CHILDREN AND YOUNG PEOPLE'S SERVICES SCRUTINY PANEL

Venue: Town Hall, Moorgate   Date: Friday, 3 April 2009
        Street, Rotherham
                                  Time: 9.30 a.m.

A G E N D A

1. To determine if the following matters are to be considered under the categories suggested in accordance with the Local Government Act 1972

2. To determine any item which the Chairman is of the opinion should be considered as a matter of urgency

3. Apologies for Absence

4. Declarations of Interest

5. Questions from the press and public

6. Matters Referred from the Youth Cabinet

7. Communications

    FOR DISCUSSION

8. Child and Adolescent Mental Health Services (CAMHS) - Strategy Developments July 2008 to March 2009 (report attached) (Pages 1 - 3)

9. Alcohol and Substance Misuse Strategy - Update and Key Focus Areas (report attached) (Pages 4 - 23)

10. Autistic Spectrum Disorder (report attached) (Pages 24 - 31)

11. Are we there yet? Audit Commission study of Children's Trust Arrangements - Update (report attached) (Pages 32 - 55)

12. Scrutiny Review - Support for Newly Arrived Children in Schools (report attached) (Pages 56 - 85)

FOR MONITORING

13. Children and Young People's Services - Forward Plan March to June 2009 (copy attached) (Pages 86 - 91)

MINUTES

14. Minutes of the previous meeting of the Children and Young People's Scrutiny Panel held on 6th March, 2009 (copy attached) (Pages 92 - 98)

15. Minutes of a meeting of the Children's Board held on 18th February 2009 (copy attached) (Pages 99 - 110)

16. Minutes of meetings of the Performance and Scrutiny Overview Committee held on 27th February 2009 and on 13th March 2009 (copies attached) (Pages 111 - 125)

Date of Next Meeting:-
Friday, 5 June 2009

Membership:-
Chairman – Councillor The Mayor (Councillor G. A. Russell)
Vice-Chairman – Councillor Burton
Councillors:- Ali, Currie, Dodson, Donaldson, Fenoughty, Hughes, Kaye, License, Sharp and Sims

Co-optees:-

J. Blanch-Nicholson, Ms. T. Guest,
M. Hall (Statutory Co-optee), Father A. Hayne,
C. Purvis and P. Wade.

ROTHERHAM BOROUGH COUNCIL

1	Meeting:	Children and Young People's Scrutiny Panel
2	Date:	Friday 3rd April 2009
3	Title:	Update on Child and Adolescent Mental Health Services (CAMHS) Strategy Developments July 2008 – March 2009
4	Directorate:	(NHS Rotherham)

5 Summary

The information covered within this report gives the Children and Young People's Scrutiny Panel a summary of the developments and investments made across CAMHS provision over the last twelve months, in line with the 2008 – 2011 CAMHS Strategy.

6 Recommendations

Members acknowledge the developments being undertaken locally within Rotherham CAMHS and agree with the continued work programme for future development.

7 Background

In February 2008 the Children and Young Peoples Scrutiny Panel were consulted on the 2008 – 2011 CAMHS Strategy, members agreed with the identified priorities and the CAMHS strategy gained full approval in June 2008. The ten key priorities for development within the strategy are highlighted below:

1) Increase Capability and Capacity at Tiers 1 to 3 and develop methods of early intervention and prevention.
2) Increase access across Tiers 1 to 4.
3) Ensure cohesive services and ease of access between services.
4) Ensure the needs of vulnerable and disadvantaged young people are being addressed.
5) Ensure the needs of adolescents and young people up to the age of 18 are being addressed.
6) Ensuring that all staff are appropriately trained.
7) Ensuring the engagement of Users and Carers.
8) Ensuring service delivery accommodation is 'fit for purpose'.
9) Ensure CAMHS services engage and support services with regard to anti – bullying.
10) Ensure the transition between CHAMS and Adult services is seamless.

8 Developments over the last twelve months

Over the last twelve months substantial joint NHS Rotherham, RMBC investment (£428 000 in total (£325 000 NHS Rotherham £103 000 RMBC) has been made into local CAMHS provision across all Tiers of service in an attempt to meet some key priority areas highlighted within the strategy, these include:

1) Investment into Rotherham MIND to deliver a range of training opportunities to Tier 1 workers (School Staff, Social Workers, Health Staff) in order to increase capacity of frontline workers with regard to dealing with a range of mental health related problems. (Total investment £50 000 / year for 3 Years)
2) Increasing the capacity of the Single Point of Access team for CAMHS to ensure that children and young people are offered and if they accept receive an initial assessment within ten working days of referral. (Total investment £50 000 recurrent)
3) Investment within the Tier 3 Specialist Support service to extend the service to see all young people up to the age of 18, enhance transition and reduce waiting times for access from receiving referral from the Single Point of Access team (Total Investment £160 000 recurrent)
4) Continuation of the Praise Pod Project for two years to be delivered across a further 6 school cluster areas (Total Investment £50 000 / year for 2 years))
5) Investment within the Specialist Learning Disability Mental Health Support Service to deliver further interventions and have the capacity to undertake specialist assessment in a timely manner. (Total Investment £40 000 recurrent)
6) Development of Looked After Children's Mental Health Support Team (£78 000)

As well as the substantial financial investment taking place into this area of provision, the acknowledgement through the CAMHS partnership group that there is a continued need for all services involved in delivering CAMHS to improve joint working has lead to the implementation of six working groups all focusing on different areas of CAMHS delivery. The groups are charged with delivering improvement across each area of provision over the next 18 months and are accountable to the CAMHS Partnership group.

1) Development of an improved model of CAMHS Service Delivery
2) Establish a CAMHS Workforce Strategy
3) Improve Service User Consultation and Engagement
4) Develop fit for purpose Accommodation
5) Enhance Transition to adult services
6) Improve Communication in relation to what CAMHS is and ensuring that it is every bodies business

9. Continued Developments for 2009/10

It is the intention to continue the work of the CAMHS sub groups throughout 2009/10. Further investment will need to be made across CAMHS in 2009/10 in order to meet the requirements of the CAMHS strategy, proposed 2009/10 developments include:

1) The identification and development of a CAMHS specific building to allow for the co-location of all CAMHS commissioned services.
2) Investment into Tier 2 CAMHS services to ensure that we can offer support to Tier 1 workers across all locality areas, deliver training and interventions to Children and Young people at a low level, to ensure where possible early intervention and prevention takes place.
3) Continued investment into Specialist Learning Disability Services to meet the continued need of this group of Children and Young People.
4) Investment into regionally commissioned Tier 4 inpatient facilities to ensure fit for purpose services are in place.
5) The introduction of using outcome measurement tools across core CAMHS services.

10   Risks and Uncertainties

- Additional funding that may be required during 2009/10 cannot be agreed by partners to the strategy

- Appropriate staff cannot be retained or recruited as a result of service redesign

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ROTHERHAM BOROUGH COUNCIL

1	Meeting:	Children and Young People's Scrutiny Panel
2	Date:	Friday 3rd April 2009
3	Title:	Update on Alcohol and Substance Misuse strategy and key focus areas
4	Directorate:	Children and Young People's Services

5   **Summary**

This report focuses on the key findings from the recently undertaken alcohol and substance misuse needs assessment, how services are currently delivered and the key strategic priorities for 2009/10. These key priorities are fully outlined in the attached Young People's Substance Misuse Treatment Plan.

6   **Recommendations**

Members consider the priorities and acknowledge that the strategy reflects national and local strategic direction in terms of children and young people's services.

7   **Alcohol and Substance Misuse Strategy Proposal and Details**

Overall direction and purpose of the strategy

In Rotherham, we are committed to ensuring that we are delivering better outcomes for all children and young people. Like other children and young people, specialist treatment service users should all be on the path to success and achieving the outcomes set out in PSA 14, Every Child Matters and our local Children and Young People's Plan 2007 – 2010. Improving substance misuse services is central to addressing the needs of vulnerable children and young people.

Substance misuse services in Rotherham comprise of Know the Score (KTS) and 1.5 WTE workers in the Youth Offending Service (YOS). The local strategy for meeting identified young people's substance misuse related need is intrinsically linked to the development of integrated Children & Young People's Services in Rotherham.

In line with Every Child Matters, substance misuse is a key element of Targeted Youth Support, which will bring about more effective and efficient targeted work with vulnerable groups and will re-emphasise the specialist role of substance misuse services and their primary treatment function.

In Rotherham, Targeted Youth Support is being delivered through the newly established Early Intervention Teams, which are operating in each of the 7 locality areas. As well as a specialist substance misuse worker, the Teams include a Youth Officer and Senior Worker, a Targeted Connexions PA, Youth Intervention Workers and a Young Person's Police Officer.

The Early Intervention Teams became operational on 1 January 2009 and the component services are currently being co-located within their particular localities. A referral process has been established and work is currently being undertaken to enable the substance misuse service to take referrals via the process, with them only taking primary and self referrals, where there is no other agency involvement.

The profile of young people accessing treatment and changing trends

The number of young people in treatment in Rotherham has been steadily increasing: there were 191 individuals accessing treatment in 2005/06, 219 in 2006/07 and in 2007/08, there were 238 young people in treatment against a local target of target of 126, with 96% of young people being catered for in the young people's service.

Young offenders accounted for nearly two thirds (65%) of clients in treatment. This is due to service configuration in Rotherham i.e. the Youth Offending Service (YOS) Substance Misuse Workers both screen and undertake the subsequent treatment interventions with young offenders, which has had a positive effect in terms of the engagement of this group of young people.

Around 0.8% of all 16 – 19 year olds in Rotherham were in substance misuse treatment at some point during the year: the highest proportions of clients (126) were in this age range. There were 7 clients under the age of 13 and 106 between the ages of 13 and 16.

The proportion of under 16 year olds in treatment continued to increase in 2007/08. In KTS this figure rose from 28 in 2005/06 to 32 in 2006/07 and to 42 in 2007/08. With regard to YOS, the figure rose from 43 in 2005/06 to 52 in 2006/07 and to 71 in 2007/08.

There are an increasing number of females in treatment. There is a shift from the position in 2006/07, with Rotherham YOS now having an increased number of females in treatment (70:30 compared to 79:21 in 2006/07). The change in KTS is more profound, with the profile reversing to show that there are now slightly more females in treatment (49:51 compared to 60:40 in 2006/07).

Slightly higher proportion of BME individuals in treatment than in adult substance misuse services: In KTS, 94% were White British and 6% were Asian or Asian British, and in YOS 99% were White British and 1% Asian or Asian British. The Rotherham BME population average is 7.5%

Cannabis and Alcohol use are predominant: The majority of clients in treatment were either primary Cannabis or Alcohol users. In terms of

secondary substance, the majority of clients also use Alcohol or Cannabis. There was a difference in this for the two treatment agencies with KTS attracting problem substance users with a broader profile of substances i.e. YOS had a primary substance profile of 80% alcohol and 20% cannabis, whereas KTS had 44% alcohol, 42% cannabis and the remainder including 6% opiates, 3% amphetamines, 1% crack, 3% ecstasy and 1% solvents.

The breakdowns of presenting substances do not greatly differ from 2006/07, with Rotherham YOS having the same ratio of 80% alcohol and 20% cannabis. With regard to KTS, there was a small increase in the number presenting with alcohol issues (from 38% to 44%), a small decrease in Cannabis (from 46% to 42%) and a slight increase in opiates (from 4% to 6%).

How the alcohol and substance misuse treatment system is functioning

Whilst the treatment system continues to meet its targets and is judged to be performing well, the needs assessment process and in particular a treatment mapping exercise, has allowed for a more comprehensive look at how the treatment system is functioning.

The key findings from the exercise are as follows:

Referrals into treatment

There are referrals from a wide range of agencies; however, referrals from the key agencies identified by the NTA (Children & Families, Looked After Children and Education) are relatively low. A key performance target in 2009/10 will be to have at least 20% of young people referred from these sources (currently 14%).

The issue of low referrals from these sources is partly due to the inconsistent targeting of young people involved with these agencies and the lack of a consistent screening/assessment process for referral.

Meeting the needs of the drug & alcohol using population - young people accessing treatment

In terms of the treatment profile, new referrals are increasing, young offenders account for 66% of clients in treatment, 93% of those discharged from treatment completed successfully (although this masked the figure that only 54% of those within Know the Score Treatment were discharged successfully), cannabis and alcohol use are predominant and there are more males than females. In addition, 6% of young people in Know the Score treatment were from a Pakistani background, which was comparable with the Rotherham BME average.

The majority of young people within YOS treatment leave through a planned discharge once their care plan is completed. In 2007/08 this was not the case within KTS, with over 50% of young people leaving through an unplanned discharge. On investigation, this was largely due to problems in the follow-up of young people who were at the stage of treatment completion.

This problem was rectified in June 2007, through workers being more pro-active in treatment sessions and the KTS planned discharge level reached well over 80%, which equates to Green Status against performance indicators. However, this figure dipped in the last quarter of 2007/08. and further work was undertaken to reduce the attrition rate.

The majority of young people were involved in psychosocial interventions and the majority were in treatment for relatively short term interventions.

A third of the current Know the Score caseload consists of young people with severe and/or complex needs and in some cases workers from Know the Score are undertaking the equivalent of a lead professional role in regard to the management of serious child protection issues. About one third to one half of the time spent in relation to the young person is actually spent in contact with parents and others involved in their care.

<u>Meeting the needs of the drug & alcohol using population - young people referred on</u>

Although there was a combined high planned discharge rate from both Know the Score and Rotherham Youth Offending Service (over 90%), there are no recordings of referrals on to other services.

An audit of Know the Score has identified that in a number of instances, they are experiencing difficulties in the involvement and referral on to other services.

Likely demand for specialist substance misuse treatment interventions for young people.

With regard to the likely demand for specific treatment interventions, these are summarised below:

<u>Psychosocial Interventions</u>

It is anticipated that through the Early Intervention Teams identifying and working with vulnerable young people, and there being stronger links with Safer Neighbourhood Teams, additional demand will be generated for specialist substance misuse interventions. In particular, an increase in alcohol related referrals and demand for psychosocial interventions.

Psychosocial interventions currently form the bulk of work undertaken by the specialist substance misuse service and whilst the service is not working at full capacity, their staffing resource only equates to a 0.5 WTE worker in each Early Intervention Team area. It is not easy to quantify the potential demand for psychosocial interventions, however, If the data from the needs assessment is applied, then there could be an increase in demand of around 30%.

The Treatment Plan recognises this issue through maximising the effectiveness of the substance misuse service, by maintaining their specialist

role and ensuring that early intervention work is undertaken by other component services of the Early Intervention Teams. In addition, mechanisms for gathering data on a locality basis will enable commissioners to identify and monitor hotspots. This will allow the movement of staffing resources as appropriate and to quantify the need for any additional staffing resource.

<u>Family Interventions</u>

At any one time, the substance misuse service currently supports and work with between 10 and 15 families of young people accessing treatment. It is clear that there is a need to increase the number and quality of family interventions being undertaken and to this end, work will be undertaken to ascertain the level of support to be undertaken by the substance misuse service, the necessary supervision around this work, and also to enhance the referral routes into intensive 1-1 family support.

<u>Specialist Harm Reduction Interventions</u>

Specialist harm reduction interventions are offered to all young people where appropriate. Given the fact that the presenting substance has consistently comprised of 60% alcohol and over 30% cannabis, it is not anticipated that there will be a significant increase in demand for this service. However, where specialist harm reduction interventions are offered, there is a low subsequent take up and an area of work in 2009/10 is to increase this figure.

<u>Pharmacological Interventions</u>

There remain a consistently small number of young people accessing a pharmacological intervention. Due to the presenting substance at the substance misuse service consistently comprising of 60% alcohol and over 30% cannabis, it is not anticipated that there will be a significant increase in demand for this service. The priority area of work in 2009/10 is to audit this and other interventions against clinical standards, to ensure that the quality of service is maintained.

<u>Residential Treatment Interventions</u>

Over the last 3 years, there have been between 2 and 3 young people being assessed for a residential treatment intervention. Whilst it is not anticipated that there will be an increase in this figure, work will be undertaken to ensure that there is a streamlined process in place to consider the funding of such placements.

Unmet Need - Prevalence and vulnerable groups

The 2008 Tell Us 3 survey provides evidence that the situation in Rotherham with regard to alcohol and drugs is not more severe than the national average. It also provides evidence that young people's perception of advice and information was generally more positive than the national average.

It should be noted however, that the Tell Us 3 survey identifies that the number of young people who felt that they had a problem with alcohol consumption has risen quite considerably in 2008, with 78 (20 in 2007) young people feeling that they needed help to stop drinking.

Locally collected survey data, provides evidence that alcohol is a substance the majority of year 10 pupils have tried with more females than males by Year 10 considering themselves to be a regular drinker. However young males may also have potential problems with over 15% of males in Year 10 stating they drink over 20 units a week (excess of the recommended units for adult males).

Excessive drinking raises service/treatment issues for agencies wider than substance treatment and education. Hospital admissions for A&E and Paediatrics record 94 alcohol related admission of children over a three-year period. These young people were predominantly in the 13-15 age group.

Key development areas in relation to alcohol and substance misuse

The needs assessment quite clearly highlights that the key areas for improvement are around increasing the number of referrals from children and family services and also onward referrals. The full implementation of the Early Intervention Team arrangements will lead to the improvement of the outcomes of young people in treatment, through bringing about a more holistic approach to these young people and in particular, through being worked with by a dedicated Targeted Connexions Worker, which will facilitate access to follow-on services, education, training and employment opportunities, and positive activities.

Improving the provision of family interventions is significant in relation to enhancing the impact of treatment. Current family interventions within the specialist substance misuse service are quite generic and there is no quality standard in place. One of the priorities in 2009/10 is to ensure that there is a clear remit in terms of what level of family interventions the substance misuse service undertakes, there is supervision in place (in line with clinical standards) and there is access to generic and intensive 1-1 family work provision in line with the Rotherham 4 tiered family support model.

A review of clinical governance and audit arrangements across the substance misuse system is due and a review in 2009/10 will ensure that any improvements are identified and implemented, and in so doing, ensuring that the best possible outcomes are achieved.

There have been a number of specific issues around the accurate recording of information onto the National Drug Treatment Management System (NDTMS) database. In particular, there has been under-reporting around care planning timescales and initial problems with inputting Treatment Outcome Profile (TOP) data. Whilst these issues have now been resolved, there is a need to monitor compliance and to make improvements where necessary.

The key priorities identified as part of the partnership strategy, the current needs assessment and of the desired treatment outcomes, are as follows:

Commissioning and System Management

1. Ensure that Young People's Substance Misuse Commissioning and Provision is aligned with the Children and Young People's Integration Agenda

2. Ensure that there is consistently accurate NDTMS reporting

3. Ensure that Substance Misuse commissioning and system management is co-terminus with the Early Intervention Team arrangements

4. Enhance Service User Involvement in line with the Young People's Service Standard, to ensure that Young People are fully involved in the Commissioning Cycle

Access to Treatment

5. Ensure that appropriate Agencies undertake Information, Advice and Guidance and early intervention work with Young People, to support the delivery of PSA 14 and to ensure that the substance misuse service maintains primary focus on specialist treatment

6. Ensure that over 20% of referrals are from the key referring agencies

7. Ensure that the KTS referral system is in line with the Early Intervention Team referral process

Treatment System Delivery

8. Through the establishment of the Early Intervention Teams, ensure that the ongoing responsibility of other statutory services in relation to the Young Person is strengthened

9. Ensure that the provision of Family Interventions is taken forward as part of the development of integrated children and young people's services and that easily accessible support is secured

10. Ensure that best practice clinical governance systems are in place across the Young People's specialist substance misuse delivery system

11. Ensure that the Young People's specialist substance misuse service workforce competencies are in line with the 2007 clinical guidelines

12. Ensure that the specialist substance misuse service continues to implement the 2007 clinical guidelines and gives full consideration to areas where it may need to improve workforce competencies

13. Ensure that there is an increased uptake of Harm Reduction Interventions

14. Ensure that there is appropriate support for young people presenting at Accident & Emergency where substance misuse was a factor

15. Formalise the process for considering Tier 4 Specialist placements

Leaving Specialist Treatment

16. Ensure that follow on services are tied into the Young Persons Care Plan and have a duty to provide ongoing support

17. Ensure that Substance Misuse Services are fully aware of the positive activities available in Rotherham under the 'Youth Offer' and that these are effectively communicated to Young People

8   **Finance**

In 2008/9 the overall funding available for young people's alcohol and substance misuse provision was £299,248, which primarily consisted of Government allocations via the Area Based Grant. Government Office has made it clear that there will be no uplift to this budget in 2009/10.

9   **Risks and Uncertainties**

With no inflationary uplift to alcohol and substance misuse monies in 2009/10, service providers are in effect operating within reduced budgets.

