and supported by a clear protocol. However, there are no formal links to health systems to ensure that the whereabouts of all children and young people aged 0–16 are known.

48. Information sharing across agencies is adequate, but, without a formal information sharing protocol, this currently relies on good professional relationships at a local level. A proposed protocol for the allocation of child protection cases to trainee social workers was unacceptable. Inadequate capacity within business support services results in case records not kept up to date. There is a significant backlog of notes, conference minutes and correspondence awaiting filing. There is good access to interpreter and translation services within children's social care services.

49. Good quality, safe, residential foster care and adoptive homes meet the needs of most looked after children. The range of fostering placements is more limited for sibling groups, those with complex needs and those from Black and minority ethnic communities. All looked after children have care plans independently reviewed within required timescales, though not all looked after children are allocated to qualified social workers. Those children and young people allocated to qualified social workers in dedicated teams for looked after children value the improved continuity of worker this gives. Thorough risk assessments are undertaken before children are placed and these are regularly reviewed. Carers are well supported by an extensive training programme. A permanency policy is working effectively to ensure that children are permanently placed with foster carers or adopted within good timescales. Effective decision making systems and improved targeted support for children most at risk of becoming looked after has led to a marked reduction in the number of children looked after. Contracts with independent care providers are well monitored, providing additional safeguards for children placed in those services. The NCH care leavers' service provides good support but does not have capacity to work with all care leavers.

50. Services to support young children with learning difficulties and/or disabilities and their families have recently shown a significant improvement through the development of an Early Intervention Tteam. Widening the eligibility criteria has given more children with learning difficulties and/or disabilities improved access to social care services. Despite these improvements, in most cases the transition planning between children's and adult social care services is weak. This is being reviewed. There are insufficient occupational therapists to progress assessments for access to Disabled Facilities Grants for major adaptations, and waiting times for community equipment are too long.

Enjoying and achieving

51. **The work of all local services in helping children and young people to enjoy their education and recreation and to achieve well is good.** Parents and carers, particularly those in more deprived areas, have access to a satisfactory range of advice and support, particularly through SureStart, HomeStart and children's centres. Children's centres are in place in targeted areas, and plans are developing to put in place a further 23 children's centres by 2008. Families of traveller heritage receive outstanding support from the traveller education service. Support groups and information sources for parents and carers of children and young people with learning difficulties and/or disabilities are effective. The YOT provides good support for parents and carers of children and young people at risk of offending. A web-based children's directory has recently been established, but access to it is difficult and its range is limited. Steps are being taken to address this. The council recognises that support and advice for the growing number of immigrant families within the county is limited.

52. Early years education and childcare in Lincolnshire is adequate. Most teaching is satisfactory or better, as is provision that supports children well in their care and development. There are suitable places to meet the needs of all three and four year olds. An appropriate range of training and support activities are accessed by early years providers, with good participation rates. Means of monitoring the quality of provision and supporting improvement are in place. However, there is insufficient use of data to challenge and improve the quality of teaching and to promote excellence in all early years settings. The council is aware of these issues and is in the process of implementing appropriate strategies to make improvements.

53. Educational standards are consistently above the national average. The majority of children and young people make at least satisfactory and often good progress. Trends in performance are good. Children and young people of Black and minority ethnic heritage make satisfactory progress, although the ethnic minority achievement service is having increasing difficulty in supporting the rapidly growing number of recently arrived immigrant children. In 2006, results show that the proportion of young people attaining five GCSEs at grades A*–C, or equivalent, was above the national average and comparator groups. The proportion of young people leaving school without any qualifications is very low. Children with learning difficulties and/or disabilities generally make satisfactory progress.

54. The school improvement service takes a strong lead in raising the performance of Lincolnshire schools. Practice is robust and effective and support for national strategies is good. Advisors know their schools very well, have developed good partnerships with them, and this is generally valued. Service strengths include challenge and support to schools on the use of data, leadership and management, teaching and learning and self-evaluation. Data are used rigorously to improve quality and standards. Improvement strategies are appropriate and varied, resulting in 'local strategies to meet local needs'.