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Partnership Name: Rotherham

Part 2

Young people's specialist substance misuse treatment plan 2009/10 Planning grids

KEY:

KTS	Know the Score – Young People's Substance Misuse Service
YOS	Youth Offending Service
JLT	Rotherham Children and Young People's Joint Leadership Team
YPJCG	Rotherham Young People's Substance Misuse Joint Commissioning Group
SRP	Safer Rotherham Partnership
RADST	Rotherham Alcohol and Drug Strategy Team
SLA	Service Level Agreement
CAF	Common Assessment Framework
RMBC	Rotherham Metropolitan Borough Council
NHS R	NHS Rotherham (formally Rotherham PCT)

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Planning Grid 1: Commissioning and System Management

Identification of key priorities following needs assessment relating to commissioning and system management
▪ Whilst Young People's Substance Misuse Commissioning is now aligned with Children and Young People's Services, further work is required to ensure that Substance Misuse is an integral part of the new Children & Young People's Strategic Commissioning arrangements   ▪ The Needs Assessment identified the need to ensure that there is consistently accurate reporting under NDTMS   ▪ The Needs Assessment has highlighted the need for continued work to ensure that Substance Misuse is embedded within the Early Intervention Teams (Targeted Youth Support) arrangements   ▪ There is a need to resume Service User Involvement within KTS, through quarterly Service User Events and for the service to achieve Young People Friendly status

Objective 1
Ensure that Young People's Substance Misuse Commissioning and Provision is aligned with the Children and Young People's Integration Agenda

Delivery Plan:

Actions and Milestones	By When	By Whom
1 Revise YP Substance Misuse JCG Terms of Reference and associated documentation, to reflect relationship with the newly established C&YP Strategic Commissioning Group.	April 2009	YPSM Commissioner/ YPSM JCG
▪ Submit progress and performance reports to the C&YP Strategic Commissioning Group as appropriate	April 2009 onwards	YPSM Commissioner/ YPSM JCG
▪ Invite RDASH NHS Foundation Trust, as the specialist substance misuse provider organisation, onto the YPSM JCG	April 2009	YPSM Commissioner
2 Explore the possibility of DCSF providing commissioner training (mapped against NOS competencies) to the YP SM JCG, as part of its offer of support to Rotherham in Joint Commissioning.	May 2009	C&YPS Commissioning Team
▪ Training undertaken and consideration given to refresher/new member training	September 2009	
3 Provider Performance Monitoring Reports re-evaluated against NTA requirements and amended to reflect locality based working and in particular Early Intervention Team reporting.	June 2009	YPSM Commissioner/ YPSMJCG
▪ Providers submitting revised Performance Monitoring Reports	Quarterly	

Objective 2

Ensure that that there is consistently accurate NDTMS reporting

Actions and Milestones	By When	By Whom
1 Explore the accuracy of recording under NDTMS (particularly referral source and care planning) and TOP compliance.	September 2009	YPSM Commissioner/KTS/YOS
▪ Make changes where appropriate	September 2009	KTS/YOS

Objective 3

Ensure that Substance Misuse commissioning and system management is co-terminus with the Early Intervention Team arrangements

Delivery Plan:

Actions and Milestones	By When	By Whom
1 Provide substance misuse input into the development of a Targeted Youth Support Specification	October 2009	C&YPS Commissioning Team
▪ Joint Targeted Youth Support performance and outcome measures in place and monitored across Early Intervention Team services	November 2009	Director of Targeted Services
▪ YP SM JCG in receipt of quarterly Early Intervention Team performance reports, to greater understand how universal and targeted services are responding to substance misuse issues and the knock-on effect to KTS and YOS capacity	November 2009	YP SM JCG
2 Map out the KTS IT requirements in localities	April 2009	YPSM Commissioner
▪ Locality KTS workers able to access the RDASH Maracis care planning system at locality venues, allowing them to continue to meet their clinical and NDTMS needs	May 2009	KTS

Objective 4:
Enhance Service User Involvement in line with the Young People's Service Standard, to ensure that Young People are fully involved in the Commissioning Cycle

Actions and Milestones	By When	By Whom
1 Agree with KTS the frequency of Service User Events	April 2009	YPSM Commissioner/KTS
2 With input from Children and Young People's Services, agree overall approach to Service User Involvement.	July 2009	YPSM Commissioner

Expected Outcomes

- Young People's Substance Misuse Commissioning and provision is fully aligned with the Children & Young People's integration agenda

- The Young People's Substance Misuse Commissioning Group is directly accountable to the Children & Young People's Strategic Commissioning Group

- Young People's Substance Misuse Commissioning Group members are trained to NOS commissioner competency standards

- Provider performance monitoring reports fully reflect locality based working

- There is a Targeted Youth Support Specification in place, which provides a framework for joint working between Early Intervention Team services

- There are joint Early Intervention Team performance and outcome measures, which the YP Substance Misuse Commissioning Group consider on a quarterly basis in order to understand how universal and targeted services are responding to substance misuse and the impacts on KTS/YOS capacity

- The KTS Young People's Substance Misuse Service can access its RDASH Maracis care planning system at locality venues, enabling it to continue to meet its clinical and NDTMS needs

- There are regular KTS Service User Events, with ongoing input into the substance misuse commissioning process

- KTS achieves Young People Friendly status

Planning Grid 2: **Access to Treatment**

Identification of key priorities following Needs Assessment relating to access and engagement with Young People's Specialist Substance Misuse Treatment Services;
▪ The Needs Assessment has identified that due to the potentially substantial numbers and capacity of KTS, there is a need to ensure that appropriate agencies undertake early intervention work with Young People
▪ Increase the number of referrals from key Children & Families services to over and above the 20% target level
▪ Implement a system whereby KTS is largely receiving referrals through the Early Intervention Team referral process, which involves KTS working alongside other EIT services to provide a holistic package of support for the young person and their parent/carer. KTS is only taking primary and self-referrals where the Young Person is not already involved with any other Agency

Objective 1:
Ensure that appropriate Agencies undertake early intervention work with Young People

Delivery Plan:

Actions and Milestones	By When	By Whom
1 Map out substance misuse DANOS competency requirements for the Tier 1 and Tier 2 Children & Young People's workforce in Rotherham	April 2009	YPSM Commissioner
▪ Submit the competencies for inclusion in the Children & Young People's Workforce Development Strategy	April 2009	YPSM Commissioner
▪ Deliver training packages for Tier 1 and 2 staff in line with the NOS Competencies	July 2009 onwards	Children & Young People's Services
2 Undertake specific packages of training for the Early Intervention Teams, resulting in them having the necessary skills to undertake a substance misuse screen and to provide early intervention work around substance misuse	July 2009 onwards	KTS
3 KTS locality workers to undertake a specialist advisor role within the Early Intervention Teams, so as to ensure that these targeted services are receiving appropriate levels of advice and support	April 2009 onwards	KTS

Objective 2:
Ensure that over 20% of referrals are from the key referring agencies

Delivery Plan:

Actions and Milestones	By When	By Whom
1 KTS locality workers to continue focussing on the key vulnerable groups and building links with their associated referring agencies through reviewing Joint Protocols	April 2009 onwards	KTS/C&YP Services
2 Monitor the level of referrals from children and families services	April 2009 onwards	YPSM JCG
▪ If the establishment of the Early Intervention Teams does not result in increased referrals from these sources, undertake an analysis to determine the reasons	August 2009	YPSM JCG
▪ Action plan developed and in place	September 2009	YPSM JCG

Objective 3:
Ensure that the KTS referral system is in line with the Early Intervention Team referral process

Delivery Plan:

Actions and Milestones	By When	By Whom
1 Negotiate changes to KTS Service Level Agreement to outline that referrals will be via the Early Intervention Team referral process and that primary and self-referrals will only be taken where the young person is not involved with any other agencies.	April 2009	YPSM Commissioner
2 Publicise new KTS referral arrangements with partner agencies	April/May 2009	KTS

Expected Outcomes

- The Children & Young People's Workforce Development Strategy details the substance misuse NOS competency requirements for Tier 1 and Tier 2 staff

- Training and support on the screening and identification of substance misuse is available to all those in contact with young people

- The locality based Early Intervention Teams are skilled in undertaking a substance misuse screen and providing early intervention work around substance misuse

- KTS workers undertake a specialist advisor role, providing advice and support around substance misuse within the localities and in particular the Early Intervention Teams

- Over 20% of referrals into specialist treatment are from Children & Families services (as defined by the NTA)

- KTS receive referrals via the Early Intervention Team referral process and primary and self-referrals are only taken where the young person is not involved with other agencies

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Planning Grid 3:   Treatment System Delivery

Identification of key priorities following needs assessment relating delivery of Young People's Specialist Substance Misuse Treatment Services:
▪ The Needs Assessment highlighted that the role and responsibility of other statutory services in relation to Young People at KTS was not clear
▪ A gap that had been identified throughout the Needs Assessment was the provision of appropriate Family Interventions
▪ There is a need to review the approach taken with Harm Reduction Interventions, as although Harm Reduction Interventions were being offered, there was subsequently a significant number of refusals
▪ There is a need to review clinical governance systems against NTA standards
▪ There is a need to maintain the implementation of the 2007 clinical guidelines and to monitor progress
▪ The Needs Assessment highlighted the need to strengthen linkages with the A&E Department at Rotherham Foundation Trust
▪ Historically there have been very few Tier 4 specialist placements and the arrangements for considering such placements has been ad-hoc. There is a need formalise these arrangements

Delivery Plan:

Objective 1: **Through the establishment of the Early Intervention Teams, ensure that the ongoing responsibility of other statutory services in relation to the Young Person is strengthened**

Actions and Milestones	By When	By Whom
1 Through joint working within the Early Intervention Teams, young people in treatment have a co-ordinated package of support from both targeted and locality based services, with roles and responsibilities clearly defined	June 2009	KTS/Early Intervention Teams

Objective 2: **Ensure that the provision of Family Interventions is taken forward as part of the development of integrated children and young people's services and that easily accessible support is secured**

Actions and Milestones	By When	By Whom
1 Agree the level of family support to be provided by substance misuse workers and their supervision arrangements	June 2009	YPSM JCG
▪ KTS develop strong linkages with family support services in the localities and make referrals where appropriate	September 2009	KTS

Actions and Milestones	By When	By Whom
▪ Develop the case for having an intensive family support provision which meets the needs of young substance misusers and their families	September 2009	YPSM JCG
▪ Case submitted to JLT for consideration	September 2009	JLT

Objective 3:

Ensure that there is an increased uptake of Harm Reduction Interventions

Actions and Milestones	By When	By Whom
1 Explore with KTS and service users, the reasons for Harm Reduction Intervention refusals	November 2009	KTS/YPSM Commissioner
▪ Report considered by the YPSM JCG and, if required, decisions made around actions that need to be taken	December 2009	YPSM JCG

Objective 4:

Ensure that best practice clinical governance systems are in place across the Young People's specialist substance misuse delivery system

Actions and Milestones	By When	By Whom
2 Review the clinical governance and audit structures, against NTA Standards, in the substance misuse service	August 2009	KTS/YPSM Commissioner
▪ Report considered by the YPSM JCG and, if required, decisions made around actions that need to be taken	September 2009	YPSM JCG

Objective 5:

Ensure that the specialist substance misuse service continues to implement the 2007 clinical guidelines and gives full consideration to areas where it may need to improve workforce competencies

Actions and Milestones	By When	By Whom
1 Continue implementing the 2007 clinical guidelines within specialist substance misuse services	Ongoing	RDASH NHS Trust
▪ Where identified, improve workforce competencies in line with the 2007 clinical guidelines	September 2009	RDASH NHS Trust
▪ Progress monitored	Ongoing	YPSM JCG

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Objective 6:
Ensure that there is appropriate support for young people presenting at Accident & Emergency where substance misuse is a factor

Actions and Milestones	By When	By Whom
1 Implement the model whereby A&E refer young people to their school nurse when substance misuse was a presenting factor	May 2009	NHS Rotherham
2 School nurses, A&E and Ambulance staff receive appropriate training to assess young people, to give brief interventions and to refer on to KTS where a treatment intervention is required		KTS
3 Payment mechanism for re-imbursing the School Nursing Service in place	May 2009	NHS Rotherham

Objective 7:
Formalise the process for considering Tier 4 Specialist placements

Actions and Milestones	By When	By Whom
1 A Tier 4 substance misuse specialist placement case study considered at JLT and a process for agreeing joint funding is developed	June 2009	JLT
▪ Process agreed and implemented	July 2009	RMBC/NHS Rotherham

Expected Outcomes
▪ Young people in specialist treatment receive a co-ordinated package of support from both targeted and locality based services
▪ KTS undertake family interventions within a clear criteria and they refer on to locality services for the appropriate (and available) levels of family support
▪ There is an increased uptake of Harm Reduction Interventions
▪ The KTS clinical governance structures are audited in line with NTA guidance
▪ KTS working fully within the 2007 clinical guidelines
▪ When a young person presents at the A&E Department with substance misuse being a contributory factor, they are referred on to the School Nursing Service for assessment, an early intervention, or on to KTS for a treatment intervention
▪ There is a clear process in place for RMBC and NHS Rotherham to consider the funding of Tier 4 specialist residential treatment

Planning Grid 4:   Leaving Specialist Treatment

Identification of key priorities following Needs Assessment relating to Young People leaving Specialist Substance Misuse:

- The Needs Assessment identified that KTS had ongoing difficulties in engaging with follow on/wrap-around services. In addition, the treatment mapping exercise clearly showed that whilst there were a high number of planned discharges, there were no recorded referrals to other services

- In line with the development of integrated Children and Young People's Services, positive activities available in Rotherham will be publicised under the 'Youth Offer' which need to be effectively communicated to Young People

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Delivery Plan:

Objective 1:

Ensure that follow on services are tied into the Young Persons Care Plan and have a duty to provide ongoing support

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Actions and Milestones	By When	By Whom
1 Map out the referral pathways to follow-on services and identify blockages	July 2009	YPSM Commissioner/KTS
▪ Consider the blockages that have been identified and take action where required	September 2009	
2 Work with the Early Intervention Teams and in particular the Targeted Connexions Workers, to ensure that there is ongoing support	September 2009	KTS/Early Intervention Teams

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Objective 2:

Ensure that Substance Misuse Services are fully aware of the positive activities available in Rotherham under the 'Youth Offer' and that these are effectively communicated to Young People

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Actions and Milestones	By When	By Whom
1 Formulate process for Young People to be made aware of and access to opportunities available through positive activities	July 2009	Young People's Service/KTS
▪ Agree and implement process	October 2009	Young People's Service/KTS

Expected Outcomes

- As part of the Early Intervention Team arrangements, all young people accessing specialist treatment have ongoing support and advice from their locality Targeted Connexions Worker and as a matter of routine access follow-on services and positive activities.

Signed: **Date:**	**Chair of the Community Safety Partnership/Drug Action Team**
Signed: **Date:**	**Director of Children's Services**

Young people's specialist substance misuse treatment plan 2009/10

Agenda Item 10

ROTHERHAM BOROUGH COUNCIL – REPORT TO MEMBERS		

1.	Meeting:	Children and Young People's Services Scrutiny Panel
2.	Date:	Friday 3rd April, 2009
3.	Title:	Autistic Spectrum Disorder
4.	Directorate:	Children and Young People's Services

5.   Summary:

This paper describes the work of the Autism Spectrum Disorders (ASD) Strategy Group in Rotherham Children and Young People's Service. It reflects their commitment to:

- Recognise the complexity of the autism spectrum.

- Develop the services that work to help young people with ASD to gain support to remain within or close to their families and local community.

- Develop resource and provision to meet the needs of children and young people who experience ASD.

- Develop the understanding of 'Personalisation, Pupil Progress and mainstreaming'.

- Engage with families and children with ASD as <u>final determinates</u> of both quality and outcomes reflecting the CAA agenda.

- Develop monitoring and quality control mechanisms.

And subsequently raise the attainment of all Rotherham's children and young people.

6.   Recommendations:

That the paper be submitted for information to the Children and Young People's Scrutiny Panel on the 3rd April, 2009.

7.   Proposals and Details:

Rotherham Council in partnership with PCT/DASH & 3rd sector has made a vast difference to the children and young people who experience ASD. There has been a thoughtful and planned response taking into account the competing needs on the community response. A number of officers over the years have carefully planned the strategic and operational response to support children and young people who experience Autistic Spectrum Disorder. As we move into Phase IV or our work there is a need for greater analysis of impact and a focus on the key areas outlined in the future Action Planning detailed in this paper.

It is necessary to focus not in the development of new purpose built provision but in the process of confidence and capacity building in our schools and to support the families in our local community pre and post diagnosis. This requires the strategic management of resource within "Aiming High for Disabled Children", Parenting Strategy, Early Years and Childcare Partnership and the Dedicated Schools Grant. This is the brief of the Joint Leadership Team of the Children and Young People's Service and the membership of the ASD will continue to provide appropriate support and challenge to this function.

Introduction

Children and young people with Autistic Spectrum Disorder have impairments in social interaction, verbal and non-verbal communication and imagination, this is often labelled 'the triad of impairment'. These traits are often accompanied by a narrow range of interests, activities and behaviour patterns which are often pursued rigidly sometimes to a point of obsession.

In the seven decades since autism was categorised the results of research and clinical work have led to the broadening range of the autistic spectrum from the profound austerity of severe autism, to the subtle communication difficulties found in aspects of Asperger's Syndrome.

Often described as the invisible disability, autism is a complex lifelong developmental impairment; the range of autistic conditions is diverse and remains largely misunderstood. There has been some excellent work in Rotherham on the inclusion of children with ASD in their local mainstream school.

The Autism Strategy Group defines its work in four broad areas of activity:

- Services and Provision around ASD.
- Continued Professional Development.
- Diagnosis and Assessment Procedures.
- Involvement and Parents/Childs Voice and Influence.

The purpose of this work is to raise the attainment and improve life long experiences of children and young people with ASD. In order to do this effectively we must listen to the children and families and ensure their voice has influence on policy.

The Autism Strategy Group meets on a termly basis and receives information on previously commissioned work from each of the four major subgroups. This has progressed to a multi-agency strategy group in line with National Guidance on 'best practice.

The Autism Strategy Group was initially convened in order to lead the education authorities' response to the number of young people and children with a diagnosis of Autistic Spectrum Disorder. During the past 12 years there have been a number of initiatives managed by the ASD Strategy Group.

- **Phase I March 1997** – These recommendations were implemented from the 1995 review of Special Educational Needs.

- **Phase II September 2001** – These recommendations came out of an Autism Working Party.

- **Phase III February 2004** – These recommendations resulted out of the work from the ASD Strategy Group.

- **Phase IV January 2009** – Analysis of the work of the past twelve years and recommendations for future direction of travel as highlighted in section 9.

Appendix 1 shows the Terms of Reference for the Autism Spectrum Disorders Strategy Group and **Appendix 2** shows the Membership**.**

The increase in number of children and young people with the diagnosis of Autism Spectrum Disorder has been tracked for the last 12 years and is now moving to our post 16 phase, further education provision and Adult Service care. The implications of this progression need to be planned and delivered upon. **Appendix 3** shows this increase in diagnosis over time. This reflects a national trend, due in part to increased publicity about Autism – In Rotherham is undertaken at two centres. The Child Development Clinic for under 5's and Chatham House for post 5's.

8.   Finance:

Appendix 4

9.   Risks and Uncertainties:

There are a number of key areas that require our attention in this phase of continual service improvement;

- The Challenge of co-ordination. - The VISION, Leadership and co-ordination of all the activity supporting children and families with ASD requires closer attention than we are able to provide at the moment.

There are a number of key areas for service development;

- Support for parents / carers – pre and post diagnosis.
- Maintenance of confidence and trust at phase transition.

- Greater understanding of ASD and development of 'autism friendly schools'.
- Extension of services and short break, extended services.
- Continued refinement of assessment and diagnosis leading to improved intervention.

10.   Policy and Performance Agenda Implications:

There is a need to support the children, young people and their families around the disability of Autistic Spectrum Disorder. As a community we have to ensure that we continue to develop our strategic thinking and appropriate use of resources to this local demand. We must ensure that the work undertaken has critical value and impacts on our community; to this end we must continue to place Autism as a priority of the work of both the Children and Young People's Services and the delivery of an integrated CAMHS Strategy.

11.   Background Papers and Consultation:

This paper draws on the last twelve years work of the Autism Strategy Group and includes contributions from:

- The Yorkshire and Humberside Regional Partnership – ASD Group
- National Autism Plan for Children
- All Party Parliamentary Group on Autism – Robert Yuille 2007
- Make Schools Make Sense – National Autistic Society.

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Terms of Reference of the Autism Strategy Group

The Autism Strategy Group is to meet on a termly basis.

There is wide representation from Children and Young People's Service, Families, Voluntary Sector and the Primary Care Trust.

There are four sub-groups covering;

- o Continued Professional Development
- o Assessment and diagnosis
- o Review of Provision
- o Working in partnerships

The remit of the group is to monitor and steer developments around ASD and include this work as part of strategic planning.

The responsibilities include;

- o Strategic Planning of Need and Provision
- o Local referral Pathways
- o Local area training

In brief the remit of the group is to;

- o Plan and develop a Multi Agency Team to assess and identify children and Young People with ASD.
- o Develop Educational establishments to be ASD aware.
- o Monitor statistics, project trends and plan for deployment of resources.
- o Improve transition to Adult Services.

Appendix 2

Membership of the Autism Spectrum Disorders Strategy Group

Director of Inclusion, Voice and Influence
Parent Representatives
Operational Manager, Child Development Centre
Educational Psychology Service
Speech and Language Therapy
PCT/Clinical Psychologist, Specialist Support Team
Head of ASSENT
Service Leader, Autism Communications Team
Children's Disability Service
Schools Representatives
CAMHS Representatives
Principal Educational Psychologist / Strategy Manager – Inclusion
Representatives of National Autistic Society

Position as at 1st January, 2009

During the past twelve years the number of children and young people with a diagnosis of Autistic Spectrum Disorder has increased - (0 – 19) population.

Date	Pupils with ASD diagnosis	Pupils with ASD Diagnosis and Statement of Special Educational Need
May 1997	74	37
May 1999	90	90
May 2000	110	110
September 2001	147	147
January 2004	204	147
April 2007	352	204
January 2008	553	224
January 2009	831	244
	Figures as per Autism Communication Services	Figures as per ASSENT

Spend on ASD in 2008/2009

	Education	Pooled (SEN & SC)	Section 52	Totals
Ind & N/ Schools	£783,136.00	£56,455.00		£839,591.00
Additional Support Special	£39,437.03			£39,437.03
Additional Support Mainstream	£31,596.59			£31,596.59
SALT Salary	£32,945.00			£32,945.00
Ind. Case.		£15,093.00		£15,093.00
Other LA Maintained Schools	£7,750.00			£7,750.00
Exceptional Needs C & I Descriptor	£87,882.00			£87,882.00
Swinton ASD Unit			£201,991.00	£201,991.00
Kilnhurst Unit			£162,525.00	£162,525.00
ACT	£172,830.00			£172,830.00
Transport	£369,038.00			£369,038.00
Grant Funded Development Projects	£11,000.00			£11,000.00
Totals	**£1,535,614.62**	**£71,548.00**	**£364,516.00**	**£1,971,678.62**

Schools are also delegated SEN funding as part of their baseline budget to be used in supporting statemented and SA+ pupils.

Total notional and delegated April 2008: **£10,614,110.00**

Transport figure based on cost of transporting ASD pupils 5 days a week for 39 weeks. If there are non ASD pupils sharing the transport – the total cost is divided equally per pupil.

Agenda Item 11

ROTHERHAM BOROUGH COUNCIL – REPORT TO MEMBERS

1.	Meeting:	Children and Young People's Services Scrutiny Panel
2.	Date:	3rd April, 2009
3.	Title:	Are we there yet? Audit Commission study of Children's Trust Arrangements - Update
4.	Directorate:	Children and Young People's Services

5.   **Summary**

During 2008 the Council and NHS Rotherham commissioned a study to be conducted in Rotherham and undertaken by the Audit Commission. This was to assess our readiness for integration and the key Lines of enquiry used were those that the Audit Commission used earlier in 2008 when they conducted a National Study.

The report is now at Final Draft stage and the outcomes are encouraging, with a small number of areas which have been recommended for further action.

6.   **Recommendations**

- **That the Scrutiny Panel notes this report.**

7.   **Proposals and Details**

During 2008 the Council and NHS Rotherham commissioned a study to be conducted in Rotherham and undertaken by the Audit Commission. This was to assess our readiness for integration and the key Lines of enquiry used were those that the Audit Commission used earlier in 2008 when they conducted a National Study.

The report is now at Final Draft stage and the outcomes are encouraging, with a small number of areas which have been recommended for further action.

The finalisation has been halted at the Council's request until the results are known from the current review of Children and Young People's Services is concluded.

The main conclusions were:

- Governance arrangements are sound
- Preparation for integration has been good
- Commitment to improved outcomes is clear
- Hearts and Minds have been won
- Information sharing protocols are in place
- Locality plans are established
- Partners have applied caution
- Issues of capacity regarding performance due to APA 2008
- More work to be done on aligning and pooling budgets
- The overarching project plan need reviewing

A small number of recommendations have been made and these are contained in the report at Appendix 1.

- Identify the resources and processes required for the review and evaluation of the integration of children's services, at all levels of the DCSF model of children's trust arrangements.
- Ensure there is a continual focus on managing current performance during the programme of transformation
- Identify and secure the appropriate business and administrative support for each locality
- Identify and apportion the full costs for the operation of each locality base
- Clarify the financial management arrangements for each locality, in terms of how financial resources are to be committed, aligned and accounted for.
- Resurrect and maintain the overarching project plan for integration, in order to:

    -      aid the ongoing management of the change programme;

- build in key post-implementation activities relating to the review and evaluation of the change; and
- communicate progress to all stakeholders, including those not directly involved in project workstreams

8. **Finance**

There are no financial implications as a result of the Audit Commission report and carrying out the self assessment. The Children's Board will wish to consider the financial implications of any actions they decide are necessary, upon considering the findings of the report.

9. **Risks and Uncertainties**

Risks in Rotherham are considered to be low. We have continued to demonstrate that we are ahead of many other local authorities, in the development of children's trust arrangements. The report provides a timely opportunity to examine governance and resource management, over and above the key judgements assessed in the Annual Performance Assessment and it will be helpful to see this alongside the independent review being conducted by Children First..

A number of risk registers are used to monitor the key risks for the Children and Young People's Service, using the RisGen system.

10. **Policy and Performance Agenda Implications**

The implications of the outcomes are of significant importance to the Comprehensive Area Assessment for the Council, Children and Young People's Services and NHS Rotherham and the wider partnership.

11. **Background Papers and Consultation**

Audit Commission Report – Are we there yet?
Audit Commission Self Assessment Tool

Audit Commission documents can be found at: www.audit-commission.gov.uk

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Integrating services for children and young people

Rotherham **Primary Care Trust** & Rotherham M**etropolitan** B**orough** C**ouncil**

Audit 2008/09

January 2009

Contents

The Statement of Responsibilities of Auditors and Audited Bodies issued by the Audit Commission explains the respective responsibilities of auditors and of the audited body. Reports prepared by appointed auditors are addressed to non-executive directors/members or officers. They are prepared for the sole use of the audited body. Auditors accept no responsibility to:

- any director/member or officer in their individual capacity; or
- any third party.

Introduction

1   This report highlights the findings from the Audit Commission and KPMG LLP ('KPMG') review of the plans for the integration of children's services in Rotherham, and has been structured around the model for children's trust arrangements promoted by the Department for Children, Schools and Families (see figure 1, below).

2   The report is based on the early verbal feedback given to senior managers at both the Council and NHS Rotherham, and on the verbal presentations given to the Board of NHS Rotherham and the Children and Young People (CYP) Board.

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Figure 1   Children's trust arrangements

Department for Children, Schools and Families

Background

3   For around four years, NHS Rotherham and the Borough Council have been working with partners to put in place integrated services for children and young people in Rotherham. Ofsted's Annual Performance Assessment in 2007 commended the different agencies for working closely together to a common purpose, as embodied in the Children and Young People's Partnership Board. The Corporate Assessment in 2006, building on the work of the Joint Area Review (JAR), referred to the Council and its partners' ambitious vision and strategy for improving outcomes for children and young people set out in a single plan. It also described:

- robust supporting service and business plans;

- effective, thorough and accountable performance management procedures; and

- good budget monitoring, control and planning processes as the solid basis for realising ambitions.

4   However, the need to develop the commissioning strategy further was recognised, particularly in terms of the voluntary sector's contribution.

5   The JAR itself noted that the council and its partners were ambitious, worked well together and shared a common vision for improving the achievement and well-being of their children and young people. It also identified that Trust arrangements were well advanced and a children's board was well on track to being fully operational by the target date of 2008. NHS Rotherham and the Council have specific plans in place to begin delivering integrated services in localities in April 2009.

6   The review by the Audit Commission and KPMG was commissioned by NHS Rotherham and the Council, as they wished to ensure that progress as envisaged by the plans described above continues to be made, and that robust arrangements will be in place in localities by April 2009. They wished to review progress with establishing the necessary structures and team-working ethos at December 2008 as the foundation for further work on integration in localities by April.

7   The work focused on :

- progress with implementing plans for new arrangements for children and young people's services in Rotherham;

- the effectiveness of governance and commissioning arrangements in particular;

- potential barriers to further integrated working; and

- the extent to which aim of improving outcomes for children and young people are driving the purpose of changes being put in place

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Audit approach

8   The review was undertaken through:

- interviews with the Lead Member for Children's Services and senior managers from both NHS Rotherham and the Council;

- discussions with the Joint Leadership Team and with the Locality Management Team, and with children's services staff at the Maltby Joint Service Centre; and

- a review of documents relating to various aspects of the integration process.

9   The Council and NHS Rotherham requested that our review focused on the 'staying safe' outcome area.

10   We are grateful for the support we received from staff at both NHS Rotherham and the Council to enable this review to take place.

Summary and main conclusions

11 The preparations for integration are good overall, and all the key areas that will enable integrated working to become a reality are being actively considered. Partners have invested significant resource, energy and effort into these, but recognise that much remains to be done to ensure that arrangements are fit for purpose.

12 Partners have demonstrated appropriate caution in the development of the proposals, and are realistic about the challenge that the implementation of the new way of working represents. However, there is evident strength of leadership and determination to put in place changes that will have impact and that will be sustainable.

13 Improving outcomes for all children and young people is the clear driver for the development of integrated locality teams. There is a strong focus on 'staying safe' at all levels of children's trust arrangements and at all stages of the proposed service re-design. However, the tension between the necessary focus on child protection and the requirement to improve outcomes across the Every Child Matters agenda is a recognised challenge.

14 Whilst the desire to improve outcomes for children and young people over the longer term is very much in evidence, the capacity of partners to maintain performance alongside the significant efforts being put into this programme of transformation is being tested. In the 2008 Annual Performance Assessment, all grades (apart from the Making a Positive Contribution outcome, which remained at a 4) fell from their 2007 levels. The assessment does, however, recognise the potential for delivering sustained improvements in outcomes through Rotherham's children's trust arrangements. Even though the APA is an assessment of Council services, partners' contribution to all outcome areas is integral.

15 Developments for the integration of frontline delivery are extensive and thorough. Partners have been successful in winning the 'hearts and minds' of frontline staff, who are enthusiastic about the potential impact of integrated working. Key locality appointments have very largely been completed, and the necessary training and development of managers is underway. The acknowledged concerns around safe and consistent practice are being addressed in a concerted way through the provision of clinical support for locality teams and the development of appropriate processes and protocols. The capacity of business and administrative support for each locality remains a concern.

16 Sound information sharing protocols are in place, and frontline staff do not see this area as problematic. Their chief anxiety remains the incompatibility of partners' information systems - the Council and NHS Rotherham, together with RBT, are working hard to address this issue.

17 Locality plans are being developed based on a sound understanding of local need, and with good links to the Children and Young People's Plan and Area Plans. Joint Commissioning is at an early stage of development; and capacity issues have meant that the creation of a workforce strategy for children's services has been slower than expected - this strategy has a fundamental role to play in the development of integrated services, given the need to ensure appropriate skills, experience and capacity within each locality team.

18 The pooling and aligning of resources is under-developed, and has largely been confined to people resources. Financial resources have yet to be committed differently by partners, and the exact make-up of the budgets for each locality is not yet agreed, nor is the way in which expenditure will be accounted for by individual partners. Without a clear agreement as to what financial resources partners are to commit to localities, and how these commitments will be made, partners will be unable to judge the value for money these contributions represent.

19 The model of governance arrangements adopted in Rotherham provides an effective separation of responsibilities between the executive, strategic, and operational levels. Formal, documented elements of some of these arrangements have become out-of-date, but are being revised.. The roles of the various bodies within these arrangements, and the links between them, have enabled partners to work well together in the drive towards integrated services. Contractual arrangements between the Council and NHS Rotherham are being thoroughly considered, as is the framework for performance-managing the delivery of services.

20 Project planning is incomplete. There is no current overarching project plan in use to manage what is a major programme of change, and that can be used to inform stakeholders of the progress across the integration project. Also, whilst the need to properly review and evaluate the impact of the new arrangements is understood by partners, this has not yet been translated into a clear and resourced evaluation plan. However, NHS Rotherham and the Council are effectively managing the key elements of the integration project, and risk management processes provide appropriate focus on the key risk associated with the integration project. The absence of a project plan means that partner organisations are hampered in their ability to assess whether key milestones and measures of success are being achieved, including the delivery of better outcomes for children and young people and improved value for money.

…

Findings and recommendations

The focus on improving outcomes for children and young people

21 The aspiration to improve outcomes for children and young people is clearly the rationale for the proposed integration of services. This focus on outcomes is one of the five tests partners agreed would be applied to these proposals. By bringing together services from health, social care and education into seamless, locally accessible services, partners aim to:

- deliver world-class, locally accessible services that improve outcomes for all children and young people

- shift the balance of service delivery towards prevention and early intervention wherever possible

- create multi-disciplinary teams at every level within the structure, and

- deploy existing staff in a creative and productive way – that is, using existing resources differently to have the best possible impact.

22 There is a strong focus on improving 'Staying Safe' outcomes at all levels of the children's trust arrangements. However, partners recognise the tension that exists between the need to focus on high-profile child protection issues and the expectation that outcomes across the Every Child Matters agenda will be improved.

23 NHS Rotherham and the Council have demonstrated strong leadership is driving forward the plans for integration. They have shown appropriate caution and thoroughness in their consideration of the proposals, and at all stages have maintained a focus on how the proposals will lead to better outcomes. In particular, they have sought to ensure that the new arrangements will be safe for children and young people. The CYP Board has demonstrated a preparedness to develop arrangements that are sustainable in the long-term. For example, the original proposal for full integration from the outset was revised following extensive consultation with staff, and the notion of a 'stepped approach' was adopted - that is, an initial phase of locality team development with health staff as 'virtual' team members, leading to a second phase that would see unified management structures being established within locality teams.

24 Partners have a realistic understanding of the issues associated with this complex programme of change. They are not seeing this as a 'quick fix', and there is no underestimation of the challenge that these proposals represent for frontline staff. This is evident in the development of the support mechanisms mentioned later on in this report.

25 The need to properly review and evaluate the impact of this new style of service delivery is recognised, but this has not yet been translated into clearly identified resources and processes to enable this to happen.

26 Whilst the desire to improve outcomes for children and young people over the longer term is very much in evidence, the capacity of partners to maintain performance alongside the significant efforts being put into this programme of transformation is being tested. In the Annual Performance Assessment of services for children and young people in Rotherham Metropolitan Borough Council 2008, all grades (apart from the Making a Positive Contribution outcome, which remained at a 4) fell from their 2007 levels. The assessment does, however, refer to 'the establishment of the Children's Trust and the appointment of a new Director for Children's Services together with the redesigning of the service' as having 'the potential to bring about sustained improvements'. Even though the APA is an assessment of Council services, partners' contribution to outcomes is integral.

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Recommendation

R1 Identify the resources and processes required for the review and evaluation of the integration of children's services, at all levels of the DCSF model of children's trust arrangements. Areas that should be considered for review and evaluation include:
 	
• The improvement in outcomes for children and young people being enabled by integrated teams
 	
• Regarding frontline delivery:
  – The consistency and quality of professional practice
  – Workforce capacity and skills
  – How local needs are understood and responded to
  – The links between the integrated teams and GPs, hospitals, schools and children's centres
  – The way in which being integrated is enabling teams to think and act differently
 	
• Regarding processes:
  – Information sharing
  – Systems compatibility and access
  – Referral and assessment
  – Development of the integrated Safeguarding Unit
 	
• Regarding strategy:
  – The impact of Locality Plans
  – Whether joint commissioning is leading to better quality services and improved value for money
  – The extent to which partners' financial resources are being committed, and accounted for, differently to achieve better value for money
  – The full cost of integrated frontline services
  – The impact of the workforce development strategy
 	
• Regarding governance:
  – How performance is being managed
  – The impact of locality governance arrangements
  – The effectiveness of the high-level contract and accompanying SLAs

R2 Ensure there is a continual focus on managing current performance during the programme of transformation

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Integrated frontline delivery

27 Frontline staff are very positive about the impact that integrated teams can have, but are realistic about the challenges faced to fully embed this new way of working. During our focus group at Maltby Joint Service Centre, views expressed included:

- 'Thanks for taking this step'

- 'We all need to work hard (to make integration work) but the challenges are outweighed by the rewards of joint working'

- This is uncharted territory - so there's a need to give staff maximum clarity, and time to adjust'

- 'It feels safer for children and their families'

- 'It's a brave move by Rotherham'

28 The involvement of staff in the proposals for integration has been effective. There has been extensive and ongoing consultation with staff to explore issues connected with these proposals. Staff concerns about aspects such as clinical supervision have been addressed following the consultation that took place in 2007, and the plans for integration have been altered to include a stepped approach between April 2008 and January 2009.

29 Progress with establishing locality teams continues to be made. All Locality Manager positions were appointed to in March 2008. Four localities have been set up, with two others due to be established by April 2009, and the remaining one (at Aston) due by 2010. Some delays have been experienced as a result of IT problems.

30 The issue of consistent, and safe, practice across all the localities is being carefully considered and planned for. Clinical support is being provided to locality teams - a Healthcare Standards, Quality and Performance Team is in place, reporting to Director of Borough-wide Services within the new management structure. In addition, a Performance Manager has been appointed to support the focus on social care; and two court practice consultants have also been appointed to offer advice to all locality teams on court proceedings. With regard to referral and assessment processes, the aim is that uniformity of thresholds of need across all localities is to be achieved via the application of the Continuum of Need model and the continued application of the 'Safe and Well' Practice Guidance produced in 2006.

31 The effort being put in to develop policies and procedures to underpin standards of local practice is significant. A joint procedure for casework supervision has been developed by Health and Local Authority staff, and has been adopted by the Board of NHS Rotherham and the Joint Leadership Team - a training programme has been developed to roll this out to all multi-agency teams commencing November 2008. HR managers continue to work on protocols for the management of grievance, disciplinaries, and sickness and absence.

32 There is an appropriate focus on involving stakeholders in the localities, although the plans for this are at an early stage of development. There is an intention to establish Locality Partnership Forums (LPF) that will bring together all those people within the locality who are concerned with children and young people. The purpose of these LPFs will be to consider how borough-wide priorities should be translated into local action, as well as agreeing local priorities for children and young people. There are also plans to set up Locality Management Groups - these will be smaller groups made up of representatives from local agencies, whose role will be to monitor progress against the Children and Young People's Local Plan and to formally link with the Area Assembly. Frontline staff are to be involved in the ongoing development of local services via practitioners' forums - this is particularly welcome, given the intelligence these staff will gather about the impact of integration.

33 Training and development of locality teams is being undertaken in a planned and systematic way, with a particular focus on developing leadership and management skills. A 5-day development course for managers looking at models of supervision was undertaken in June and July 2008, via the University of Sheffield - this supported the development of the Joint Supervision Agreement. Locality Managers have undertaken a skills-gap audit for Team Managers and, in collaboration with training providers, a 14-day programme started in November 2008 to address the identified gaps. In addition, a number of Development Days for Team Managers, together with Locality Managers and Director of Locality Services, have been arranged for early in 2009. This work around training and development is seen by partners as especially important, given the varied backgrounds of those who have been appointed to management positions within localities.

34 Providing adequate administrative support for locality teams is proving a challenge that is being considered by the Council and NHS Rotherham, but one that has not yet been resolved. Sector-specific systems such as the Integrated Children's System (ICS) and the Electronic Social Care Record (ESCR) are impacting on administrative workloads, and the implementation of ContactPoint will place further demands on staff. Buildings-related issues associated with the new co-located sites are also proving a drain on these limited resources.

Recommendation
R3   Identify and secure the appropriate business and administrative support for each locality

Integrated processes

35 Significant effort continues to be placed on developing Information sharing arrangements, and the frontline staff we spoke to see no significant barriers in this

area - there is evident willingness among professionals to share information. The basis of these arrangements is a Joint Confidentiality Agreement, dating from 2001, and an Information Sharing Protocol, developed in 2006. These are supported by service level/staff guidance, for example for the community dental service, and children's centres. In addition, there are information sharing procedures that were produced by the Safeguarding Children Board in 2007, as well as the application of the NHS's Information Governance Toolkit.

36 There is good capacity within Children and Young People Service (CYPS) Information Governance team, which includes a jointly-funded post of Joint Agency Information Sharing Officer - a post that was actually established when Social Services existed as a separate department. The team also includes an Access-to-Records Officer (for the Council only). It is also involved, along with NHS Rotherham, in a project designed to improve information sharing and access to the various systems that are in place within different professional teams.

37 The main concern of staff is the current incompatibility of partners' systems and the difficulties that this will pose to integration at the frontline. The challenge represented by systems integration is widely recognised, and ICT issues are being actively addressed. Work has been going on at Maltby over last 12 months to enable the system to recognise NHS computers. This model is to be rolled out to the other localities, and will enable NHS Rotherham staff to bring their own equipment and support. A task group, comprising NHS Rotherham, the Council, and RBT staff, meets monthly to progress this area, and plans to make available in April a protocol regarding staff access to other agencies' systems.

38 The achievement of the key test of integration being cost neutral is under some pressure. For example, the running costs of 7 locality bases were not originally identified, as a number of teams had been located within Crinoline House - these include business support and administration costs being higher than anticipated. For 2008/09, the Children and Young Peoples Service's budget has absorbed these pressures, but it is unclear how these and other revenue costs associated with locality working will be formally apportioned by the Council and NHS Rotherham. The absence of clearly identified and apportioned costs for each locality base hinders partners' ability to judge the value for money being achieved by this way of working.

39 Good progress has been made with the development of an Integrated Safeguarding Unit, with the integration process being facilitated by the input of a Project Manager from NHS Rotherham. The operational and strategic aspects of safeguarding have now been separated into two work streams. Three Education posts have been transferred to the Operational Safeguarding Unit. The next stages for further integration are being considered and discussions with relevant Health staff have commenced.

Recommendation	
R4	Identify and apportion the full costs for the operation of each locality base

Integrated strategy

40 The development of Locality Plans is taking shape. Drafts of these plans for each locality are currently being developed, using the Wentworth Valley template, and are due to be completed early in 2009. They are being based on locality studies that were undertaken in each Area Assembly locality in 2007, but it is acknowledged that they will have to be updated following a new audit of need. The plans provide a sound link to the Children and Young People's Single Plan, and consequently, an appropriate focus on the issue of safeguarding. There are also good links between Locality Plans and the Area Plans - the priorities concerning children and young people from each Area Plan are being incorporated into the self-assessment and Action Planning sections of Locality Plans, for each Locality. Locality Managers recognise the need to develop a sense of ownership of these plans among key stakeholder groups such as headteachers and GPs.

41 Joint commissioning is at an early stage of development. A commissioning team is in place, which has an additional team member as a result of partnership working with NHS Rotherham, and a Joint Commissioning Framework was agreed by partners in June 2008. The commissioning team has participated in World Class Commissioning master classes hosted by colleagues from NHS Rotherham to develop skills, and increase joint working, in relation to local commissioning.

42 The role of locality teams in commissioning services has not yet been developed. However, the Joint Commissioning Framework does recognise the key role that locally commissioned services will have in contributing towards improved outcomes.

43 The pooling and aligning of resources is under-developed, and has largely been confined to people resources. Financial resources have yet to be committed differently by partners, and, whilst the principle of devolving budgets to localities for 2009/10 is agreed, the exact make-up of the budgets for each locality is not yet clear, nor is the way in which expenditure will be accounted for by individual partners. The issue of funding is one of a number of strands that is being worked on to underpin the contract between the Council and NHS Rotherham. Without a clear agreement as to what financial resources partners are to commit to localities, and how these commitments will be made, the funding of locality bases will remain unclear as will the value for money the bases represent.

44 The arrangements for capital and asset management are generally good. An accommodation strategy has been in place for 3 years, and the financing of the locality centres was agreed in 2007, with clear identification of the contributions to be made by

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both the Council and NHS Rotherham, which was agreed by both parties. However, signed agreements between RMBC and NHS Rotherham relating to the capital and ongoing revenue costs of these buildings are not evident, and it is unclear how actual ongoing revenue costs compare with what was anticipated.

45 The development of a workforce strategy for children's services has been slower than expected. Capacity problems have delayed this development. However, a draft strategy is being developed by partners, and a consultation process is planned for early in 2009. In addition, a key appointment has just been made to the post of Strategic Workforce Development Manager. This strategy has a fundamental role to play in the development of integrated services, given the need to ensure appropriate skills, experience and capacity within each locality team.