55. When necessary, the school improvement service and council officers have been quick to instigate a range of effective strategies so that far fewer schools are now being identified as having significant weaknesses or causing concern. During the summer term, only one school was given a notice to improve, which is better than the national rate, and three schools were removed from a category, which is also better than the national picture. Challenge and support is targeted effectively at the low number of under achieving schools. Suitable procedures are in place for admissions and the council is beginning to address falling rolls in primary schools.

56. The education welfare service is excellent and has developed very good partnerships with other key agencies. It contributes well to a range of initiatives, such as the Behaviour Improvement Programme (BIP), and is highly regarded by schools. It makes good use of data to measure impact and target support effectively. The challenge and support this service provides to schools to improve attendance, behaviour and reintegration and to reduce exclusions is

very good. The youth service and YOT also make valuable and effective contributions to improve attendance and behaviour and reduce exclusions.

57. In areas with BIP and Excellence Clusters, attendance is improving and exclusions are reducing significantly. Permanent exclusions have reduced by 61%, but, across the county, exclusions remain higher than the national average and are particularly high in primary and special schools. Solutions4 and the Mary Knox pupil referral unit, in particular, provide a good range of alternative provision for excluded children, but overall the percentage of excluded children and young people receiving at least 20 hours of alternative provision is very low. Children and young people educated at home or in other settings are well supported in the main, and robust data and tracking mechanisms are in place to monitor achievements and respond to specific needs.

58. Most children and young people enjoy their education and are safe and happy. They have access to a good range of out of school and voluntary learning activities to raise attainment and boost self-esteem, including study support programmes such as Onside@BostonUnited, gifted and talented summers schools and a variety of sports, arts and performance related activities, which are mainly provided through extended services in schools and the Youth service. There is also strong support from voluntary organisations and community groups. There are, however, limited resources going into mobile and detached youth provision to ensure provision of these services for all young people.

59. Children and young people who are looked after are effectively helped to enjoy and achieve academically and socially. The education service for looked after children supports this group well. The proportion of looked after children sitting GCSEs or equivalents is in line with the national average. The proportion achieving one GCSE at grade A*–G, or equivalent, is good and well above the national average. Attendance is good and given high priority. Most looked after children have personal education plans. Determined action is taken to ensure, as far as possible, that children who are looked after have the education and training placements which reflect their particular needs. Elected members are committed to improving the educational outcomes of looked after children, and their achievement is reported and monitored. Individual looked after children are well supported to pursue their individual hobbies and interests.

60. Children and young people with learning difficulties and/or disabilities are supported well through specialist provision. Multi-agency work is adequate and support groups for parents and carers are effective. Transition support is well planned for pre-16 year olds, with good liaison to ensure smooth transfer from early years to primary and secondary schools. Provision in special schools is regularly monitored. However, there is a lack of sufficient systematic analysis of data to identify trends and measure the value that these schools add to children and young people's achievement. The council and voluntary organisations are

increasing opportunities for young people to take part in leisure and recreational activities, although access across the county remains patchy.

Making a positive contribution

61. The work of all local services in helping children and young people to contribute to society is adequate, with some good features.

Children and young people receive effective support and guidance from the youth service, Connexions and the youth offending service. Consultation and participation are good for many children, but are not sufficiently inclusive and their influence remains limited. There is a satisfactory range of initiatives to enable most children and young people to develop socially and emotionally, especially in schools. Peer-mentoring schemes and residential activities are having a positive impact, and children and young people play a major role in helping and supporting each other. A good range of well-targeted initiatives support many parents and carers well in maintaining positive relationships with their children and help them manage their children's challenging behaviour. These initiatives include parent groups within the Junior Youth Inclusion Programme (JYIP), some parenting support provided by the youth offending service, and initiatives as part of the Strengthening Families strategy. The council recognises that this provision lacks coordination, particularly for those newly arrived in Black and minority ethnic communities.