Recommendation
R5 Clarify the financial management arrangements for each locality, in terms of how financial resources are to be committed, aligned and accounted for.

Integrated governance

46 The model of governance arrangements adopted in Rotherham provides an effective separation of responsibilities between the executive (CYP Board), strategic (Children and Young People Partnership (CYP Partnership)), and the operational (Joint Leadership Team (JLT)). The various elements of these arrangements link well together, and enable the partnership to operate effectively. However, the formal arrangements, in terms of the original Terms of Reference (TOR) and membership for some of these elements, have become out-of-date, although this has not hampered the drive towards integration. Action has now been taken to update the TOR and membership lists for the CYP Board and CYP Partnership. Without up-to-date documents that record the formal arrangements for governance, there is a risk that these arrangements are not clearly understood and followed by partners should their representation on the various bodies change.

47 The CYP Board provides an effective link between the wider Children and Young People Partnership and the Local Strategic Partnership. The LSP's Chief Executive Officer Group includes 4 members of the CYP Board, and the LSP Board is well-represented by children's services. The LSP's theme groups have a clear focus on children and young people, and each of these groups includes representation from the JLT.

48 Links between the various elements of the governance arrangements are proving effective as a result of the role of key individuals. For example, the Strategic Director, Children and Young People's Services is not only part of the CYP Board, but also chairs the CYP Partnership and the Joint Leadership Team, and sits on the Council's Corporate Management Team. In addition, the Chief Executives of both the Council and NHS Rotherham are key members of the CYP Board.

49 Effective links exist between the Local Safeguarding Children Board (LSCB), the CYP Board and CYP Partnership. The LSCB has an independent Chair, whose annual report goes to the CYP Board. LSCB minutes go to the CYP Board and CYP Partnership, and the Safeguarding Board Manager meets with LMCS after each LSCB meeting.

50 The LSCB works effectively to champion continuous improvements in safeguarding in Rotherham, and its Chair plays an active role in this. For example, she has personally delivered safeguarding training to Locality Managers and Team Managers. The capacity of the LSCB has been strengthened in recognition of the work required of the Board. The Chair's input has been extended from 24 to 36 days per year. In addition, the duration of its quarterly meetings has been lengthened. There is recognition that further development regarding safeguarding practice is vital, particularly in ensuring consistency of practice across the 7 localities.

51 The development of a formal agreement between the Council and NHS Rotherham regarding the integration of services is being considered with due care. A high-level contract has been drafted and is currently being finalised. This is underpinned by a series of Service Level Agreements (SLAs) between the two organisations for the delivery of all community health services. Work is in hand to finalise these agreements, and there are some challenging discussions taking place between partners concerning, for instance, the measures by which delivery of the SLAs will be assessed.

52 The need to focus on performance at locality level is understood, and a comprehensive performance management framework is being developed - this includes the disaggregation of indicators and targets to locality level. The Locality Management Team devotes one of its regular meetings to performance issues. There is also a Performance Management Group within CYPS that meets monthly - this is attended by NHS Rotherham. The intention is that these meeting will review the progress against the SLAs once they are in place.

53 Capacity to manage performance is good and is being enhanced. A multi-agency Data Management Group has been formed to support the CYPS Performance Management Group, Joint Leadership Team, and the CYP Board by acting as the central group responsible for the co-ordination and completion of requests and queries for children's services data including associated data analysis.

54 Project management is incomplete. Although it existed originally, there is no current overarching project plan in use to manage what is a major programme of change, and that can be used to inform stakeholders of the progress across the integration project.

55 However, NHS Rotherham and the Council are actively and effectively managing the key elements of the integration project. An Integration Group, comprising senior managers from both organisations, meets regularly to project manage the changes, and regular updates are produced for the CYP Board that cover the core development areas of premises, workforce, contract, and policies and protocols for team working. Project groups are in place to manage each strand.

56 In addition, risk registers are in place and up-to-date for key risks associated with the integration of children's services. This includes the risk that the proposed model fails to deliver improved outcomes, as well as the risks associated with HR, finance, and statutory duties. The Council's risk management officer ensures that risk registers remain up to date and risks are assigned to individuals to be managed. Risks are kept high level to ensure that focus is maintained on the most significant risks.

57 The absence of an up-to-date project plan means that partner organisations are hampered in their ability to assess whether key milestones and measures of success are being achieved, including the delivery of better outcomes for children and young people and improved value for money.
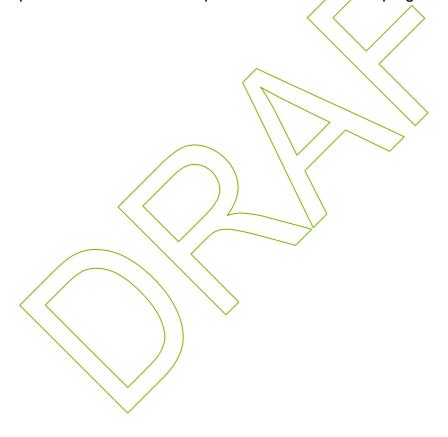

Recommendation

R6 Resurrect and maintain the overarching project plan for integration, in order to:

- aid the ongoing management of the change programme;
- build in key post-implementation activities relating to the review and evaluation of the change; and
- communicate progress to all stakeholders, including those not directly involved in project workstreams

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Next steps

58 In this report, we have considered the extent to which the preparations for the integration of frontline services are fit for purpose, and have made a number of recommendations for change. The report and action plan has been agreed with NHS Rotherham and the Council.

59 Subject to agreement with respective officers, we would propose to follow up on key report recommendations as part of the 2009/10 audit programme.

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Appendix 1 – Action Plan

Page no.	Recommendation	Priority 1 = Low 2 = Med 3 = High	Responsibility	Agreed	Comments	Date
11	R1 Identify the resources and processes required for the review and evaluation of the integration of children's services, at all levels of the DCSF model of children's trust arrangements.	3	Joyce Thacker & Andy Buck	Yes	Consider the findings from the independent review and feed these into the review and evaluation model.	May 2009 to Sept 2009
11	R2 Ensure there is a continual focus on managing current performance during the programme of transformation	3	Joyce Thacker & Julie Westwood	Yes	Ongoing performance management arrangements have been strengthened further.	Feb 2009
13	R3 Identify and secure the appropriate business and administrative support for each locality	3	Joyce Thacker & Pam Allen	Yes	Consider local authority resource and health resource for each locality	March 2009 to May 2009
14	R4 Identify and apportion the full costs for the operation of each locality base	2	Joyce Thacker, Andy Buck & Graham Sinclair	Yes	Consider post CYPS Review by Children First	June 2009

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Page no.		Recommendation	Priority 1 = Low 2 = Med 3 = High	Responsibility	Agreed	Comments	Date
15	R5	Clarify the financial management arrangements for each locality, in terms of how financial resources are to be committed, aligned and accounted for.	3	Joyce Thacker, Graham Sinclair & Andy Buck	Yes	Consider post CYPS Review by Children First	June 2009
17	R6	Resurrect and maintain the overarching project plan for integration, in order to: • aid the ongoing management of the change programme; • build in key post-implementation activities relating to the review and evaluation of the change; and • communicate progress to all stakeholders, including those not directly involved in project workstreams	3	Joyce Thacker & Julie Westwood	Yes	Review outstanding actions and develop a plan for the remaining implementation, review and evaluation and key workforce development activity. Communicate using Outcomes and Newsround for all staff in addition to more detailed report updates to key stakeholders via the CYP Board and Partnership.	May 2009 and monthly progress monitoring.

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Agenda Item 12

	ROTHERHAM BOROUGH COUNCIL – REPORT	

1.	**Meeting:**	**Children and Young People's Scrutiny Panel**
2.	**Date:**	**3 April 2009**
3.	**Title:**	**Scrutiny review – support for newly arrived children in schools**
4.	**Directorate:**	**Chief Executive's** **All wards**

5. **Summary**

The report sets out the findings and recommendations of the scrutiny review into support for newly arrived children in schools. The report is attached as Appendix 1.

6. **Recommendations**

That Members:

   a. **That members endorse the findings and recommendations of the report.**

   b. **That the report is forwarded to Performance and Scrutiny Overview Committee for approval, and future submission to Cabinet.**

   c. **That the response of Cabinet to the recommendations be fed back to this panel**

7.   Proposals and Details

7.1   The issue of how the Local Authority supports newly arrived children and young people in our schools was originally voiced at the Children and Young People's Scrutiny Panel in January 2008. Concerns were raised that some schools were facing additional pressures because of the recent numbers of new arrivals.

Specifically the review looked at:

- what is currently available in Rotherham schools to support newly arrived children and young people,
- examples of good practice locally and elsewhere
- how existing resources can be best utilised
- what measures should be taken in the long term to improve the Council and partners' responses and the support available to newly arrived children and young people

7.2   The recommendations from the review are detailed in Section 6 of the review and include:

- That the Council hosts a meeting with other local authorities and relevant bodies to highlight good practice and the challenges of supporting EU new arrivals, particularly in relation of attainment targets.

- That the EAL Strategy or 'Welcome Offer' is subject to regular evaluation (initially every six months).

- Acknowledging the difficulties with funding based on the 'census' day, explore the feasibility of introducing a flexible system of funding for schools experiencing greatest numbers of mobile pupils.

- Identify a strategic lead in Children and Young People's Services to link with other Council/partner bodies (housing, health etc) to ensure that there is effective inter-agency working.

- Revisit protocols to ensure that schools are able to link with locality teams and share information or concerns about children on a consistent and timely basis.

8.   Finance

A number of the review recommendations may have financial implications if adopted. This would require further exploration by the Corporate Management Team on the cost, risks and benefits of their implementation.

9.   Risks and Uncertainties

Migration into Rotherham offers many opportunities for the Borough in terms of economic, social and cultural development. However these benefits may not be realised without commitment and co-ordinated action at a local level to manage the integration of new migrant communities successfully. Failure to identify new migrant communities moving into Rotherham, carry out an assessment of their needs and potential impacts on local settled communities, coordinate service provision and resources and manage the integration of new migrants into local

communities could result in community tensions and inadequate service provision and resource allocation.

10.   Policy and Performance Agenda Implications

Developing a vision for the part migration plays in the Borough is crucial for the economic, social and cultural development of the Borough and to achieving the vision for Rotherham as set out in Rotherham Community Strategy. The Council's responsibilities to build stronger communities, have sound community cohesion knowledge, develop partnerships that make a positive difference and effectively engage with communities as part of decision taking is highly relevant to many aspects of Comprehensive Area Assessment (CAA). It is also directly relevant to the Council's legal race equality duties and to the fulfilment of other performance standards, for example, under OFSTED.

11.   Background Papers and Consultation

The report has been circulated to all agencies/individuals that participated in the review for their comments and to check for factual accuracy.

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Support for newly arrived children in schools

Review of the Children and Young People's Scrutiny Panel

March 2009

Rotherham
Metropolitan
Borough Council

CONTENTS

1.   EXECUTIVE SUMMARY

Concerns were raised at the Children and Young People's Scrutiny Panel that schools were facing additional pressures because of the recent numbers of new arrivals, most of whom were children of European Union (EU) migrant workers.

The review began its evidence gathering in June 2008, co-hosting a conference with an invited audience of educational professionals, partners, elected members and officers from Children and Young People's Services and other Local Authorities. Visits were organised in local schools and interviews took place over the summer and autumn. The Chair of the review group also participated in an international visit to Cluj-Napoca in Romania to look at educational provision for Roma children.

The review concluded that whilst there are pockets of good practice, there needs to be greater co-ordination of work across the Children and Young People's Services directorate, partners and schools. Although the review has a focus on those newly arrived from the Roma community, it should be emphasised that the lessons learnt could be applied to other groups settling within the Borough. Since inward and outward migration is set to continue (albeit the pace may decelerate with the economic downturn), the Scrutiny Panel felt it was timely to examine whether the measures to support newly arrived children were appropriate to ensure that they, along with settled children, reach their full potential.

The recommendations from the review are detailed in Section 6 of the review and include:

➢   That the Council hosts a meeting with other local authorities and relevant bodies to highlight good practice and the challenges of supporting EU new arrivals, particularly in relation of attainment targets.

➢   That the EAL Strategy or 'Welcome Offer' is subject to regular evaluation (initially every six months).

➢   Consideration should be given at a strategic level to the allocation policy to ensure that we avoid placing disproportionate pressure on those schools with existing high numbers of EAL (English as an Additional Language) learners.

➢   Acknowledging the difficulties with funding based on the 'census' day, explore the feasibility of introducing a flexible system of funding for schools experiencing greatest numbers of mobile pupils.

➢   Identify a strategic lead in Children and Young People's Services to link with other Council/partner bodies (housing, health etc) to ensure that there is effective inter-agency working.

➢   Evaluate whether existing Young People's Service provision is meeting the current needs of newly arrived groups and is flexible enough to meet future needs.

➢   Revisit protocols to ensure that schools are able to link with locality teams and share information or concerns about children on a consistent and timely basis.

➢   That the learning from the Cluj-Napoca visit (outlined in section 5.9) is explored and an action plan developed to apply appropriate measures.

2. **ORIGINAL CONCERNS – WHY MEMBERS WANTED TO LOOK AT THIS ISSUE**

The issue of how we support newly arrived children and young people in our schools was originally voiced at the Children and Young People's Scrutiny Panel in January 2008. Concerns had been raised that schools within the boundaries of Rotherham South Area Assembly (in particular but not exclusively) were facing additional pressures because of the recent numbers of new arrivals, most of whom were children of European Union (EU) migrant workers.

Most, if not all, schools in Rotherham have experience of supporting learners who have English as an additional language (EAL). However a substantial proportion of EU new arrivals, particularly those from the Roma community, have located within the centre of the Borough, placing additional pressures on the schools serving this area. Whilst these schools have developed expertise in supporting EAL learners, particularly those from Pakistan/Kashmir, the most recent wave of EU migration has set new challenges for them.

The presence of significant numbers of migrant children has great implications for the education system. With their duty to promote community cohesion, schools are well placed to play a leading role in creating an inclusive society. However, they face huge challenges in providing equitable and quality education that meets both the needs of new arrivals and the existing pupil population. Although the review has a focus on those newly arrived from the Roma community, it should be emphasised that the lessons learnt could be applied to other groups settling within the Borough. Since inward and outward migration is set to continue (albeit the pace may decelerate with the economic downturn), the Scrutiny Panel felt it was timely to examine whether the measures to support newly arrived children were appropriate to ensure that they, along with settled children, reach their full potential.

3. **TERMS OF REFERENCE**

The purpose of this Scrutiny review was to examine the measures in place to support newly arrived children and young people in schools (both primary and secondary), particularly those from the Roma Communities, and whether improvements can be made to this support.

Specifically the review looked at:

- what is currently available in Rotherham schools to support newly arrived children and young people,

- examples of good practice locally and elsewhere

- how existing resources can be best utilised

- what measures should be taken in the long term to improve the Council and partners' responses and the support available to newly arrived children and young people

Key questions were asked to the witnesses to ascertain:

- current numbers of newly arrived children and young people and in which schools

- the potential impact on achieving school improvement and performance targets (including attainment and attendance)

- how schools are supported to manage change to meet new needs; including curricular, organisational and community cohesion issues

- future trends - what plans do we have to accommodate newly arrived children in schools if levels of migration continue at current levels

- resource implications (is there a shortage of resources, including additional teaching and classroom support)

- are there lessons to learn from other local authorities

- anticipated impact on Children and Young People's Services and what strategies are being developed to address this in long term

3.1 **Methodology**

The following members were part of the review group:

Cllr Neil Licence (chair)
Cllr Barry Kaye
Cllr Barry Dodson
Mick Hall (Parent Governor Representative – Statutory Co-optee)

The review began its evidence gathering in June 2008, co-hosting a conference with an invited audience of educational professionals, partners, elected members and officers from Children and Young People's Services and other Council Directorates. Interviews were organised with Cabinet Members, head teachers, partners and officers from Children and Young People's Services over the summer and autumn. The review also met with local MPs, Rt Hon John Healey and Rt Hon Dr Denis MacShane and Linda McAvan MEP to seek their views. The Chair of the review group participated in an international visit to Cluj-Napoca in Romania to look at educational provision for Roma children. The review group also visited two schools in the Clifton Education Action Zone (EAZ) to get a first-hand picture of how schools were addressing the new challenges. A detailed list of interviews and visits is attached as Appendix 1.

The review also received in-depth briefings on European Migration, EAL provision, and conducted their own literature searches on current good practice and developments.

The review group would like to thank all those who contributed to the review.

4.   BACKGROUND

Migration to and from the UK is not a new phenomenon. Different communities have settled throughout the country over thousands of years, bringing the benefits of their skills, cultures and traditions. More recently, the scale and pace of migration has greatly increased with the free movement of new European Union (EU) citizens since its enlargement in 2004. These patterns of migration have been mirrored within Rotherham, which in turn is reflected in an increased diversity of the school population over recent years.

Although migrant workers have brought many reported benefits to local economies[1], it has been recognised that migration can often place additional pressure on local services. Since 2004, the number of migrant workers registering for work in Rotherham has doubled[2], with the majority coming from the EU accession states. Unlike most areas in England, EU Accession country migrants from Slovakia outnumber Polish migrants in Rotherham. Local evidence shows that most Slovak migrants are from the Roma community and many have settled in family groups[3] with children of school age. This has meant that significant numbers of newly arrived children, many with little or no English, have entered the school system in Rotherham.

According to the New Communities and Migration Briefing, there are estimated to be 10 million Roma people in Europe, about half of the worldwide total. The largest European Roma communities are in Romania, Bulgaria, Hungary and Slovakia (all over 500,000). Roma people live in many countries but have their own distinct history and culture. Roma communities today comprise a vast variety of branches with different cultures, dialects and languages, although many still share some common traditions. Many Roma people speak the Romani language which has many dialects, is closely related to Hindi and shares words with Punjabi.

Roma people have faced mistrust, exclusion, persecution and enslavement over many centuries. Recent studies of Roma populations in Europe have uncovered attributes similar to those of the people of many developing countries. These include a high birth rate, a generally low life expectancy, lower levels of access to education, unemployment and widespread poverty. Anti-Gypsy or Roma racism is still widespread. A recent survey conducted in 10 countries by the United Nations Development Programme, supports the conclusion that Europe's Roma people

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[1] The Economic and Fiscal Impact of Migration, Home Office and DWP, October 2007
[2] RMBC, New Communities and Migration Briefing, Local Research and Information Digest, 2008.
[3] ibid

fare very badly. According to the survey, around three-quarters of Roma children do not complete primary school education. The share of Roma living below the poverty line was almost six times as high as that of the general population. Roma women face the difficulties of double discrimination in relation to race and gender and are even more vulnerable to poverty.

The number of families settling within the Borough is difficult to accurately predict and may increase or decrease depending on the availability of work. Like many other newly arrived communities, they have located where there is affordable accommodation and/or established networks of family or friends (the same is true of UK citizens abroad). Within Rotherham, the majority of the Roma community is concentrated within the Eastwood area. The search for appropriate accommodation and employment has meant that the community is highly mobile, with frequent relocation within Eastwood, to other parts of Borough or further afield (often returning to their home country for periods of time). Within the sub-region, there is anecdotal evidence that there is movement of Roma families between the Burngreave/Page Hall and Tinsley/Darnall of Sheffield and Eastwood village. The high mobility makes the identification and placement of children in schools more difficult and often takes place without notice or transfer of records.

In the short term, migration can negatively influence the education of children even when they are established learners who have experience and expectations of the school system in their home country[4]. For example, pupils may be affected by disrupted schooling or learning a new language or culture. For some, this can be a temporary state with them quickly adapting to school life. However for many, particularly those facing socio-economic disadvantage, there are persistent gaps in their attainment, which are slow to improve[5]. This can be demonstrated by lower than average attainment levels for BME boys in Rotherham[6].

Schools with groups of mobile children can face additional demands in terms of administrative costs, teaching support and other resources. The evidence presented to the review group would suggest that for some schools this is considerable with a reported 30% turnover in pupil numbers in a single year group. In a report presented to the Children and Young People's Scrutiny Panel, it was acknowledged that admissions "have generally been to schools with significant

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[4] Commission of the European Communities, Green Paper, Migration & mobility: challenges and opportunities for EU education systems, July 2008
http://ec.europa.eu/education/school21/com423_en.pdf
[5] Education and Migration strategies for integrating migrant children in European schools and societies, Report submitted to the European Commission by the NESSE network of experts
April 2008 **http://www.nesse.fr/nesse/nesse_top/activites/education-and-migration**
[6] In 2007 there was significant underachievement at KS 2 for Asian Pakistani pupils in Rotherham, compared with National outcomes and compared with their White British peers in Rotherham. The GCSE results indicate underachievement for Asian Pakistani boys although the girls perform well against national and LA figures.

experience of the needs of pupils with English as an additional language". Whilst this reflects the expertise of these schools, it has also has meant that they 'carry' the high turnover or churn, in addition to supporting their existing student body many who face educational and socio-economic disadvantage[7].

Although accurate data is difficult to collate because of their new status, there is evidence to suggest that there are emerging concerns about the attendance and attainment of Roma children in Rotherham schools, which unchecked will impact negatively on their long term outcomes, the learning environment and the performance of individual schools.

5.   EVIDENCE

5.1   Current pupil numbers

The percentage of BME pupils (including white non-British, Pakistani, and other ethnic groups) in Rotherham schools has risen to 11%[8]. Although this is lower to many comparable boroughs, it gives a clear indication of the effect of both migration and natural increase. Notably, there has been a high rate of growth in White Other (mainly European), from 0.2% in 2002 to 2.1% in which can only be the result of migration.

PLASC School Census Data: Rotherham Schools 2002 - 2008[9]

	2002	2004	2006	2008
White British	94.7%	92.9%	91.3%	89.0%
BME	**5.3%**	**7.1%**	**8.7%**	**11.0%**
Which includes:				
White Other	0.2%	0.7%	1.3%	2.1%

Rotherham schools vary greatly in their ethnic composition. Primary schools with a majority of BME pupils are Broom Valley, St Ann's, Ferham and Thornhill. Other primary schools have no BME pupils. For secondary schools, the highest percentage of BME pupils is 31.5% at Oakwood, whilst Clifton and Brinsworth

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[7] Rotherham South Area Assembly scores 'highly' against many indices of multiple deprivation, for example it has higher than average levels of economic inactivity and free school meal claimants than other parts of the Borough (ref Rotherham South Area Assembly Profile)
[8] RMBC, New Communities and Migration Briefing, Local Research and Information Digest, 2008.
[9] ibid

schools both have over 20%. Schools in the outer areas have few BME pupils, for example Maltby, Dinnington and Swinton secondaries have under 2%[10].