62. Children and young people, particularly those from vulnerable groups, receive good support in managing changes and responding to challenges in their lives, and this includes support for coping with traumatic events. For school-age children and young people, there is especially good advice from the youth service and Connexions on issues such as careers, sexual health, drugs and alcohol. The youth service has a good project for refugees and asylum seekers in Lincoln. Young carers are supported well, but insufficient attention is given to their particular circumstances at school. Children's Links and the Boston JYIP have addressed incidents of discriminatory behaviour effectively. For example, in a project with the National Association of Crime Reduction Organisation, young people prepared a play on diversity and discrimination and performed it to an audience of 200 primary-aged pupils. The feedback from the children, parents and schools was very positive.

63. All agencies are strongly committed to including children and young people in decision making, and there are growing opportunities for children and young people to initiate activities to support their schools, their community and environment. Consultation is good when key decisions are made about provision, but young people have limited genuine influence in the planning and management of services. The Youth Cabinet is active and is starting to contribute to the work of the CYPSP. However, it is not sufficiently representative of the diverse range of vulnerable young people living in the county nor is it well connected to schools' councils. Children are increasingly used to contribute to the recruitment and selection of senior staff in council services and schools. Children and young people do not consistently receive

feedback on the outcomes of major consultations and on the difference they have made.

64. Actions taken to reduce anti-social behaviour, prevent offending and reduce re-offending are good. Community safety partnerships are driving a range of good activities to deter children and young people from anti-social behaviour. There is close and successful collaboration between the police and other partners. Dispersal and anti-social behaviour orders are used selectively and effectively, alongside other preventative strategies and well-targeted provision. Secure measures are in place to identify children and young people at risk of anti-social behaviour, and there is an especially good multi-agency referral system that is targeted suitably on early intervention and prevention. The youth service and the youth offending service are effective and make a positive contribution to supporting young people in leading constructive lives and raising their self-esteem, with excellent examples of joint working. Good arrangements are in place to meet the educational, housing and mental health needs of young people in custody and after custody. The inspection of the youth offending service has identified many examples of good and excellent practice, supported by solid assessment and appropriately targeted interventions. However, there are not enough staff to deliver a full restorative justice service.

65. Provision to ensure that looked after children and young people are helped to make a positive contribution is good. They are encouraged to make decisions about their individual plans and are well supported to participate in review meetings. They are increasingly being involved in key staff appointments. Effective support is available for young people approaching adulthood, and transitions through education are mostly managed well. The range of residential and foster placements largely meets their cultural needs. Access to family and other contacts is well facilitated. Numbers of looked after young people involved in offending are reducing through effective interventions. Children and young people make good use of the advocacy and complaints services in residential care, but they are not used as well by children in foster care. The understanding and implementation of the role of corporate parent has been too slow developing, consequently the views of looked after young people have not sufficiently informed the development of services. An appropriate strategy is now being implemented.

66. Provision to ensure that children and young people with learning difficulties and/or disabilities make a positive contribution is adequate, with some good features. The views of children and young people and parents or carers are sought and inform key decisions. Support to transfer from early years to primary and secondary schools is good. Young people receive effective guidance and advice, particularly from Connexions, with more young people benefiting from post-16 opportunities. Provision of extended day care and respite care is improving, although it is still restricted in some areas, for example on the east coast.

Achieving economic well-being

67. **The work of all local services in helping children and young people achieve economic well-being is good.** The partnership working, coordination and planning of 14 –19 education has improved since the last area wide inspection and is now good. The collaborative work between the council, the local LSC, Connexions and other partners in agreeing the strategic direction and priorities for Lincolnshire has been very good. The majority of young people can now take part in a good range and choice of vocational learning options. The links between schools and colleges are good. The partnership has a strong focus on increasing choice for learners and improving opportunities for personal development. Rates of participation and development in pre and post16 vocational learning have improved and are now good. There are good and some highly effective initiatives to support progression into further education, training or employment. Travel to suitable opportunities remains a problem in some rural areas, although the availability of transport has improved. Overall, participation in education and training has increased to 88.6%, which is above the national average. Post 16 achievements are broadly in line with statistical neighbours and improving.