In 2006/07 there were 406 newly arrived children in Rotherham from all parts of the globe. 281 were from the European Union, and of the 281, 82%[11] were from Slovakia and the Czech Republic. Although school places were allocated for those new arrivals who registered, only 252 of the 406 were taken. The nationalities of those pupils not taking up school places were varied – however, the predominant group was Slovakian. Anecdotally, there is also further concern that many children are simply not registered or registered elsewhere.

Similar numbers registered (347) for school places in 2007/08, although again a substantial numbers of places were not taken up (approximately 150). The numbers entering this year (2008-09) are following a similar pattern to the previous academic year. There is no single entry point with parents or carers registering for school places throughout the school year. Schools also experience churn or turnover, with many pupils not staying for the full academic year. It is clear that the transient nature of the newly arrived population causes difficulties to the central admissions system and individual schools.

Because of the concentration of newly arrived communities within the centre of the borough, this has meant that the schools serving this area have accepted a larger proportion of newly arrived pupils. In the case of 3 primary schools, St Ann's, Coleridge and East Dene, 93 pupils from Slovakia were accepted on roll in 2007/08 out of approximately 230 pupils in addition to many other nationalities. Of these 93, over 20 pupils did not take up the places.

Furthermore, several pupils (across all nationalities) moved during the school year or had significant periods of unauthorised absence. Continuous movement of pupils can disrupt the whole learning environment within a school. This becomes critical where the school already has large numbers of children experiencing existing social and economic deprivation.

5.2 Issues emerging from the conference

In June 2008, a conference was organised to raise awareness of the new Roma community in Rotherham, to review current practice and inform strategic developments.

Key issues emerging from the conference include:

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[10] ibid

[11] Support to schools for children for whom English is an additional language and the role of the Service for Ethnic Minority Children: Report to Children and Young People's Scrutiny Panel 7th March 2008.

- Testing; particularly of pupils who have not been part of the whole cohort

- Funding; the impact of high pupil turnover means that a number of schools face extra unfunded pressures compared to the vast majority of schools with stable pupil populations or low turnover.

- Pupil Attendance and engagement of parents

- High mobility

- Impact of newly arrived on town centre schools who face existing attainment pressures;

- Community cohesion issues

- Low aspiration of Roma pupils

- Sharing of information and links with locality teams

- Need for greater LA strategic lead

Subsequent discussions with Head teachers and the project manager of the Clifton Education Action Zone reiterated these points, but also stressed the impact that high numbers of new arrivals was having on the current school population many of whom were existing EAL learners.

5.3 **Impact on targets**

There was a widespread view from the conference and in interviews with teachers that existing measures of attainment and school performance fail to take account of circumstances within schools dealing with different stage EAL learners with differing nationalities *and* the challenges faced with high turnover. Nor do the measures recognise that extended absences or gaps in education between key stages may require additional support. For example in 2007, East Dene accepted 36 pupils on roll and 28 pupils left, hugely disrupting the learning environment. This is further complicated as many pupils arrive with limited educational experience, and their lack of English and educational history means that it is difficult to complete a full base-line assessment of ability and skill level, impacting on the ability to measure contextual added value. It is difficult to maintain continuity under these circumstances and meet needs of the cohort as a whole.

Issues were raised at the conference that expressed fears that schools are at risk of falling below floor targets across all key stages. Four schools are in the Improving Schools Programme (formally "Intensive Support Programme") and it was suggested that some were in danger of being categorised as "hard to shift". It was a widespread view that floor targets are held back by ability profile. Children

are assessed against key stages targets who may not have spent the whole of time in 'key stage' cohort and they have difficulties in attaining age appropriate levels because they cannot access the curriculum. A Head teacher reported that of a Y6 cohort, 13 out of 20 pupils would have achieved a predicted score at level 4+ in English (65%) in their Key Stage 2 tests. 8 pupils subsequently arrived with little or no English, bringing the predicted score at level 4+ to 42%[12].

Schools reported that there were pressure points at Key Stage 2 and Key Stage 4 in particular. One head teacher summed up the issue "*It's not a level playing field… The children are starting from so far behind. They have to run uphill, faster and longer just to catch up.*"

In the long term, it was suggested that this may impact on the recruitment and retention of staff as teachers would not be prepared to apply to or remain in schools these schools. Some schools already identified difficulties in recruiting staff, despite attractive remuneration packages.

The review group is of the view that the current testing regime is a crude measure of outcomes rather than accurately reflecting whether an individual child has reached his/her full potential. If a school faces multiple levels of deprivation, high turnover and significant numbers of EAL learners, the below average results may hide good teaching and good support and a strong commitment to raising standards. An example was given of a school whose previous OFSTED inspection (2006) had praised its EAL support, now being at risk of failing to meet the needs of its students because of the change in population. The group was told anecdotally that an OFSTED inspector had told one head that the school would have to be excellent to even be categorised as average because a number of pupils would struggle to access the curriculum.

Until recently most EAL support has been geared to Pakistani/Kashmiri learners rather than EU new arrivals. In those schools with higher numbers of British Asian pupils, they have directed resources to recruiting bi-lingual teaching and support staff. However, the number of languages spoken in small number of primary and secondary schools is growing (St Ann's has 21 first languages other than English) and there is difficulty in recruiting suitably qualified staff (even if the resources were there). There was a suggestion by a head that that initial induction does not require a teacher but would require consistent support in classroom, overseen by

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[12] Key Stage 2 is designed for pupils aged 7 to 11 years old. Level 4 is the level expected for most 11 year olds. The Government has set itself the target that by 2006, 85 per cent of 11 year olds will separately reach level 4 or above in the English and mathematics tests, with this level of performance sustained to 2008. By 2008, the proportion of schools in which fewer than 65 per cent of 11 year olds achieve level 4 or above in each of English and mathematics is reduced by 40 per cent. Failure to improve over the long term, may lead to further intervention by the Local Authority or OFSTED.

'advanced' EAL teacher. There is a cost attached to this but should be considered as part of the emerging EAL strategy.

Fundamentally, there appears to be difficulties in supporting both basic and 'advanced' EAL learners. Basic learners do not appear to have long enough in induction class before they join mainstream classes because of demand on places (with new arrivals joining schools throughout the year). More advanced learners still have support needs which may not being met.

The review group visited St Ann's Primary School and during a single morning six children arrived to register at the school. This meant classroom support being taken to translate rather than supporting pupils' learning. In some secondary schools, pupils with basic English were also used to translate, disrupting their learning. It points to schools with the greatest need have additional demands for extra administrative, teaching and other support being placed upon it. During the visit, many teachers spoke of the additional behavioural support needs of many new arrivals and basic socialisation needed which was not age appropriate (an example was given of a Year 6 student being at foundation stage in terms of skills and socialisation however they would be assessed at the age appropriate level). Official measures do not appear to recognise that individual pupils may require resource intensive 'catch-up' programmes to even develop basic skills, let alone more complex comprehension skills required to access parts of the curriculum (for example science); this occurs at both secondary and primary level.

The issue of attainment and the potential impact that this may have on schools, was raised in an informal discussion with John Healey MP, Denis MacShane MP and Linda McAvan MEP. All were interested in receiving the outcomes of the review. They helpfully suggested that there may be merit in hosting discussions with other authorities experiencing similar pressures and relevant Government Ministers/ Civil Servants to identify good practice.

5.4 **Pupil attendance**

Schools are welcoming to the new community and are facilitating attendance at school, for example setting up a 'walking bus'. The 'Welcome Centre' and community officers have facilitated attendance, picking pupils up from home. Schools have also put on social events and displays sharing Eastern European heritages.

Despite these efforts, all head teachers interviewed reported a high level of unauthorised absence (across all groups but of greater concern for British Asian and Slovak children). In addition to the safeguarding concerns, each school is expected to set targets for improving attendance and is measured against them. If

levels of absence remain high, secondary schools can fall into the persistent absence category[13]; primary schools are also expected to take action where 2.4% or more of the school roll are persistent absentee pupils.

If pupil absence remains high, it can negatively impact on individual school performance and the local authority performance indicators. Schools become a priority if they had 80 or more pupils who are persistent absentees and those pupils represented at least 10% of the pupil population. Children Services are 'priority authorities' if they have 5 or more schools in this category. At present this applies to secondary schools but it appears likely that some measures will be applied to primary schools. Anecdotally, head teachers reported that many primary and secondary Roma pupils fail to attend for a full week and often 'disappear' for weeks at a time or for longer periods.

Schools have a responsibility for dealing with absence in the first instance. It was reported that this is often the responsibility of Learning Mentors, who also provide non-teaching support. However, head teachers highlighted that because of the high levels of absence, learning mentors are 'door knocking' rather than supporting children in schools. There were concerns expressed that it was unclear how schools fed concerns about absence into locality teams and how these were subsequently dealt with. A Slovak speaker had been recruited to the Welcome Centre and they liaised with parents on attendance issues. However, it would appear that they do not have the capacity to deal with the scale of absence across the board.

With high levels of mobility, children are moved by their parents without notifying the school or admissions team. Children cannot be taken off the roll until authorisation is given by the Central Education Attendance Team. However, it was suggested that greater clarity is needed to ensure that communication between the Central Admissions Team, schools and the Missing from Education Officer (based within the Safeguarding Children Unit) is consistent and timely. It was suggested that referral processes are in place but not all schools and agencies use them in the correct manner. As an Authority we need to ensure we have all contact information for the newly arrived families. There is only one officer with this responsibility which is why it is crucial that all information is up to date and processes are adhered to ensuring new arrival children are tracked effectively.

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[13] A Persistent Absentee is defined by the DCSF as a pupil who has missed 64 or more sessions over the course of the school year. This equates to 20% or more absence, or roughly one half term out of the five for which data is collected. The definition of Persistent Absence makes no distinction between absence which is authorised by the school (holidays or illness) and absence which is unauthorised (truancy), it will all be counted.

At the time of writing, proposals were being formulated to address secondary attendance with the creation of a central register. The review group welcomed these outline proposals.

5.5 Admissions

Along with schools, the Central Admissions Team has experienced high numbers of new arrivals since 2005. The demands placed on the service have been considerable and there is a wide acknowledgement that the small Admissions Team has been inundated with requests for places throughout the school year. The team has worked within its resources to deliver a good service to majority of Rotherham parents. However, there is a wide perception that it is struggling to meet these demands.

There were some broad issues raised during the review. These are as follows

- Many newly arrived parents are confused about the process of admission, with some parents arriving to register their children directly with schools rather than going through the Central Admission team.

- Until recently, translation at the desk was via Language Line rather than having translation at the Norfolk House reception. This is extremely time consuming and costly (It is understood that this is to be addressed, with the recruitment of bilingual staff).

- Letters are routinely sent out in English rather than translated into community languages; schools reported parents turning up to school with these letters even if they had been refused a place. Additional time then had to be spent by schools securing translation and advising parents of the process. There is also an assumption that parents are literate, which is not always the case.

- For those who are literate, the admissions web page on the RMBC website is difficult to navigate for non-English speakers;

- Whether greater links can be made with Roma 'drop-in' sessions at the Unity Centre to advise on admissions process

- Ensuring that information about children on the EMS (the shared education service data management system)is consistent and that information about children not taking up allocated places or long periods of absence is shared on a timely basis between the 'Missing from Education Officer, Schools, Central Admissions and the Welcome Centre.

- The absence of a 'Welcome Pack' with clear, concise information translated into relevant community languages

In the early report to Children and Young People's Scrutiny Panel, it was suggested that the majority of admissions were made to the schools with existing expertise in supporting EAL learners. It is questionable whether this is sustainable in the long term as it places a disproportionate burden on those schools. Consideration should be given at a strategic level as to how this should be addressed.

5.6   Funding

The issue of funding was raised at the conference and in the interviews with head teachers. A school's budget is largely allocated on the basis of its pupil roll, local economic and social disadvantage, and informed by the authority's particular audit of its pupils' additional support needs. The pupil roll is taken on a designated day each year. However, in those schools with high turnover, these funding arrangements can potentially place them at a disadvantage. An example was given to the review that on the 'census' day of a school being 35 pupils down on their roll which led to a shortfall of £135,000. In the preceding weeks, 32 pupils were accepted on roll, although funding was allocated to the school on the basis of the census. Pressures are particularly evident in schools with multiple disadvantages and perhaps most acutely, in those with significant numbers of EAL learners, because they demand a higher level of support.

It is accepted that there needs to be a consistent approach to funding, however, a 'one size fits all' approach may not address the exceptional pressures placed on a small number of schools with higher numbers of newly arrived EAL learners and mobile pupils. A suggestion was put forward that a flexible system for funding could be established for schools experiencing greatest pressure, based on average numbers over 2 year period.

In an attempt to address high number of new arrivals (particularly in parts of the South East) the Government has brought in additional funding streams. From 2008-11, an Exceptional Circumstances Grant has been introduced. The grant is triggered where the increase in pupil numbers is more than 2.5% or where the proportion of EAL learners increases by more than 2.5%. Rotherham falls well short of this across the board; although for some schools these circumstances have been met.

Derby City Council has faced similar issues in that significant numbers of Roma Slovakian families (in addition to other EU migrants) have settled in the city centre. In recognition of the pressures faced by schools, the Schools' Forum[14] made available an additional £141k per year to the Local Authority from the Dedicated School Grant for provision over and above existing allocated resources. The review group wanted to explore whether there is merit in exploring this approach within Rotherham.

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[14] The purpose of Schools Forums is to advise local authorities on the operation of the local Schools Budget, and its distribution among schools and other bodies. They consist of people elected by local head teachers and school governors to represent them, and if the local authority so chooses, additional non-schools members to represent other relevant interests.

The Cabinet Member for Children and Young People's Services, Cllr Shaun Wright recognised that some schools face extraordinary circumstances. The reconfiguration of the 'Welcome Offer' (see below) would provide some additional support within schools; although it was recognised that this was a pilot scheme and its impact would require further evaluation.

A number of schools raised the issue of recruitment and retention of suitably qualified and skilled teaching and non-teaching staff. Until recently, social care experienced similar staffing shortages that required imaginative approaches, including 'grow your own schemes' and recruitment of staff from overseas. Given the likelihood of sustained EU migration, there is some value in exploring opportunities for recruiting or training staff with appropriate language and understanding of cultural traditions.

5.7   **Y10/11 pupils**

There has been a particular issue with the attendance and engagement of Y10/11 pupils. An alternative curriculum has been arranged through Rotherham College of Art and Technology (RCAT). For some groups this has worked well (for example, it was reported that asylum seeking young people engage positively). However, there were conflicting reports about its impact for other groups who may not have historically engage with education. Roma young people, particularly those in Y10, continued to have poor attendance with many 'disappearing'. In the long term, if these groups settle within Rotherham, there is a risk that young people may not be in education, employment or training. It was reported that there appears to be a significant issue about engaging young people from age 13 years onward.

There are examples of using youth activities and art as a tool to bring different groups together, break down prejudice, and to promote community cohesion. Last year, Cast-Offs Theatre Group (supported by Rotherham Young People's Service), worked with young people from different communities, including Roma, in Rotherham and took their production to the Edinburgh Fringe Festival. This project is ongoing and is well-regarded. Youth Workers from the Young People Services and Welcome Centre staff worked with secondary aged pupils made up of new arrivals and existing Rotherham young people, taking them on residential weekend to an outdoor centre. This work was instigated by Young People's Service and funded through their community cohesion money brought in through the partnership with the Youth Hostel Association. Feedback from these sessions has been very positive from both the workers and young people alike. Members of the Roma community have also led sport sessions with young men and arts and dance workshops (including a performance at the Diversity Festival at the Rotherham Show). Using existing RMBC staff from the Roma Community, Young People's Services are exploring options for youth work sessions. Although the above examples all point to a commitment to tackle issues of exclusion and cohesion, there may be a case for refocusing provision and resources to meet identified needs within newly arrived communities.

5.8   **The Welcome Offer**

During the review, proposals were put forward to change the 'Welcome Offer' to new arrivals. It was widely acknowledged that the previous system of local authority support provided through Welcome Centre, needed to adapt to accommodate the changing profile of new arrivals.

The Welcome Centre was established in 2002 as an initial point of contact for Asylum Seeker and Refugee secondary aged pupils (although primary children were accepted later). The purpose of the centre was to make an assessment of each pupil's previous educational experience, their level of basic skills and an opportunity to advise families on the requirements of school in England, such as the curriculum, attendance and matters such as uniform. To accommodate the increase in numbers of newly arrived children, the Centre moved from Eastwood to Kimberworth in 2006.

Whilst this has worked well for many pupils, the increased volume of newly arrived pupils has necessitated a change in approach. Furthermore, guidance from DCFS and experience of other local authorities[15] with significant numbers of EAL learners and new arrivals, suggests that induction is best provided within the school environment. Recently, the following model was approved by Cabinet Members for Lifelong Learning and Children and Young People's Services to be piloted from January 2009:

- Increase the Local Authority's (LA) capacity to provide clear strategic leadership and expertise in this area

- Support schools in taking responsibility for a sustainable approach to Ethnic Minority achievement, from New Arrivals to Advanced Learners of English as an Additional Language, by developing hubs of effective practice in identified schools. This will be one primary school and two secondary, one of which will focus on developing good practice for Advanced Learners and one for New Arrivals

- Use LA Ethnic and Cultural Diversity Service resources more strategically and increase LA capacity to raise achievement for learners with EAL by reallocating some of the existing centrally funded resources from the Welcome Centre to support Hub schools to:
  - i) develop their own capacity to meet the needs of EAL learners.
  - ii) develop outreach provision to improve performance in partner schools.

The expertise and commitment of the Welcome Centre staff is highly regarded. However, it is recognised that although the Welcome Centre had supported and inducted considerable numbers of pupils and provided resources and peripatetic

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[15] Bradford MBC and Kirklees MBC were both cited as examples of good practice in the report 'Provision for Ethnic Minority Learners'.

support to schools, it did not have the capacity to cope with the increased numbers entering the system.

Colleagues from Doncaster MBC and Sheffield City Council were contacted about how they were accommodating newly arrived within schools and if their approaches differed from Rotherham. It is clear that similar pressures and challenges are shared with other authorities. Derby City Council has developed a strategy for providing additional support to newly arrived pupils and has recently introduced an allocation policy to accommodate children who do not speak or understand English.

The 'package' offered by Doncaster Ethnic Minority and Traveller Achievement Service includes:

- Initial assessment

- Support with admission process.

- Induction packages for newly arrived pupils.

- Teacher support which includes partnership teaching

- Bilingual support in mother tongue where available

- Packages delivered to targeted pupils by ancillary staff.

- Access to relevant resources

- Monitoring and tracking of progress of targeted pupils

- Establishment and maintenance of regular contact with parents/carers of targeted pupils

- Auditing the curriculum to ensure access.

- Advice on developing policies in school.

The review group is keen to see best practice adopted in the new 'Welcome Offer' and to ensure that best practice developed in other authorities facing similar pressures are reflected in our proposals.

The review group was very supportive of the need to change the Welcome Offer to meet the child's needs as far as possible within his/her destination school from the outset. However, there were concerns were expressed that the EAL strategy also needed to address the immediate pressures faced by a small number of schools, particularly those serving the Town Centre.

5.9   Engaging parents/community members

The review group interviewed the Cabinet Member for Communities and Involvement, Cllr Mahroof Hussain and officers from the Chief Executive's Directorate.

The Cabinet Member gave an overview of the work taking place across Council Directorates and with partners to co-ordinate activity. The works includes:

- Maintain Unity Centre drop-ins for next 3 years. This is a small voluntary sector project to work with Roma communities, which is becoming a trusted resource.

- Developing a welcome pack

- Introducing ESOL classes aimed at different communities – getting to know your neighbours

- Waste management and housing enforcement

The Chair of the review visited Cluj-Napoca in Romania. The city has a substantial Roma community. Whilst is not suggested that Roma people across Europe have a uniform experience, discussion with community groups, many who were Roma led, came up with some helpful suggestions to enhance community engagement.

- Value of schools as a rich resource. Useful to gain access to parents by engaging with children first. After school events can be organised to integrate parents.

- With the more isolated communities, workers realised that they needed a different approach and worked within that community to first build trust and identify leaders and work on projects to help improve their living conditions before looking at integration.

- Door to door interviews were a useful way of making initial links with communities to find out and respond to community needs.

- Some examples include training community members in community development, writing project proposals together, giving the group a chance to register as an NGO (Non-Governmental Organisation) and opportunities to develop skills. Small grants were made available for community projects.

- Important for the community to identify community leaders who are willing to talk and act as spokesperson for the community group and who communities trust. We cannot choose the leader for them.

- Develop specific targeted projects to work with women to engage families in learning.

- Employ Roma people where appropriate (there are examples within CYPS and schools of recruitment to non-teaching support roles)

- Involve community members in working groups to deal with specific issues relating to the Roma community – eg. Housing, police intervention

- There is a need for more information in the community, and for education and language courses.

- At the same time as working with Roma communities, it is important to work with the wider community to address prejudice and discrimination, improve communications between Roma and non-Roma people and enable expression of Roma culture and language.

Each of the schools provided a hot meal to the children during the school day. Because access to school meals in the UK is dependent on means tested

benefits, most new arrivals are not eligible for them. It has been suggested, that this may be a barrier to attendance. This may be worthy of further exploration.

- Other suggestions emerging from the visit, included making links with the Universities within Central and Eastern Europe in order to train and develop staff.

- Twinning arrangements between schools within Rotherham and Slovakia and the Czech Republic in the first instance.

- Developing ESOL provision within workplaces

Although this was not addressed in any depth, the review group recognised that while ever there is a concentration of affordable rented accommodation within a relatively small locality, there will pressure on services. There needs to be a wider consideration of housing needs as part of a partnership approach.