68. The Solutions 4 provision for young people at Key Stage 4 who are excluded or in danger of exclusion from school is very good and innovative. It provides, across the county, an extensive range of vocational training at entry level and Level 1 to re-engage those seriously disaffected or those with particularly negative experiences at school. Centres across the county provide very effective personal support by instructors, who also have good vocational experience. Achievement is well recorded through portfolios and celebrated by visual displays and awards events. Literacy, numeracy and other key skills are successfully integrated into the curriculum.

69. The Aim Higher programme is well managed and makes good creative use of available resources. It contributes well to the raising of awareness and aspirations and improving the achievement of young people in Lincolnshire. Peer mentoring and summer schools focusing on areas of deprivation are good initiatives, but as yet have not led to a significant increase in the number of young people progressing to higher level qualifications.

70. Good progress has been made in increasing the number of care leavers in education, employment or training. Most young people have appropriate pathway plans to which they have fully contributed. A contractual agreement with NCH for their personal and welfare support works well, but the contract does not ensure this service is available for all care leavers. The range of accommodation available to young people leaving care is improving, but choice in terms of type and location is still insufficient to meet individual need, with some young people having to move to a new area to find appropriate accommodation.

71. Housing and accommodation support available for most young people in Lincolnshire is good, although resources and suitable accommodation for vulnerable young people with complex support needs are insufficient in some areas of the county. Connexions personal advisors provide good support to young people at risk of homelessness and link well with voluntary bodies providing housing support. Supporting People housing information is clear and accurate. Young mothers and families in temporary accommodation benefit from flexible support arrangements. The partnership work between the voluntary and statutory agencies and local councils is satisfactory and developing, with some good educational theatre and follow up work taking place in schools to make young people aware of the realities of homelessness. Information sharing between other agencies and housing providers is sometimes poor, resulting in accommodation providers not having sufficiently detailed information to enable them to fully meet the needs of young people with complex support requirements. Emergency housing in some areas is insufficient or non-existent, which can mean that young people are rehoused in other parts of the county.

72. The opportunities for young people with learning difficulties and/or disabilities to progress from Key Stage 4 into further education are now good. The collaborative work between special schools, colleges and training providers is increasing the range available and good use is made of the European Social Fund to provide programmes for young people who are not ready for Entry to Employment. Connexions personal advisors provide highly effective support for families and young people with learning difficulties and/or disabilities during the transition to adulthood. However, some young people with learning difficulties, particularly those with communication difficulties, are poorly prepared for their transition reviews. There is insufficient transition planning to support individuals with learning difficulties and/or disabilities, particularly those with complex needs, into employment and individual activity programmes. A specific dedicated team for 14 to 25 year olds is being set up to improve services for this age group, particularly in terms of geographical location of services and cost of transport.

73. The Children's Fund supports a wide range of small community regeneration activities. Children and young people, as well as community group representatives, are consulted about them. Despite some local good practice, there is no strategic approach to involve young people in community regeneration.

74. A well conceived strategy is in place to improve adult vocational and personal development opportunities using the 14 Lincolnshire market towns as focal points. Good information about learning opportunities is provided, including returning to work or obtaining new skills, benefit entitlements and other sources of advice and guidance. Holiday activities for children and young people are imaginative and very well attended, providing good support for working parents and others. Limited affordable daycare is available for those in the greatest need. The Family Welfare Association provides valuable practical

and successful support for families in greatest need in the most disadvantaged areas of the county, although uncertainty over future funding is preventing new cases being taken on. There are insufficient English language classes to meet the needs of some communities. An effective initiative in Boston, supported by the multi cultural development team, is increasing the number of Portuguese speaking child minders. This develops useful links with the local community and increases the self-confidence of participants. This team also holds well attended advice sessions, and gives useful basic information technology training to people from Black and minority ethnic communities, but its size is too small to meet the need across the area.

Service management

75. **The management of services for children and young people is adequate.** The ambition of the council and its partners for children and young people in the area is adequate. Portfolio holders for children and young people are driving service development and improvement. The CYPSP has shared and challenging ambitions for children and young people. There has been clear leadership in supporting improvements in health. Ambitions detailed in the Sustainable Communities Plan and the emerging Local Area Agreement are complemented by those in the Children and Young People's Plan 2006/07 (CYPP). Engagement with the children's agenda is more limited amongst non-executive councillors and other stakeholders. The area's ambitions do not sufficiently address diversity and equality.