As part of the review, we spoke to members of the Roma community. The issues of discrimination and persecution outlined earlier in the report were reiterated. As context, it was explained that the majority of Roma children attend special schools were standard of teaching and qualification are much lower[16]. Decisions on placement are made at school entry age or shortly afterwards on the basis of assessments that put Roma children at a disadvantage, because they usually do not speak Slovak and have not had the benefit of pre-school education.

There is an expectation for children to attend school starting at age 6 or 7. Some schools in Slovakia specialise in traditional music or craft but these are exceptions. Attendance and discipline are problematic within the special school system and there is great suspicion and disengagement. There was a view expressed that because most Roma's experience of education is so poor, that they do not attach the same value to it – consequently many will not fully engage with schools here.   There were also some reports of Roma pupils within Rotherham schools (particularly secondary) experiencing bullying. As a previous scrutiny review established, bullying that it can have a profound effect on attendance and attainment. There may be merit in exploring whether there is a specific issue of newly arrived pupils being bullied and how this is addressed in schools.

Very few members of Roma community speak English confidently, and it was suggested that where schools have employed Slovak speakers there has been some success. They maintained that trust is the key to getting parents involved.

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[16] the widespread exclusion of Roma children is reported in a recent paper by Amnesty International: Slovakia: Roma children and the right to education. Factsheet on Roma experiences of education 15 November 2007
http://www.amnesty.org/en/library/asset/EUR72/005/2007/en/dom-EUR720052007en.html

5.10 **Children and Young People's Services**

Until recently, the school community within Rotherham was largely settled. Although some schools had a significant number of EAL learners, these were mostly from the Pakistani/Kashmiri community. Small numbers of asylum seekers and refugees children were admitted but numbers could be accommodated.

The scale and pace of recent EU migration has stretched resources considerably. Schools have experienced increased numbers of EU newly arrivals since 2005. However, whilst there are some pockets of excellent practice, the Review Group is concerned that Children and Young People's Services appears to have been slow to address the issues raised by schools in a co-ordinated, proactive way. The developing 'Welcome Offer' goes some way to addressing how schools can be supported and there is emerging work to engage young people in youth work activities. However, there are some key issues that remain, which have been covered earlier in the report. Although it is recognised that integrated services are at an early stage, schools are uncertain of the roles of the locality teams and how to feed into them. Nor, does not there appear to be clear protocols for the sharing of information between schools, localities, central teams (such as admissions), police and other agencies. This needs addressing as a matter of urgency.

The development of the Welcome Offer is an ideal opportunity to identify a strategic lead within Children and Young People's Services to oversee activity, which could include:

- Admissions and attendance,

- Resources,

- EAL support

- Supporting schools in their duty to promote community cohesion

- Links with locality teams

- Information sharing protocols

- Co-ordinating activity with other directorates and partners

- Forward planning

6. **RECOMMENDATIONS**

Whilst this report focuses on supporting newly arrived children within schools, there needs to be a recognition that the Local Authority and Partners' response should be flexible enough to accommodate other communities that may settle. The review group wanted a greater co-ordination of activity across all services to ensure that lessons learnt can be applied in the future.

6.1 That the authority hosts a meeting with other local authorities (including across the sub-region) to highlight good practice and the challenges of supporting EU new arrivals, particularly in relation of attainment targets. Using the office of our local

MPs, invite relevant Government Ministers, Civil Servants and OFSTED inspectors.

6.2   The review group welcomed the EAL Strategy or 'Welcome Offer' but given that future numbers of new arrivals are difficult to predict, recommends that it is subject to regular evaluation (initially every six months) to ensure that:

- the needs of the newly arrived pupils and the existing school population are met;

- those schools facing the greatest pressure have the opportunity to influence the strategy and highlight potential problems in its implementation;

- schools who may not have great experience of receiving new arrivals are supported ;

- that resources allocated to the 'Welcome Offer' are sufficient to meet need;

6.3   Consideration should be given at a strategic level to the allocation policy to ensure that in the allocation of school places for new arrivals, we avoid placing disproportionate pressure on those schools with existing high numbers of EAL (English as an Additional Language) learners.

6.4   Acknowledging the difficulties with funding based on 'census' day, explore the feasibility of introducing a flexible system of funding for schools experiencing greatest numbers of mobile pupils.

6.5   Using the model developed by Derby City Council, explore the feasibility with the School Forum of re-distributing money from Direct Schools Grant to those schools experiencing the greatest pressure.

6.6   Identify a strategic lead in Children and Young People's Services to link with other Council/partner bodies (housing, health etc) to ensure that there is effective inter-agency working.

6.7   Explore the feasibility of recruiting 'Advanced' EAL teachers within 'priority' or 'hub' schools to oversee the development of EAL support within schools.

6.8   Explore the feasibility of developing links with Slovakian Universities (in the first instance) to train teaching, non-teaching staff and social care staff.

6.9   The review group welcomes the proposals to develop a 'central admissions register' until attendance patterns are established for secondary-aged pupils. However, it recommends that options to address poor attendance for those primary schools in greatest need are developed.

610   Evaluate the impact of the RCAT provision to assess whether the outcomes are appropriate and provide value for money.

6.11   Evaluate whether existing Young People's Service provision is meeting the current needs of newly arrived groups and is flexible enough to meet future needs, particularly in light of the potential rise in numbers of young people not in Education, Employment or Training.

6.12 Ensure that there is a consistent and timely approach to recording information on children missing from education that is shared across schools, Admissions and Safeguarding Teams. Given the sub-regional movement of families, protocols should also be developed with other authorities.

6.13 Revisit protocols to ensure that schools are able to link with locality teams and share information or concerns about children on a consistent and timely basis.

Local Authority and Partners

6.14 Working with other directorates and partners, develop a 'bank' of translators/interpreters for all agencies to use. Ensure that relevant teams (eg Admissions) have appropriate access to language support.

6.15 That the 'welcome pack' is introduced and work undertaken to increase access to ESOL courses for newly arrived communities, particularly Roma, as a matter of urgency., Links should be made with employers via the Chamber of Commerce and other for a, eg Works and Skills Board and Trade Unions to see whether English Language classes can be introduced at work places.

6.16 That the learning from the Cluj-Napoca visit (outlined in section 4.9) is explored and an action plan developed to apply appropriate measures.

6.17 Identify a Cabinet Member with lead responsibility for co-ordinating services for new arrivals.

7. THANKS

- Cllr Shaun Wright, Cabinet Member for Children and Young People's Services
- Cllr Mahroof Hussain, Cabinet Member for Communities and Involvement
- Joyce Thacker, Executive Director, Children and Young People's Services
- Graham Sinclair, Director, Access and Resources, Children and Young People's Services
- Tom Kelly, Director of Inclusion Voice and Influence, Children and Young People's Services
- David Light, Senior School Improvement Consultant Children and Young People's Services
- David Hill, Manager, School Organisation Planning and Development Children and Young People's Services
- Marina Jordan, Principal Officer, Admissions and Appeals Children and Young People's Services
- Bev Booker, Service Leader for Ethnic Minority Children, Children and Young People's Services
- Pavel Sabados, Education Welfare Officer (EAL) Children and Young People's Services

- Bev Findlay, Children Missing Education Officer, Children and Young People's Services
- Kerry Bryne, Youth Officer, Children and Young People's Services
- Angela Power, Scrutiny Adviser, Chief Executive's Directorate
- Emily Knowles, International Links Officer, Chief Executive's Directorate
- Zafar Saleem, Community Engagement and Cohesion Manager Chief Executive's Directorate
- Carol Adamson, Equalities and Diversity Officer, Chief Executive's Directorate
- Andrew Crowley- Team Leader, Asylum Project Team, Neighbourhood and Adult Services
- Michal Bily, Community Worker
- Sue Sayles, ESOL Co-ordinator, RCAT
- Brian Chapple, Chair, Rotherham Partnership
- Barry Gow, Project Director Clifton Education Action Zone
- Patrick Daley, Head teacher, Clifton: A Community Arts School
- David Pridding, Head teacher Thrybergh Comprehensive School
- Amanda Bartholomew, Head teacher East Dene Primary School
- Alan Staton, Head teacher St Ann's Junior and Infant School
- Michelle Leather, Head teacher Coleridge Primary School
- Rt Hon John Healey MP
- Rt Hon Dr Denis MacShane MP
- Linda McAvan MEP
- Christine Parker, Service Coordinator, Ethnic Minority and Traveller Achievement Service, Doncaster MBC

8.   REFERENCES

RMBC, Support to schools for children for whom English is an additional language and the role of the Service for Ethnic Minority Children: Report to Children and Young People's Scrutiny Panel 7th March 2008.

RMBC, 'Provision for Ethnic Minority Learners': Report to Children and Young People's Scrutiny Panel 12th January, 2008

RMBC, New Communities and Migration Briefing, Local Research and Information Digest, 2008

RMBC, Rotherham South Area Assembly Profile, Chief Executive's Directorate, 2008

Department for Children, Schools and Families "The Inclusion of Gypsy, Roma and Traveller Children and Young People", 2008

Department for Children, Schools and Families "New Arrivals Excellence Programme Guidance", 2007

Home Office and DWP, The Economic and Fiscal Impact of Migration, October 2007

Amnesty International: Slovakia: Roma children and the right to education. Factsheet on Roma experiences of education, 15 November 2007 http://www.amnesty.org/en/library/asset/EUR72/005/2007/en/dom-EUR720052007en.html

Derby City Council 'Strategy for providing additional support to new arrivals' http://www.derby.gov.uk/NR/rdonlyres/F35C2A7F-0989-4FF0-BDB0-C963CE9177FB/0/Languagesneeded.doc (date unknown)

Commission of the European Communities, Green Paper, Migration & mobility: challenges and opportunities for EU education systems, July 2008
 http://ec.europa.eu/education/school21/com423_en.pdf

Education and Migration strategies for integrating migrant children in European schools and societies, Report submitted to the European Commission by the NESSE network of experts
http://www.nesse.fr/nesse/nesse_top/activites/education-and-migration April 2008

APPENDIX 1

Detail	Date
- Joyce Thacker, Executive Director, - Tom Kelly, Director of Inclusion Voice and Influence	09 May 2008
- Co-sponsored Rotherham EU Roma Education Conference	09 June 08
- Patrick Daley, Head teacher, Clifton: A Community Arts School - David Pridding, Head teacher Thrybergh Comprehensive School - Amanda Bartholomew, Head teacher East Dene Primary School - Alan Staton, Head teacher St Ann's Junior and Infant School - Michelle Leather, Head teacher Coleridge Primary School - Bev Booker, Service Leader for Ethnic Minority Children - Pavel Sabados, Education Welfare Officer (EAL) - Andrew Crowley, Team Leader, Asylum Project Team, Neighbourhood and Adult Services	16 June 2008
- Brian Chapple, Chair, Rotherham Partnership - Barry Gow, Project Director Clifton Education Action Zone - Sue Sayles, ESOL Co-ordinator, RCAT	7 August 2008
- John Healey MP (informal discussion) - Graham Sinclair, Director, Access and Resources, - David Light, Senior School Improvement Consultant - Cllr Shaun Wright, Cabinet Member for Children and Young People's Services - Michal Bily, Community Worker - Zafar Saleem, Community Engagement and	25 September, 2008

Cohesion Manager	
- Linda McAvan, MEP - Cllr Mahroof Hussain, Cabinet Member for Communities and Involvement	10 October, 2008
- Visit to St Ann's Junior and Infant School	11 November, 2008
- Visit to Cluj-Napoca, Romania	17 – 21 November, 2008
- Denis MacShane MP - David Light, Senior School Improvement Consultant - David Hill, Manager, School Organisation Planning and Development	27 November, 2008
- Visit to Clifton: A Community Arts School	3 December, 2008
- 'Provision for Ethnic Minority Learners', report to Children and Young People's Scrutiny Panel	12 January 2009

For further information about this report please contact:

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ROTHERHAM BOROUGH COUNCIL

THE FORWARD PLAN

1 MARCH 2009 – 30 JUNE 2009

T.C. Mumford, Assistant Chief Executive, Legal and Democratic Services

Welcome to Rotherham Borough Council

The Forward Plan
March 2009 – June 2009

INTRODUCTION

The Council has introduced modern decision making arrangements where most decisions previously taken by numerous Committees are now taken by an Executive (consisting of ten Cabinet Members), individual Cabinet Members or Officers. There are Regulatory Boards for Planning and Licensing decisions. The Leader of the Council produces a Forward Plan of Key or Strategic Decisions.

The Cabinet Members are as follows :-

THE CABINET	COUNCILLOR
Leader (Chairman)	Stone
Deputy Leader (Vice-Chairman)	Sharman
Cabinet Member for Adult Social Care and Health	Kirk
Cabinet Member for Children and Young People's Services	S. Wright
Cabinet Member for Communities and Involvement	Hussain
Cabinet Member for Sustainability and Innovation	Wyatt
Cabinet Member for Regeneration and Development Services	Smith
Cabinet Member for Lifelong Learning	Rushforth
Cabinet Member for Neighbourhoods	Akhtar
Cabinet Member for Streetpride	R. S. Russsell

A Key Decision is one which is likely -

- To relate to the capital or revenue budget framework that is reserved to the Council, or
- That will result in income, expenditure or savings of £300,000 or greater, or
- To have a significant affect on two or more Wards

Strategic decisions are those which set out a policy framework aimed at securing best service delivery.

The Forward Plan will be updated monthly.

Members of the public are welcome to attend Cabinet Meetings and ask a question.

All decisions (except in extreme urgency) are subject to call-in and Scrutiny.

The Council are a forward looking Authority and are modernising all services.

The Council have a strategic partnership with B.T., to realise improved outcomes for all customers.

The Council have achieved Beacon Council Status for Fostering Business Growth, Removing Barriers to Work, Asset Management, Supporting New Business, Valuing People, Delivery of Quality Services through Procurement, Emergency Planning and Batter Public Places. It is outstanding performance to achieve eight Beacon awards.

The whole Council have achieved Investor in People status.

The Forward Plan for March, 2009 to June, 2009 includes details of the following Key or Strategic Decisions:-

Children and Young People's issues including Annual Admissions consultation, Comprehensive Area Assessment, Annual Complaints Report and various other issues

Any queries on this Plan can be made to Lewis South, Democratic Services Manager – Telephone (01709) 822050 or e-mail :- lewis.south@rotherham.gov.uk or the Lead Officer stated.

SCHEDULE OF DECISIONS

KEY DECISIONS TO BE MADE BY THE CABINET MEMBER, STRATEGIC DIRECTOR AND DIRECTORS FOR CHILDREN & YOUNG PEOPLE'S SERVICES

Strategic Director: Joyce Thacker
Representations to: The Strategic Director for Children & Young People's Services, Rotherham Borough Council, Children & Young People's Services, Norfolk House, Walker Place, Rotherham S65 1AS

KEY DECISIONS BETWEEN 1 MARCH 2009 AND 30 JUNE 2009					
Matter subject of key decision	Proposed date of key decision	Proposed consultees	Method of consultation	Steps for making and date by which representations must be received	Documents to be considered by decision-maker and date expected to be available*
March, 2009					
Proposal to open Maltby Academy, amalgamate Maltby Hall Infant and Lilly Hall Junior Schools	25th March	Cabinet Member Children and young People's Services	Report on results of stat notice	27th February 08	Report
Annual Admissions consultation	31st March, 09	Cabinet Member for Lifelong Learning	Governing Body reports, internet and newspaper	1st March, 2009	Report
2009 GCSE Results	31st March	Cabinet Member for Lifelong Learning Cabinet Scrutiny	Report	N/A	Report

April, 2009					
Communications Strategy	8th April, 09	Cabinet Member Children and Young People's Services	Report	N/A	Report
Comprehensive Area Assessment	29th April, 09	Cabinet Member Children and Young People's Services	Report	N/A	Report
Children and Young People's Plan Review – Revised Guidance and Consultation Plan	8th April, 09	Cabinet Member Children and Young People's Services	Report	N/A	Report
Children and Young People's Services Review Findings	29th April, 09	Cabinet Member Children and Young People's Services	Report	N/A	Report
IISaM – Children and Young People's Services Systems Development Update	29th April, 09	Cabinet Member Children and Young People's Services	Report	N/A	Report
May, 2009					

June, 2009					
Annual Complaints Report	3rd June, 09	Cabinet Member Children and Young People's Services	Report	N/A	Report
Quarter 4 Performance and Annual Outturn	17th June, 09	Cabinet Member Children and Young People's Services	Report	N/A	Report

CHILDREN AND YOUNG PEOPLE'S SERVICES SCRUTINY PANEL
Friday, 6th March, 2009

Present:- The Mayor (Councillor G. A. Russell) (in the Chair); Councillors Ali, Burton, Donaldson, Hughes and Kaye.

Also in attendance were:- co-opted members Mr. M. Hall (Community Representative), Father A. Hayne (Diocese of Hallam), Mrs. P. Wade (Aston cum Aughton Parish Council), Mrs. J. Blanch-Nicholson, Mrs. K. Muscroft and Ms. T. Guest, Mrs. L. Pitchley and Mr. A. Marvin.

Apologies for absence were received from:- Councillors Currie, Dodson, Fenoughty, Sharp and Sims.

103.	**DECLARATIONS OF INTEREST**

There were no declarations of interest made at this meeting.

104.	**QUESTIONS FROM THE PRESS AND PUBLIC**

There were no questions from members of the public or the press.

105.	**MATTERS REFERRED FROM THE YOUTH CABINET**

The Youth Cabinet had been invited to suggest subject areas for inclusion in the 2009/2010 work programme of the Children and Young People's Scrutiny Panel.

106.	**COMMUNICATIONS**

(1) The Mayor welcomed Mrs. Kate Muscroft, Mrs. Lyndsay Pitchley and Mr. Tony Marvin, co-opted members, to their first meeting of the Children and Young People's Scrutiny Panel;

(2) Road Safety and the Levels of Motor Traffic outside Schools – there had been another very good meeting of this Scrutiny Review Group on Friday, 20th February, 2009, with a further meeting scheduled later this month;

(3) the report of the Scrutiny Review of Support for Newly Arrived Children in Schools would be submitted to the next meeting of this Scrutiny Panel.

107.	**CHILDHOOD OBESITY UPDATE**

Consideration was given to a report presented by Carol Weir, Public Health Specialist, NHS Rotherham, about the current progress with the tackling of childhood obesity and the future plans for the childhood obesity programme for the next three years.

The report stated that the Government had published "Healthy Weight,

Healthy Lives: a cross government strategy (2008) that, amongst other recommendations, aimed to support the Public Service Agreement target 'to not only stop the rise in the numbers of children who are overweight or obese but reverse it back to 2000 levels by 2020, as part of a wider strategy to reduce obesity in the population as a whole'. In Rotherham, childhood obesity in Year 6 (National Indicator (NI) 56) is a Local Area Agreement target for 2008-2011. Rotherham data was similar to the national picture, although higher than the England average, with around one in three children in Rotherham classified as being overweight or obese.

The Scrutiny Panel's discussion of this item included the following salient issues:-

- based on Rotherham's current comparatively high level of childhood obesity, it was predicted that without preventative action, by the year 2050, some 50% to 60% of children in Rotherham would be clinically obese;

- the contracts for the Carnegie (physical activity and fitness) Clubs had been awarded to DC Leisure; and the multi-disciplinary team of professionals dealing with the obese children and young people would be based at the Clifton Medical Centre;

- ways of monitoring the National Indicator and Local Area Agreement targets (eg: most schools joining the 'healthy schools' initiative;

- the success of the Carnegie Summer camps, helping children and young people to lose weight and also the follow-up work to ensure the maintenance of healthier lifestyles;

- the need for childhood obesity and preventative action to be considered by school governing bodies;

- consultation with parents about the Government directive (on childhood obesity) to weigh children at age 4 and 5 years and again at age 10 and 11 years;

- parents/guardians being notified direct about their child's weight, together with relevant advice if the child was considered to be overweight;

- the Scrutiny Review of physical education in schools, which was due to report in the near future;

- the amount of physical education included within the school's national curriculum; and the provision and cost of extra-curricula physical education;

- sharing of good practice, between health authorities and local authorities, to reduce the level of childhood obesity (and the forthcoming

fact-finding investigation of good practice in France);

- the incidence of bullying of overweight pupils in schools and measures being taken to prevent all types of bullying;

- good practice shared by the youth service, via community groups, to try and prevent bullying which happened away from the school campus;

- the need to lobby local Members of Parliament about more action needed to prevent childhood obesity;

- the impact of a healthy diet, combined with regular physical activity, to help reduce obesity;

- the incidence of obesity in communities suffering economic and social deprivation;

- the many complex and inter-related causes of childhood obesity;

- examples of good practice in schools – one being the lunch-time activities at Sitwell Primary School;

- many schools involving pupils in growing vegetables in allotments, within the school grounds, or in plant pots;

- support for school teachers supervising sports activities during the school day and after school.

Resolved:- (1) That the report be received and its contents noted.

(2) That the progress being made to reduce the level of childhood obesity in Rotherham be welcomed.

(3) That all school governing bodies be asked to consider ways of preventing childhood obesity amongst their own schools' pupils, particularly in respect of time allocated for eating meals and for play activities.

(4) That a copy of the briefing note about childhood obesity, published by NHS Rotherham, be provided for all Members of this Scrutiny Panel.

(5) That an update of progress be submitted to a meeting of this Scrutiny Panel in twelve months' time.

108.   SCHOOL MEALS PROGRESS REPORT

Further to Minute No. 48 of the meeting of the Children and Young People's Scrutiny Panel held on 3rd October, 2008, consideration was given to a report presented by the Principal Catering Officer which provided details of the progress to date on the implementation of the

marketing strategy for the increase in take-up of school meals provided by the Education Catering Services.

The report stated that the Education Catering Services had established a partnership with NHS Rotherham, the Healthy Schools Team and with school head teachers, as outcomes for these partners will benefit from increases in school meals take up. This partnership contributed to the preparation of the 2008-2009 marketing plan for the school meals service and the following action points included in the marketing plan have been implemented:-

- information provided to parents and pupils about the school meals service, by an information leaflet and press coverage;
- talk and taster sessions held in thirteen schools, allowing pupils and parents to experience school meals food and to inform and allay fears about the foods offered;
- special theme days (e.g. Italian day) offered to generate additional interest amongst pupil;
- pilot schemes introduced and assessed for effectiveness; two schemes have been piloted (a) utilising a pre order system with identification of meal choice by a wrist band and (b) single choice meal;
- feedback received from School Councils about pupil meal preferences;
- head teachers have been addressed about the work of school meals and how it fits in with the Obesity Strategy (a multi-agency approach with NHS Rotherham and the Healthy Schools Team).