76. Consultation and needs analysis have informed the ambitions for children and young people but have not engaged all groups. Consultation has actively involved children and young people, but little work was done to engage with those from the increasingly diverse communities of Lincolnshire. Needs analysis underpins the ambitions but the approach is not systematic and knowledge of migrant and transient populations is inadequate.

77. Prioritisation is adequate. Priorities for the development of children's services are clearly linked to the delivery of the Every Child Matters agenda. Priorities for children and young people are appropriately identified through corporate objectives and service level objectives and associated targets for improvement. These are effectively underpinned by corporate strategic developments such as the strategy for school improvement. However, many strategies and policies are new and have not yet impacted on service users. The CYPP appropriately emphasises the importance of meeting the needs of children and young people from Black and minority ethnic communities.

78. Operational plans that underpin the delivery of children's services vary in quality. In contrast to the first CYPP, the actions in the second focus primarily on outcomes for children and young people as opposed to the development of policies and procedures. The new plan also makes better use of quantitative targets and milestones. Business plans (2006/07) are incomplete for most areas of children's services. Most plans are not costed. The track record of the council

and partners in delivering better outcomes for children and young people is mixed. Increasingly, resources are being appropriately allocated to deliver improvements in priority areas such as foster care and new schools for children with educational and behavioural difficulties.

79. The council is taking effective action to deal with staff shortages at all levels. A good quality workforce strategy is in place, which enables the council to prioritise the recruitment, retention and development of staff. A new appraisal system to identify staff development needs is being implemented effectively. Effective action has been taken to reduce high levels of sickness absence. Recruitment and retention in shortage areas have been improved through an in-house training programme for future school leaders in primary schools, and sponsorship of places on social work courses. However, shortages of staff in key areas remain and this results in differential access to services across the county, with residents in the Eastern coastal strip being particularly poorly served for access to community nurses and dentists. The council is working closely with its health partners to develop creative solutions to improve capacity.

80. The council demonstrates a strong commitment to partnership working. The CYPSP and LSCB are effective partnerships. Plans are in place to develop local integrated services overseen by local children's partnership boards. District councils are demonstrating active engagement with, and commitment to, children's services.

81. The council has taken effective action to reduce high cost areas, such as out of county placements and high school transport costs. However, there has been slow progress in tackling falling rolls in primary schools. Despite the council's commitment to prioritising preventative measures, it spends less than comparators on family support. Joint commissioning arrangements are at an early stage of development. A multi-agency group chaired by a voluntary agency representative is working on developing a commissioning strategy.

82. The council and its partners adequately manage the performance of their services. Performance monitoring is adequate and improving. Strategic partners are actively engaged in monitoring progress against the broad targets in the first CYPP. Members and managers take a robust approach to reviewing performance reports, where areas of underperformance are clearly highlighted. However, the scrutiny function is having limited impact, and while the Policy Development Group effectively challenges new policies and their implementation, its advisory role reduces its impact. New performance management systems are being developed but have yet to be embedded or demonstrate impact. Current reports contain well presented and robust data, with local performance compared to benchmarking data and reported alongside financial information. However, analysis of the reasons for under performance are not consistently reflective or comprehensive. Action plans frequently do not include outcome related quantitative milestones and hard targets to enable effective evaluation of performance. The school improvement service is

effectively improving performance in schools. Adequate systems are in place to monitor and handle complaints relating to the safeguarding of children and young people.

83. The self assessment demonstrates self awareness, and although some outcomes balanced description and context with critical analysis, others lacked sufficient rigour to identify where services were under performing. For example, it did not identify delays in the allocation of children in need and in completing risk assessments. However, the council's scored judgements with respect to its current performance were accurate with the exception of staying safe which it had judged as good.