The Scrutiny Panel's discussion of this item included the following salient issues:-

- the significant increased take-up of school meals in a number of primary schools (eg: Kilnhurst);

- the expense, value for money and relative success or failure of the school meals marketing plan, involving the production of information leaflets and posters;

- Councillor Donaldson referred to her intention to undertake a survey of parents, at specific schools, to ascertain their views about school meals;

- serving school meals on plastic trays ('flight trays') or on individual dinner plates and in bowls/dishes;

- ways of ensuring that pupils and parents are able to comment on and have some influence over the provision of school meals;

- the reasons why some pupils prefer to bring a packed lunch to school;

- piloting of the 'Inspire Rotherham' project (beginning at Maltby), as part of which a dvd film about healthy eating, food preparation and a recipe

booklet will be provided for parents; one emphasis of the project was working with hard-to-reach groups of people in various communities;

- ways of increasing the take-up and removing the stigma of free school meals (nb: the limitations of the existing school meals budget prohibited the piloting of free school meals for all pupils);

- the existing subsidy of the price of a school meal and whether further subsidy should be sought from NHS Rotherham;

- ensuring that school meals could be served to all pupils having a meal, during the schools' lunch recess; minimising the length of queues; ensuring that pupils also had sufficient time for recreation and play during the lunch recess;

- the London Borough primary school example, where older pupils serve school meals to younger pupils,

- various reasons why young pupils did not like to have a school meal (eg: fear of dropping trays; being a slow eater);

- 'cashless' payment for school meals.

Resolved:- (1) That the report be received and its contents noted.

(2) That the appropriate officers are recommended to have discussions with NHS Rotherham about the possible provision of a subsidy for the cost of school meals.

(3) That the progress of the 'Inspire Rotherham' healthy eating pilot project in Maltby be reported to a future meeting of this Scrutiny Panel.

(4) That a copy of the 'Inspire Rotherham' dvd film and recipe booklet be provided for Members of this Scrutiny Panel.

109.   **CHILDREN AND YOUNG PEOPLE'S SERVICES - ANNUAL PERFORMANCE ASSESSMENT 2008 AND ACTION PLAN**

Further to Minutes Nos. 122 of the meeting of the Cabinet Member and Advisers for Children and Young People's Services held on 11th February, 2009 and 99 of the meeting of the Children and Young People's Scrutiny Panel held on 12th February, 2009, consideration was given to a report presented by the Director of Commissioning, Policy and Performance concerning the findings of the OFSTED 2008 annual performance assessment for this Authority's Children and Young People's Services. The Action Plan, prepared in response to the assessment, was appended to the report.

Specific reference was made to the recruitment and retention of foster carers and also to the operation of the SWIFT computer system for

recording social workers' case information.

The Scrutiny Panel noted that the interim report of the consultants' assessment of Children and Young People's Services would be available on 31st March, 2009, with the final report available on 17th April, 2009.

Resolved:- (1) That the report be received and the contents of the Action Plan, as now submitted, be approved.

(2) That a progress report and update against the areas for improvement be submitted to a future meeting of the Children and Young People's Scrutiny Panel.

110.   **CHILDREN AND YOUNG PEOPLE'S SERVICES - PERFORMANCE INDICATORS THIRD QUARTER REPORT 2008/2009**

Further to Minute No. 129 of the meeting of the Cabinet Member and Advisers for Children and Young People's Services held on 11th February, 2009, consideration was given to a report presented by the Performance Manager which detailed the Children and Young People's Services performance at the end of the third quarter 2008/09 against targets, with comparisons against 2007/08 actuals and 2006/07 top quartile. In cases where sufficient information was available, judgments had been made about whether indicators were on target and also about their direction of travel since the last quarter.

The report submitted was the third performance report since the introduction of the national indicator framework focusing on National Indicators (NI), stretch Local Area Agreement indicators (LAA) and Best Value Performance Indicators (BVPI). Details of the areas of both success and of under-performance were contained in the report, together with information about the future performance clinics for two of the under-performing indicators.

Members noted that monitoring arrangements and systems of national indicators were still being developed, both locally and nationally and in some cases the Government had still to clarify definitions. The report also included summary details of the National Indicators which were within the remit of the Children and Young People's Service partnership and an approximation of when data will be available.

Resolved:- (1) That the report be received and its contents noted.

(2) That the arrangements for the two performance clinics, as detailed in the report now submitted, be noted and the outcomes reported to a future meeting of this Scrutiny Panel.

(3) That the Children and Young People's Scrutiny Panel members be informed of the up-to-date performance data in respect of BVPI 221 (participation in and outcomes from youth work).

(4) That the Performance and Scrutiny Overview Committee be asked to invite representatives of the Learning and Skills Council to a future meeting.

111. **MINUTES OF THE PREVIOUS MEETING OF THE CHILDREN AND YOUNG PEOPLE'S SCRUTINY PANEL HELD ON 12TH FEBRUARY, 2009**

Resolved:- That the minutes of the previous meeting of the Children and Young People's Scrutiny Panel held on 12th February, 2009 be approved as a correct record for signature by the Chairman.

112. **MINUTES OF MEETINGS OF THE PERFORMANCE AND SCRUTINY OVERVIEW COMMITTEE HELD ON 28TH JANUARY, 2009 AND ON 13TH FEBRUARY, 2009**

Resolved:- That the contents of the minutes of the meetings of the Performance and Scrutiny Overview Committee held on 28th January, 2009 and on 13th February, 2009, be noted.

CHILDREN'S BOARD
18th FEBRUARY, 2009

Present:- Councillor S. Wright (in the Chair); Mike Cuff, Anne Lawrence, Joyce Thacker, Richard Tweed and Janet Wheatley.

Khamis Al-alaway, Judith Dodd, John Radford and Mike Wilson

172. APOLOGIES

Apologies for absence were received from Andy Buck and Matt Jukes.

173. MINUTES OF THE PREVIOUS MEETING OF THE CHILDREN'S BOARD HELD ON 16TH JANUARY, 2009

The minutes of the previous held on 16th January, 2009 were received as a correct record.

174. MATTERS ARISING

The Board noted action being taken on the various decisions.

The Chairman advised that the report on Integration of Services would be submitted to the next Board meeting and gave an update on his discussions with various people on how the issues would be progressed.

175. CURRENT ISSUES/CONCERNS

It was noted that issues and concerns would be raised as part of matters later on the agenda.

176. ROTHERHAM SAFEGUARDING - INDEPENDENT CHAIR'S REPORT

Judith Dodd, Independent Chair of the Rotherham Safeguarding Children Board, attended the meeting and presented her Annual Report.

The report advised Rotherham Children's Board of the work undertaken by Rotherham Safeguarding Children Board (RSCB) during the review period, highlighting achievements, good practice, issues which were being progressed, and areas for development. As the Children's Board received the minutes of the Rotherham Safeguarding Children Board, only the most significant issues were contained within the report, which would be read in conjunction with the Annual Report (2007-8) and the Business Plan (2007-2010).

The report gave an update on:-

- Meetings
- Achievements

- Items of Note
- Serious Case Reviews
- Budget
- Child Death Review Process
- Areas for Development
- RSCB Membership
- Role of RSCB in Performance Management

The Board reviewed the report section by section and asked a range of questions which were answered.

A number of issues were raised.

Agreed:- (1) That the report be received and noted.

(2) That the progress of the Board be welcomed.

(3) That the Safeguarding Children Board be asked to review the various action plans in place relating to children and young people.

(4) That the Chair of the Safeguarding Children Board be invited to attend Performance Clinics relating to safeguarding children and young people.

(5) That the Strategic Director of Children and Young People's Services review the agreements for contributions to the Safeguarding budget and the provision of suitable resources.

(6) That a report on attendance at the Safeguarding Children Board and its Sub-Committees be submitted to the Children's Board on a six monthly basis.

(7) That the Strategic Director of Children and Young People's Services review the performance management role of the Safeguarding Children Board and the links to children and young people's services.

177.   APA 2008 AND ACTION PLAN

Joyce Thacker presented the submitted report on the Annual Performance Assessment 2008 and Action Plan.

Further to a report submitted in January, 2009 regarding the 2008 APA result, the Action Plan was now finalised.

Whilst there were no financial implications in connection with this report, some of the activity contained in the action plan may have financial implications. Where this was the case, this would be reported separately.

The Action Plan would be regularly monitored and updated and reporting on performance would be routinely provided to a number of sources, including Corporate Management Team, Cabinet Member and Advisers,

Scrutiny and the Corporate Improvement Board.

The Board examined the Action Plan section by section and noted the various proposals to review and improve services.

All the key issues were debated and particular reference was made to the links to the Local Strategic Partnership Board.

Agreed:- (1) That the Action Plan, now submitted, be approved.

(2) That a progress update report, against the areas for improvement, be submitted in three months' time.

(3) That the Strategic Director of Children and Young People's Services review links with the LSP Board and the method of approving the allocation of Local Area Agreement Reward Grants.

178.   SMOKING IN PREGNANCY

Khamis Al-alawy, Tobacco Control Lead, presented the submitted report which gave an update on progress towards achieving the smoking in pregnancy prevalence (PSA 2010) target and actions required to address under-performance against the target.

Smoking accounts for one half of the difference in life expectancy between social classes I and V, thus the burden of smoking related morbidity and mortality fell disproportionately on the most disadvantaged in our communities. Smoking in pregnancy was a crucial health issue, with both immediate and downstream health and social effects. Smoking has serious adverse impacts on foetal, infant and child health as well as ongoing effects on the health of the mother and other people in the household.   Pregnancy provides a 'window of opportunity' as many women have high motivation to stop smoking during pregnancy and more contact opportunities throughout pregnancy with health professionals than any other point of their lives.

Although recording of smoking status at delivery had seen significant improvement in the past year (100%), 23.26% of pregnant mothers continued to smoke in Rotherham. Rotherham must achieve a smoking prevalence of 15% by 2010 (PSA). NHS Rotherham Maternity Service and NHS Stop Smoking Services were contracted to raise awareness and deliver brief interventions to support pregnant and child-bearing women to stop smoking. The current structure within the midwifery service allowed all community midwives to assess patients' smoking during booking (all maternities were captured this way). Health visiting, Practice nurses, Nursery nurses are trained to deliver brief intervention to enable immediate referral of patients.

The report gave an analysis of key issues, together with the Patient, Public and Stakeholder involvement, Health, Economic and Equality

Impact, Human Resources implications and Analysis of Risks.

There were no additional financial implications over and above the existing NHS Rotherham Budget allocation for the Stop Smoking Service and Maternity Services.

Members present were asked to consider additional actions required to improve performance.

Board Members expressed disappointment that around a quarter of pregnant women continue to smoke and welcomed the extensive efforts being made to tackle this problem.

Agreed:- (1) That the issues in the report, and support actions listed, be noted.

(2) That progress with smoking in pregnancy be reviewed on an annual basis.

(3) That a representative of Children and Young People's Services be added to the membership of the NHS Rotherham Working Group.

179.   **ANNUAL HEALTH CHECK 2007/08**

John Radford, Director of Public Health, presented the submitted report on the Annual Health Check 2007/08.

The Healthcare Commission was the independent watchdog for healthcare in England. They assess and report on the quality and safety of services provided by the NHS and the independent healthcare sector, and worked to improve services for patients and the public.

This report summarised the results of the 2007/8 Annual Health Check for NHS Rotherham, published on the 16th October 2008.

NHS Rotherham received a rating of "good" for Quality of Services and "good" for Use of Resources (same as previous year).

The ratings were based on a scale of four: Excellent – Good – Fair – Weak.

NHS Rotherham were fully compliant with all the Core Standards, fully met all the existing targets and were rated as "good" for new national targets, only missed being "excellent" on new national targets (and being "excellent" overall) by just one point.

The quality score means that "there was evidence that the services provided by the PCT were of good quality".

The use of resources score indicated that the PCT "performed well and

financial targets had been met for at least the past two years".

The Health Care Commission had been very strict in assessing PCTs. Nationally, with only 5.9% of PCTs rated as "Excellent" for quality of services.

In Yorkshire & Humber, 9 out of 14 PCTs "Fully Met" their core standards.

Only 1 Yorkshire & Humber PCT rated "Excellent" for Quality of Services (Barnsley) and only 2 PCTs rated "Good" in both quality of services and use of resources (including Rotherham).

The report gave details of Achieved Targets, Failed Targets and Underachieved Targets.

The Board welcomed the good performance levels overall and reviewed the underachieved targets.

Concern was expressed at the weak performance of the Ambulance Service.

Agreed:- That the report be received for information.

180.   CARE MATTERS

Joyce Thacker, presented the submitted report on Care Matters: Time for Change (Department for Education and Skills) aims to improve the lives and life chances of Looked after Children. The executive summary stated *"Despite high ambitions and a shared commitment for change, outcomes for children and young people in care have not sufficiently improved…. Tackling this requires urgent, sustained action across central and local government"*.

The agenda takes the form of a series of proposals to affect change. Some proposals had been implemented and some would require legislation [the proposed Children and Young Peoples Act 2009]. Others were still in the pilot stages and some were concerned with amendments to the inspection regime. Links were also made to other agendas, including the 14 to 19 agenda and 'Youth Matters'.

In order to assist Local Authorities, the Government had put proposals within the agenda into a timetabled implementation plan and action log. Not all aspects of the agenda were complete as yet and we await key documents regarding Foster Care Training and the Ofsted integrated inspection regime.

A briefing on the Care Matters agenda was presented to Cabinet Member for Children and Young People's services in June 2008. A further report was presented in November 2008, to present work to date and the results of an initial gap analysis of current provision in respect of the Care Matters

agenda.

This report follows a full review of the Care Matters agenda and gap analysis of service provision within Rotherham. This agenda has implications for Directorates across Children's and Young peoples services. On the whole service provision was good and many aspects of the proposed legislation were incorporated within existing practice. Where gaps had been identified, action plans were being developed to ensure compliance.

Government grant funding has been allocated to implement the Care Matters agenda, over a three year period, the funds are as follows

2008/9 - 182,221
2009/10 - 248,993
2010/11 - 286,603

Agreed:- (1) That the contents of the report be noted and the proposals contained within this report be endorsed.

(2) That the establishment of a cross directorate task and finish group to undertake preparation work to ensure the service meets expectations within this agenda be noted**.**

(3) That updates on progress be submitted to this Board six monthly.

181.   **PROTECTION OF YOUNG PEOPLE IN ROTHERHAM FROM SEXUAL EXPLOITATION**

Joyce Thacker, presented the submitted report which gave an update on progress across Rotherham around arrangements to protect children and young people from sexual exploitation.

Key areas of note in relation to protecting children and young people from sexual exploitation were noted below:

• **Structures -** A multi agency Sexual Exploitation Steering Group has continued to meet to take forward the Action Plan. The Steering Group was chaired by the Director of Targeted Services in C & YPS and included senior representatives from the VCS, Neighbourhood and Adult Services, NHS Rotherham, South Yorkshire Police and the C & YPS Safeguarding Unit. In addition a Sexual Exploitation Forum meets to review the operation of the procedures in this area of work. Training, education and sharing of best practice between agencies ensured that the recognition, referral and assessment processes in respect of children and young people at risk were continuously being reviewed and strengthened.

Strategy meetings were held to ensure that safeguards were put in place to reduce the risk to young people/children, promote their welfare and take action against either known or suspected perpetrators.

- **Risky Business Project -** This continued to be the main multi agency resource for the borough and, in the integration of C & YPS, sits within the Directorate of Targeted Services. Funding for posts has been secured and / or mainstreamed and we were in the final stages of moving to Town Centre based premises. The Project undertakes assessment of risk and directly intervenes to manage and reduce the risk by working with young people and / or other agencies. As well as direct assessment and intervention, the Project also delivers accredited preventative work with young people in secondary schools and youth service provision. In 07/08 more than 650 young women participated in preventative group work within or outside of schools and the total number of young people who benefited from preventative work via the training package delivered in schools was in excess of 4,200. Risky Business Project also participates and delivers training to other professionals which included in 07/08 Foster Carers, Magistrates, PCSOs, Youth Work etc.

- In 07/08 C & YPS Front Desk had 118 contacts which included elements of concern about risk from sexual exploitation; 59 of these benefitted from direct prevention work with Risky Business. All these contacts were appropriately assessed. There were currently 2 young people subject to child protection plans in which the family's inability to protect them from sexual exploitation was a factor.

- **Activity –** As per the action plan we have been proactive in a number of areas, some examples of which are given below;

  o The use of letters served by the police under section 2 of the Abduction Act on males as a result of investigations, with a breach of requirements laid out within the letters being an arrestable offence. In addition the police are currently proactively exploring applying to the court for Risk of Sexual Harm Orders in relation to known males who pose a risk of sexual exploitation. This application is made under the 2003 Sexual Offences Act, and can be a vital tool in the risk management of potential/known perpetrators.

  o Another joint police and social care wide range investigation in 2007 resulted in a male receiving a significant custodial sentence. The degree and quality of the multi agency working in this very

complex and very drawn out case was rightly commended by the trial judge and is being held up as a model of excellent practice.

o   A multi agency response to concerns in a particular part of the borough and the receiving of some young people to a 'place of safety' and subject to further assessment has recently been reviewed and a report considered by the Sexual Exploitation Steering Group. Much good practice was noted but just as importantly, the learning from this exercise was identified and plans put in place to ensure that such future activity is even more effective and scrupulous.

- Other work that has been taken forward within the Action Plan involves establishing a texting service for young males (under 18) who may be caught up in sexual exploitation. This is an area which requires and is getting further exploration and analysis to determine whether there is an issue within the borough in relation to this.

- This winter would see the launch of a 'publicity' programme whereby young people were targeted with detail of how they could receive advice and / or support should they felt in any way exploited, intimidated or fearful of any form of exploitation. This would be done by posters in key places where young people gather, youth facilities, toilet areas in nightclubs etc. The Sexual Exploitation Steering Group would oversee and monitor the effectiveness of this campaign by the use of a dedicated phone number on the posters and leaflets.

C & YPS have secured funding for staff at Risky Business, multi agency training was managed through the LCSB training budget, and ongoing operational issues such as the campaign referred to in the report submitted were dealt with and managed within the Steering Group in a multi agency way. There were no direct financial implications to consider other than an acknowledgement that, on a multi agency basis, this was a key and important area of work for all and that therefore, because cost pressures exist for all partners, it was imperative that ongoing work continued to prioritise the work in the face of competing demands.

The Board welcomed the extensive activity in place to tackle this difficult safeguarding concern.

Agreed:- (1) That the revised Sexual Exploitation Action Plan and its continued implementation be endorsed.

(2)   That the changes to the Risky Business Project be endorsed.

(3) That the progress being made within this area of work be welcomed.

182.   **STATUTORY GUIDANCE: REVISION TO THE ROLES AND RESPONSIBILITIES OF LEAD MEMBER FOR CHILDREN'S SERVICES AND THE DIRECTOR OF CHILDREN'S SERVICES**

Joyce Thacker, presented the submitted report which highlighted the key emphasis in the proposals contained in the Statutory Guidance: Revision to the roles and responsibilities of Lead Member for Children's Services and the Director of Children's Services, as issued in November 2008 by the Department of Children, Schools and Families.

Sections 18 (7) (Director of Children's Services) and 19 (2) (Lead Member for Children's Services) of the 2004 Act require local authorities to have regard to any guidance issued by the Secretary of State in exercising their functions for the purposes of these sections. Local authorities must take the final version of this guidance into account and, if they decide to depart from it, have clear reasons for doing so.

In November 2008, the DCSF issued a consultation paper on the revised statutory guidance on the roles and responsibilities of the Lead Member for Children's Services and the Director of Children's Services. Further to this consultation which closes on the 10th February 2009, revised statutory guidance would be published and replaced the 2005 publication *Statutory guidance on the roles and responsibilities of the Director of Children's Services and Lead Member for Children's Services.*

It was not proposed that the Council respond to the consultation rather than taking note of the proposed guidance, and await the final version for full consideration.

The guidance stated that resources from the local authority, other public agencies, the private sector, and the third sector were identified and that there were sufficient financial, human and other resources available to discharge the authority's statutory children's services functions and maintain service standards in the future.

The Board noted these proposals and referred to the possible links with the Local Strategic Partnership.

Agreed:- (1) That the report be received and noted for information.

(2) That, when the revised guidance is received post consultation, this be received in full at a future Board meeting.

(3) That the report be referred to the LSP Chief Executive's Group for consideration.

183.   APPRENTICESHIP UPDATE AND WAY FORWARD

Joyce Thacker, presented this report which gave an update of progress through 2008 with recruiting apprentices and young people aged 16-19, and recommendations to retain and promote further apprenticeship opportunities within RMBC and across key partners.

Children & Young People's Services secured further funding to offer a second tranche of apprenticeships within the Council. Directorates were also encouraged to offer additional apprenticeships funded from within their own resources and EDS agreed to directly fund one additional Business Administration Apprenticeship.

Strategic HR contacted all Directorates and finalised a list of apprenticeships offers. Details of these apprenticeships were attached at Appendix 1. Only the wages of these apprentices (£80 per week) were funded, not costs such as ICT, name badges, work travelling expenses etc. which were met by mainstream directorate budgets.

Two of the apprenticeships were extended as the most appropriate apprenticeship framework – General Maintenance Construction would take up to two years to complete.

As with the first apprenticeships the new opportunities were advertised by the Connexions Service in order to target the 16 to 18 age group, i.e. those young people that could fall into the Not in Education Employment or Training (NEETs) category. The apprenticeships were advertised during August/September. The criteria for recruiting to these vacancies included an assessment of the young people's capability of achieving a level 2 qualification verified by a pre-interview testing process and a subsequent interview. The Connexions service initially targeted young people who did not have confirmed destinations following leaving School i.e. admittance to College Courses or commencement of employment and widened this search as necessary. Officers from HR and C&YPs conducted an initial shortlisting exercise and then the HR Officer interviewed with the relevant manager, 3 young people were interviewed for each of the 12 apprenticeship opportunities.

One young person was already in the second year of their Business Admin apprenticeship within EDS and 4 further apprenticeships have since been recruited to in the 14-19 team, Youth Services and at Winterhill and Wingfield Schools respectively. Therefore at present the Authority have 24 apprenticeships within RMBC (details of all apprenticeships were attached at Appendix 1) as well as the 38 craft apprentices at Rotherham 2010.

A range of external funding from sources such as ESF, LSC and Harnessing Technology had been obtained by CYPS to fully fund 19 apprenticeships, 6 for 13 months, 11 for 12 months and 2 for up to two years. Each apprenticeship currently costs £4,480 per annum. However from 1 August 09, national minimum apprenticeship rates would increase from £80 per week to £95 per week. There are also 5 mainstream budget funded apprenticeships in the following areas: two in EDS, one in the 14-19 team and one each at Winterhill and Wingfield schools.

Apprentices would be encouraged to apply for any jobs which may arise

through normal recruitment channels and directorate budgets, as they neared completion of their apprenticeships.

The Board welcomed this excellent performance and suggested that all partners be asked to consider their full involvement in the use of apprentices.

Agreed:- (1) That the advances made in 2008 to recruit apprentices and young people in RMBC be noted.

(2) That continued discussions be held at a strategic level with key partners to encourage apprenticeship opportunities for young people.

(3) That the report be referred to the Local Strategic Partnership Board for consideration.

184. **SAFER SCHOOLS PARTNERSHIP**

Richard Tweed, South Yorkshire Police, presented the submitted report on the Safer Schools Partnership.

In April 2008 Rotherham Children and Young Persons services re-aligned their targeted services into Locality Teams. At the same time 7 Police Officers from the Rotherham District were deployed to work within locality Teams structure.

The Police Officers were referred to as Partnership based Young Persons Police Officers (PYPPO's) and were managed on a daily basis by the Senior Youth Worker as part of the Early Intervention Team element of the Localities Team. At the same time they were a direct link into the Safer Neighbourhood Team Structures.

PYPPO's have the following responsibilities:

- Administration and intervention of the reprimand, final warning and Charge referral process
- Integration into the secondary school structure with each PYPPO having responsibility for on average two schools
- Intervention work with young people at risk
- Engagement activity in local communities with young people.

The report highlighted some of the key successes to-date as a result of integrating the PYPPO's into the Locality Team Structure. These included:-

- Early intervention and joint working with Secondary schools
- Community Initiatives
- Development of new working practices
- Partnership working with other partners
- Work with the Magistrates Courts

- Introduction of the Safer Schools Partnership meeting
- Development of out of school groups involving young people at risk
- Development of the 'Praise Pod'
- The Fawkes Project
- Enhanced Information Sharing
- Lifestyle Awards

These were in addition to the obviously enhanced daily joint working, particularly around the sharing of information.

The Chairman advised that he had received many messages welcoming these proposals and informing him how successful they were. Board Members endorsed the impact that the new arrangements had on reducing crime and promoting good behaviour.

It was noted that recorded crime in and around the schools had reduced by 45.6% since April 2008 compared to the same period from April 2007.

Agreed:- That the contents of the report be noted.

185.   **MINUTES OF THE SAFEGUARDING BOARD HELD ON 12TH DECEMBER, 2008 AND 23RD JANUARY, 2009**

Key issues and concerns from the minutes of the Rotherham Safeguarding Children Board held on 12th December, 2008 and 23rd January, 2009 were discussed.

186.   **DATE AND TIME OF NEXT MEETING**

Resolved:- That the next meeting of the Children's Board he held on Wednesday, 22nd April, 2009 at 4.30 p.m.

PERFORMANCE AND SCRUTINY OVERVIEW COMMITTEE
27th February, 2009

Present:- Councillor Whelbourn (in the Chair); The Mayor (Councillor G. A. Russell), Austen, Barron, Burton, Gilding, J. Hamilton, Jack, McNeely and Swift.

Apologies for absence were received from Councillors Boyes and P. A. Russell.

180.   DECLARATIONS OF INTEREST

There were no declarations of interest made at this meeting.

181.   QUESTIONS FROM MEMBERS OF THE PUBLIC AND THE PRESS

There were no questions from members of the public or the press.

182.   PAYMENT OF INVOICES WITHIN THIRTY DAYS - FORMERLY BVPI 8

Further to Minute No. 109 of the meeting of this Committee held on 7th November, 2008, Sarah McCall, Performance Officer, presented the submitted report which detailed BVPI8 and how it measured the payment of undisputed invoices within thirty days.

The Council had agreed the following average annual targets for performance of BVPI8 with RBT:-

2007/08   96.3%
2008/09   97.0%
2009/10   97.5%

Outturn performance for 2007/08 achieved 94% which demonstrated an improvement on the 2006/07 outturn performance of 91%.

Performance against BVPI8 was not as consistent as it should be and it was recognised that the Council should act to instil and embed good practice in this area and work was ongoing to that effect. Recent performance had achieved:-

April   95%
May   92%
June   88%
July   90%
August   91%
September   91%
October   91%
November   93%
December   94%
January   90%

Average performance against BVPI8 for the year to date was 91.5%.

Discussion and a question and answer session ensued and the following issues were covered:-

-       reasons for the drop in performance in January, 2009
-       average performance targets
-       early payment discounts
-       costs should late payment result in referral to court
-       need for small businesses to receive early payment
-       adverse impact of ROCC system upgrade on BVPI8
-       directorate performance

Resolved:- (1) That the current position in respect of BVPI8 be noted.

(2) That a report be submitted to a future meeting of this Committee highlighting the performance of directorates regarding BVPI8.

(3) That, due to the problematic upgrade to the ROCC system adversely affecting the performance in respect of BVPI8, a report be submitted to the Sustainable Communities Scrutiny Panel explaining the nature of the problems.

183.   PROCUREMENT LOCAL PERFORMANCE INDICATORS

Further to Minute No. 134 of the meeting of this Committee held on 5th December, 2008, Sarah McCall, Performance Officer, presented the submitted report setting out the details of the indicators developed to date, targets and performance for the first, second and third quarters of the current year.

Of the eighteen indicators (details of which were appended to the report):-

-       two were status green
-       four were status amber with performance on target
-       one was status red
-       six were annual indicators with reporting due later in the year
-       one had been superseded by changing legislation
-       one was still under development
-       two were for information/monitoring only without targets
-       one had reporting yet to commence

Discussion and a question and answer session ensued and the following issues were covered:-

-       time factor regarding sourcing funding
-       increasing the Council's percentage of core trade spend with SME's

- percentage spend on electricity to continue to be procured from green sources and cost effective considerations
- procurement savings in accordance with current annual plan
- consideration of whole life costings at the tender stage
- award nomination for sustainable procurement

Resolved:- That the current performance against the indicators be noted.

184.   RBT QUARTER 3 PERFORMANCE

Mark Gannon, Transformation and Strategic Partnerships Manager, presented the submitted report summarising the performance of RBT against contractual measures and key service delivery issues for the third quarter of the current financial year across the areas of Customer Access, Human Resources and Payroll, ICT and Procurement.

Work had continued during Quarter 3 to implement the new suite of measures, however, new reporting mechanisms had required development and implementation and in some cases changes to ways of working. The majority of measures were now being reported, but work was ongoing on the remainder. Full details of performance against operational measures for all workstreams were set out in detail as part of the report.

A Service Review Board, comprising key officers from the Council and RBT, had been established and met monthly to look at cross cutting performance with the objective of dealing promptly with issues.

Paul Briddock, Service Director, Information Systems and Customer Services and Anne Hawke, Principal Officer, Service and Contractual Performance, assisted Mark in the ensuing discussion and question and answer session which covered:-

- representation on the Service Review Board

- Maltby switchboard transfer and associated problems

- technology for the Aston Joint Service Centre

- extension of Pathfinder Project

- Council house repairs system

- ISO9001 accreditation and audit stages

- staff training in respect of IS09001 accreditation and advantages of accreditation

- impact of ROCC system upgrade on payment of invoices

- financial penalty regarding under performance

- clarification of performance presentation information

Resolved:- That RBT's performance against contractual measures and key service delivery issues for October, November and December, 2008 be noted.

185.   **QUARTER 3 PERFORMANCE 2008/09**

Further to Minute No. 138 of the meeting of this Committee held on 5th December, 2008, Julie Slatter, Head of Policy and Performance, presented the submitted report relating to the above which focused on the new national indicator set and key local indicators.

The report addressed the main areas of performance across the Council and examined issues relating to the Local Area Agreement (LAA), Corporate Plan and Comprehensive Performance Assessment (CPA) Service Block scores.

The report covered:-

- LAA
- Corporate Plan performance
- Direction of Travel (DoT)
- Performance Clinics
- Data Quality
- CPA
- Human Resources
- Awards
- National Indicator Benchmarking

Julie also gave a presentation which covered:-

- Focus
- Corporate Plan/LAA Performance Indicators
- Strong Improvement
- Areas for Concern
- Future Performance Clinics
- CPA Direction of Travel
- CPA Block Scores
- PWC Benchmarking
- Priorities for Quarter 4 Performance

Discussion and a question and answer session ensued and the following

issues were covered:-

- NI 195b   Improving street and environmental cleanliness (detritus) : need for a performance clinic

- timeliness of older people's assessments

- mental health assessments

- PAF C32   Older people helped to live at home per 1000 population aged 65 or over : budget and performance target data

- breakdown of funding re PAF C32 between the Council and NHS

- costs of absence from work

- impact of national campaigns on local Chlamydia screening

- alcohol strategy, commissioned DVD about under age drinking and the work of the Licensing Committee

- Housing CPA score

- PWC benchmarking

- NI 155 number of affordable homes delivered

- DN 110   young people's participation in positive activities

- NI 055   obesity in primary school age children in Reception

- NI 056   obesity in primary school age children in Year 6

- need to identify ownership of measures by scrutiny panel

Resolved:- (1) That, as far as this Committee is concerned:-

(a) the overall position and direction of travel in relation to both overall performance and to the Audit Commission's CPA Direction of Travel Indicators performance be noted.

(b) performance clinics, as now reported, be conducted in Quarter 4.

(c) each directorate produce a revised performance reporting schedule which includes the deadlines for their internal and partner related reports

(d) all directorates should carry out data quality checks on performance indicators in each quarter

(e) all directorates use PerformancePlus to input Quarter 4 performance information

(2) That Cath Saltis and Julie Slatter liaise regarding a way forward on the indicators and consideration of such by the appropriate Scrutiny Panel.

186.   DATA QUALITY MANAGEMENT 2008

Further to Minute No. 51 of the meeting of the Audit Committee held on 21st January, 2009, Julie Slatter, Head of Policy and Performance, presented the submitted report which detailed how, in May, 2006, the Audit Commission published its new methodology for assessing data quality management within local authorities. The overarching objective of the new approach was to ascertain whether the Council had proper management arrangements for data quality.

The report detailed the findings from the recent KPMG data quality audit conducted from July to October, 2008 which classified the Council's data quality arrangements as performing strongly.

The review of management arrangements was structured around five themes:-

- Governance and Leadership.
- Policies and Procedures.
- Systems and Processes.
- People and Skills.
- Data Use.

These were broken down into thirteen Key Lines of Enquiry (KLoEs) and each theme was scored.

Overall management arrangements had been rated as 'performing strongly' and the report set out in detail how KPMG had rated each of the five themes assessed as part of the data quality management arrangements assessment, with no recommendations for improvement under any of the themes.

As part of the Performance Indicator Testing, KPMG audited the five indicators as part of the audit process.

It was also noted that there was no longer a requirement for the Best Value Performance Plan to be audited in accordance with the Audit Commission's Code of Audit Practice.

There were no direct financial implications. The costs associated with the data quality audit were included in the charges contained within the Annual Audit Plan 2008/09 which highlighted that the planned cost for KPMG to conduct their scheduled work in relation to both Use of Resources and Data Quality 2007/08 was £119,000.

It was likely that the same approach for assessing data quality would be used in 2008/09.

Many of the Performance Indicators (PI) that KPMG chose to examine were CPA measures – any amendments or qualifications would have impacted on the Council's service block scores and overall CPA rating.

The mitigating actions taken by directorates in terms of quality assurance and data management were successful. Lead officers and PI managers involved in the audit should be congratulated on this achievement as the external audits were more robust than in previous years.

Discussion and a question and answer session ensued and the following issues were covered:-

- sharing of data and holding partners to account
- Children and Young People's Services review
- possibility of regular meetings with data quality managers
- corporate, uniform approach to data quality management necessary
- ownership of data quality management
- protocols and use of data

Resolved:-   That the findings in the data quality report be noted.

187.   COUNCILLOR CALL FOR ACTION

Resolved:- That this matter be considered as part of the away day discussions.

188.   AWAY DAY

Resolved:- That the meeting of this Committee scheduled for 27th March, 2009 be utilised for the away day discussions. The meeting to commence at 9.00 a.m.

189.   MINUTES

Resolved:- That the minutes of the meeting held on 13th February, 2009 be approved as a correct record for signature by the Chairman.

190.   WORK IN PROGRESS

Members of the Committee reported as follows:-

(a) The Mayor reported :-

(i) the scrutiny review report regarding support for newly arrived children in schools was being finalised and it was hoped to submit to the Children and Young People's Services Scrutiny Panel in April

(ii) the scrutiny review of road traffic safety around schools was well under way and there had been a fantastic response from the public

(iii) members of the Children and Young People's Services Scrutiny Panel were involved in the Annual Health Check along with members of the Adult Services and Health Scrutiny Panel

(iv) the next meeting of the Children and Young People's Services Scrutiny Panel was to consider:-

-   childhood obesity
-   school meals
-   annual performance assessment action plan
-   quarter 3 performance report

(b) Councillor McNeely reported:-

(i) the scrutiny review of key choices was about to meet to review evidence and determine recommendations. Views were invited from members of this Committee.

(ii) the planning stage had begun in respect of the scrutiny review of voids turnaround which would be a 'select committee' style hearing

(iii) the next meeting of the Sustainable Communities Scrutiny Panel was to consider:-

-   presentation on the work of Rotherfed
-   performance report
-   adaptations

(c) Councillor Austen reported:-

(i) the Debt Management review group had held its first meeting and two further meetings were scheduled in the next two weeks

(ii) yesterday's meeting of the Democratic Renewal Scrutiny Panel had considered:-

-   Proud Theme Local Area Agreement Indicators

-   Financial Inclusion Action Plan

-   Local Government Reform – Implementation Plan

191.   CALL-IN ISSUES

There were no formal call-in requests.

192.   EXCLUSION OF THE PRESS AND PUBLIC

Resolved:- That, under Section 100A(4) of the Local Government Act 1972, the press and public be excluded from the meeting for the following item of business on the grounds that it involves the likely disclosure of exempt information as defined in Paragraphs 1 and 3 of Part I of Schedule 12A to the Local Government Act 1972 (staffing and financial/business affairs).

193.   RBT QUARTER 3 PERFORMANCE UPDATE ADDITIONAL INFORMATION

Mark Gannon, Transformation and Strategic Partnerships Manager, presented the submitted report summarising RBT's performance in respect of procurement savings achieved and the Revenues and Benefits Service and was taken in conjunction with Minute No. 184 above.

The report covered:-

- savings performance
- addressable spend tracking
- Council Tax
- NNDR
- other service measures

Discussion and a question and answer session ensued and the following issues were covered:-

- Council Tax payment methods
- debt recovery review
- potential inclusion of a benefit claim form in Council Tax notifications

Resolved:- That RBT's performance against contractual measures and key service delivery issues for October, November and December, 2008 be noted.

PERFORMANCE AND SCRUTINY OVERVIEW COMMITTEE
13th March, 2009

Present:- Councillor Whelbourn (in the Chair); The Mayor (Councillor G. A. Russell), Austen, Barron, Boyes, Burton, J. Hamilton, McNeely, P. A. Russell and Swift.

An apology for absence were received from Councillor Jack.

194.   DECLARATIONS OF INTEREST

There were no declarations of interest made at this meeting.

195.   QUESTIONS FROM MEMBERS OF THE PUBLIC AND THE PRESS

There were no questions from members of the public or the press.

196.   CORPORATE RISK REGISTER

Colin Earl, Director of Internal Audit and Governance, presented the submitted report which showed the latest position in how the Council's most significant risks were being managed.

The reporting format had two key features:-

−   An 'At a glance' picture of corporate risks both before and after risk management action

−   A more detailed register that reflected the position of each corporate risk as at 31st December, 2008

The risks contained in the register required significant ongoing management action.   In some cases additional resources may be necessary to implement the relevant actions or mitigate risks.   Any additional costs associated with the risks should be reported to the Corporate Management Team for consideration on a case by case basis.

It was important to review continuously the effectiveness of our approach to capturing, managing and reporting corporate risks.   The report was aimed at retaining the top score of 4 in the Use of Resources Key Lines of Enquiry.

Discussion and a question and answer session ensued and the following issues were covered:-

−   additions to the register

−   proposed deletions from the register

−   voids turnaround

–   reservoirs

–   bereavement: reporting structure/monitoring arrangements

–   scrutiny of functions commissioned out

Resolved:- (1) That the updated corporate risk register and the absence of any residual red risks be noted.

(2) That assurances be sought as necessary from Strategic Directors on how risks were being managed.

(3) That Colin Earl be invited to participate in the ongoing review of voids turnaround.

(4) That a report be submitted to the Regeneration Scrutiny Panel in respect of potential risks associated with reservoirs.

197.   COMPREHENSIVE AREA ASSESSMENT FRAMEWORK

Julie Slatter, Head of Policy and Performance, presented the submitted report indicating that Inspectorates had now published the Comprehensive Area Assessment (CAA) Framework which would be effective from 1st April, 2009.

The report summarised the key elements of the Framework including proposals on what the assessments would look like, how evidence would be gathered and how the CAA would be delivered. It also highlighted a proposed way forward on how the Authority and partners took forward the new Framework and Scrutiny's involvement in the CAA process.

The new Framework was designed to connect inspection and assessment activity across local government and key partners. As well as sharing the national indicator set and local area agreement targets, partner assessments would all use similar methodologies and be reported through a shared, public facing website.

The report covered:-

–   the assessment

–   how CAA would be undertaken

–   reporting CAA

–   next steps

–   key issues

– baseline assessments

– awareness

– role of Scrutiny

Discussion and a question and answer session ensued and the following issues were covered:-

– area and organisational elements

– evidence gathering

– need to get at information behind the statistics and build in more scrutiny

Resolved:- (1) That the content of the summarised detail relating to the CAA Framework and the role of Scrutiny in the process be noted.

(2) That, as far as this Committee is concerned, the proposals for ensuring the Framework is implemented throughout the Authority and in our partnership working be approved.

198. REVIEW OF THE USE OF CONSULTANTS

Further to Minute No. 147 of the meeting of this Committee held on 19th December, 2008, Councillor Whelbourn introduced the submitted report relating to the above, setting out the findings and recommendations of the review group. Highlighted were the background to and rationale for the review, membership, scope, terms of reference, summary of findings and key recommendations and specific questions around which the review was based.

Discussion and a question and answer session ensued and the following issues were covered:-

– need for a directory of best practice and expertise available from other local authorities, maintained centrally so they could be considered as an alternative to the appointment of a consultant

– appropriate use of consultants

– need for a standard practice for the appointment of consultants

– need to know where there are bad practicing consultants

– potential utilisation of retired employees

– skill sharing within the Council

- need to look at the required output prior to deciding to appoint consultants

- examples of good practice on the use of consultants

- need for regular monitoring of the use of consultants perhaps via regular audit reports

- need to evidence why consultants were used

- breakdown of expenditure on the appointment of consultants

- authority to appoint consultants

Resolved:-   (1)   That the review, together with the findings and recommendations, be supported.

(2) That the review and its recommendations be forwarded to Cabinet for consideration.

(3) That everyone involved in the review be thanked for their time, effort, contribution and commitment.

199.   HEALTH INEQUALITIES REVIEW

Steve Turnbull, Head of Public Health, presented the submitted report indicating that KPMG and the Audit Commission had undertaken a review of actions to address health inequalities across both the PCT and the Council. The report highlighted the recommendations of the review and assessed their deliverability and timescales.

The review focused on three main areas that reflected some of the priority public health issues. These were:

- teenage conceptions
- breastfeeding
- affordable warmth

Findings and recommendations were made in the following areas:-

- strategic approach
- partnership working
- performance management
- assessment of impact

Attached as appendices to the report were the final version of the report and the action plan.

24T **PERFORMANCE AND SCRUTINY OVERVIEW COMMITTEE - 13/03/09**

It was noted that the Audit Committee, at its meeting on 18th February, 2009, had agreed the action plan subject to required discussions on timescales and deliverability.

Discussion and a question and answer session ensued and the following issues were covered:-

−   NHS Rotherham priorities and compatibility with Council priorities

−   important not to concentrate on specific illnesses rather than overall wellbeing

−   textual inaccuracies

−   WarmFront

−   lack of information regarding NHS Rotherham actions in respect of (i) working withTRFT to continue the development of its public health strategy (ii) supporting the reduction in teenage conceptions through strategies consistent with Teenage Pregnancy Partnership Board and (iii) improving breastfeeding rates

−   resources to implement findings and funding of Audit Commission/KPMG work

Resolved:- That consideration of this matter be deferred pending further information and clarification of the report content as now discussed.

200.   **MINUTES**

Resolved:- That the minutes of the meeting held on 27th February, 2009, be approved as a correct record for signature by the Chairman.

201.   **WORK IN PROGRESS**

Members of the Committee reported as follows:-

(a)   Councillor McNeely reported that the first meeting in respect of the Scrutiny Review of voids turnaround had been held yesterday to agree the Group's terms of reference.

(b)   Councillor Boyes reported that the Scrutiny Review of road traffic safety around schools was ongoing.

(c)   On behalf of the Mayor, it was reported that the latest meeting of the Children and Young People's Services Scrutiny Panel had considered:-

-       childhood obesity
-       school meals

- annual performance assessment action plan
- quarter 3 performance report

(d) Councillor Barron reported that the first meeting had been held in respect of the review of supporting people to live at home.

202. CALL-IN ISSUES

There were no formal call-in requests.