84. The capacity to improve further is good. The council and its key partners have a clear shared vision for children and young people which is driving services forward. There is a clear understanding of the challenges and barriers to service improvement for children and young people, particularly those who are part of transient and migrant populations. The second CYPP prioritises this area for action. Resources are being increasingly refocused on the priority areas for children and young people. The council has effectively addressed key shortage areas in both education and children's social care. Partnership working is an emerging strength and is already working effectively to deliver good outcomes across some areas. There is a robust corporate performance framework.

Annex: The children and young people's section of the corporate assessment report

1. The council's performance in this area is adequate. Overall, outcomes for children are adequate. Two services are good and achieve good outcomes. Children and young people are generally healthy and most appear safe. The majority of children make good progress in school and achieve well. Children and young people most at risk are well protected through good inter-agency working. However, there are delays in completing risk assessments and in putting support services in place in some cases. The Youth service is performing well. Young people involved in, or at risk of, offending are effectively supported by the youth offending service.

2. The management of services for children and young people is adequate. There are shared, challenging ambitions for children's services but these do not reflect the needs of Black and minority ethnic groups. Priorities are clear and appropriate. Medium term plans have an improved focus on outcomes for children and young people but are not yet costed. Progress in delivering planned improvements for children and young people is mixed.

3. Capacity to deliver services for children and young people and achieve value for money is adequate. Management and political leadership are adequate and improving. Portfolio holders for children and young people are driving service development and improvement. Effective action has been taken to address staff shortages within the council's children's services, but differential access to services remains across the county. There is a strong commitment to partnership working. There is a lack of leadership with respect to equality and diversity across the area. Members and managers regularly review performance, but performance systems are new and not embedded.

4. The capacity to improve further is good. There is a clear understanding of the challenges and barriers to service improvement for children and young people, particularly those who are part of transient and migrant populations. The current CYPP prioritises this area for action. Resources are increasingly being refocused on the priority areas. Effective action to improve capacity is being taken within the council's children's services, and partners are working closely together to find solutions to capacity problems in health services. Partnership working is an emerging strength and is already working effectively to deliver good outcomes across some areas. There is a robust corporate performance framework.

5. The impact of all local services in securing the health of children and young people is adequate. Many are well supported to maintain good health by effective partnership working. Young children and their parents or carers generally receive good health support in areas served by Sure Start and children's centres. Schools provide a wide range of health education, and good progress is being made to encourage healthy eating and exercise. However,

access to a number of services is variable both across the area and for vulnerable groups, such as families from Black and minority ethnic communities and children with learning difficulties and/or disabilities. Health services have insufficient capacity to ensure equitable access across the area.

6. The impact of all local services in keeping children and young people safe is adequate. Children and young people who are most at risk are protected well through good inter-agency collaboration and professional practice. Adequate child protection processes are in place, with good management oversight and a prompt response to more urgent need. However, significant delays in the completion of some risk assessments and in putting support services in place leave these children without the protection and support they need. Services for looked after children and for most care leavers are good.

7. The impact of all local services in helping children and young people to enjoy their education and recreation and to achieve well is good. Educational standards are consistently above the national average. The school improvement service has taken a strong lead in raising performance. Support for children from travelling families is excellent. Behaviour is good and attendance satisfactory overall and continue to improve. However, the number of exclusions is too high.

8. The impact of all local services in helping children and young people to contribute to society is adequate, with some good features. Children and young people are well consulted and are encouraged to participate in making decisions on issues that affect their lives. However, their influence remains limited and they do not do not consistently receive feedback on the outcomes of major consultations and on the difference their views have made. Connexions and the youth service provide good support. Effective action is taken to prevent offending and to reduce the incidence of re-offending.

9. The impact of all local services in helping children and young people achieve economic well-being is good. Partnership work between the council, Connexions, the local Learning and Skills Council, schools, further education and training providers is having a positive impact. Rates of participation in pre and post 16 vocational learning are above the national average. Good initiatives are improving progression into employment, training and further education. Housing and accommodation support available for most young people in Lincolnshire is good. However, resources and suitable accommodation for some vulnerable young people with complex support needs are insufficient.