

Joint area review

Sunderland Children's Services Authority Area

Review of services for children and young people

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

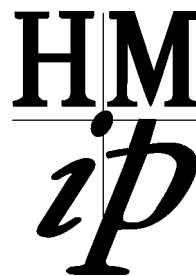
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ADULT LEARNING
INSPECTORATE



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Introduction

1. This joint area review was conducted using the arrangements required under Section 20 of the Children Act 2004. It was carried out by a multi-disciplinary team of seven inspectors from the Office for Standards in Education (Ofsted), the Commission for Social Care Inspection (CSCI), the Healthcare Commission (CHAI), the Adult Learning Inspectorate (ALI) and the Audit Commission. The review was undertaken according to the requirements of the *Framework for the Inspection of Children's Services*.

2. The review was linked to the contemporaneous corporate assessment of the local council by the Audit Commission and its findings are represented in the relevant part of the corporate assessment report.

3. This review describes the outcomes achieved by children and young people growing up in the Sunderland area and evaluates the way local services, taken together, contribute to their well-being. Joint area reviews focus on the extent to which children and young people are healthy, safe, enjoy and achieve, make a positive contribution, and are well prepared to secure economic well-being.

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

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

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

6. The second stage included inspection fieldwork. This included studies of how far local services have improved outcomes for a small sample of children and young people, some of whom have the most complex needs, and a study of provision in one neighbourhood in Sunderland. It also included gathering

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

Context

7. Sunderland is the largest city in the north east region and includes the former new town of Washington and the former coal mining areas of Houghton and Hetton. It is part of the Tyne and Wear sub-region and is located on the coast straddling the mouth of the river Wear in the south of the area. Sunderland has a long and proud history of heavy industry including coal mining, shipbuilding and glassmaking. By the early 1990s, the first two of these industries had totally disappeared and the third was greatly diminished. All the pits and shipyards are now closed and the city has had to reinvent itself and its economic base.

8. There has been considerable investment in the area and a major growth of service industries, including telecommunications and call centres. The Nissan car manufacturing complex, which employs and utilises the skills of many former miners and shipyard workers, is the most productive car plant in Europe and a symbol of the city's regeneration. However, there are still areas of high unemployment in the city and some mismatch between the skills of the workforce and the requirements of new industries. Sunderland AFC and its base at the Stadium of Light is held in high esteem by city residents and has close links with the Children's Services department.

9. The population of the city is 283,700 people, of whom only 1.9% overall are from an ethnic minority background; this percentage is increasing and 2.6% of school age pupils are from minority ethnic groups, with Bangladeshi and Filipino children forming the largest groups. In some areas of the city there are high levels of poverty, deprivation and ill health, with 46.1% of the resident population living in areas ranked amongst the 20% most deprived in England and Wales. Crime has recently fallen below the national average for the first time. Drug and alcohol abuse are above the national average. While the population has steadily declined in recent years, the mid-2005 estimate has recorded the first rise since 1993. The number of older people is increasing. There are 68,300 children and young people aged 0–19, who make up 24% of the total population. 27.1% of dependent children live with lone parents compared to the England average of 22.8%.

10. The city of Sunderland is a metropolitan district. Labour has overall political control of the council holding 57 council seats, with 13 Conservatives, four Independent and one Liberal Democrat. All four Members of Parliament are Labour. Children's Services are a clear priority for the council and there is

strong cross-party support for the children's agenda and the Children's Trust partnership. The council area is served by the Northumbria Police Authority. A large number of national and local-based voluntary and community organisations are active in the council area. There are strong partnerships in evidence and the voluntary sector is well represented on strategic level partnerships.

11. Primary health care for children in the city is provided by the Sunderland Teaching Primary Care Trust (TPCT) which is coterminous with the council's area. City Hospitals Sunderland NHS Foundation Trust is the main provider of acute health services. They also provide tier 3 Child and Adolescent Mental Health Services (CAMHS) for children up to 16. Northumberland, Tyne and Wear NHS Trust provides tier 3 CAMHS to 16-18 year olds and all tier 4 services. The North East Ambulance Service NHS Trust provides ambulance services to the whole of the council and the surrounding area. All the trusts providing health services for the children of Sunderland fall within the North East Strategic Health Authority.

12. There are nine nursery schools and 83 primary schools whose capacity ranges from 103 to 415 places. There are 18 secondary schools ranging in size from 675 to 1,542 places. One secondary school with only 150 children on roll is closing shortly and the children will be maintained in their year groups on transfer. There are seven special schools of which two are primary, two are secondary, one is all-age, one is Key Stages 2 and 3 and one is Key Stage 4 only. There is one Pupil Referral Unit (PRU). There are 304 childminders and 116 day-care providers, of whom 57 are private or voluntary and 59 are operated by schools. There are 32 private, independent or voluntary providers of nursery education.

13. The local Learning and Skills Council (LSC) is a partner with the council, college, schools, university, Connexions and training providers in delivering the 14 to 19 Strategy. Three Roman Catholic faith secondary schools have sixth forms attached; there are collaborative sixth form arrangements with the college and 11-16 schools in place which enable joint governance and management in three new sixth forms. Work-based learning is the responsibility of a large number of local training providers. Approximately 40 national providers contract with the LSC to deliver services to Sunderland residents. One provider, Springboard, manages provision for young people in the Entry to Employment (E2E) programme and they subcontract this to a further eight providers. Adult and community learning, including family learning, is the responsibility of the local council and is commissioned through a range of other providers including the college. This provision is delivered in a variety of local community venues and schools.

14. There are no young offender institutions in the Sunderland area. Placement for both remand and sentence to custody are, in the majority of cases, at Castington Young Offenders Institution, approximately 45 miles from Sunderland.

15. Sunderland established its Children's Trust arrangements in September 2004. The Director of Children's Services was appointed in November 2005 and, following a review, has put in place a children's services department structured round the Every Child Matters outcomes. The children's services leadership team includes a health improvement lead, funded through the TPCT. The Deputy Director of Children's Services takes a strategic overview of cross-cutting areas such as looked after children, children with learning difficulties and/or disabilities and commissioning. The local council has assessed 2,446 children and young people as 'in need'; of those 426 are looked after, 197 are on the child protection register, and 272 are being provided with services due to a disability.

Summary report

Outcomes for children and young people

16. Outcomes for children and young people in Sunderland are good in enjoying and achieving, making a positive contribution and achieving economic well being. Health outcomes are variable and reflect the level of social deprivation in the city. They are adequate in staying safe.

17. Children and young people are generally healthy. The number of mothers who breastfeed their babies is improving markedly from a low base and is now just below national averages. The conception rate amongst 15 to 17 year olds is higher than the national average but is decreasing at a faster rate than elsewhere in the region and throughout England. The percentage of babies with a low birth weight is in line with similar areas. Immunisation rates are high and increasing. The level of chlamydia diagnoses in 16 to 19 year olds is significantly higher than the average in England but diagnoses for under 16s are in line with the national average. The health of looked after children is very good. Admissions to residential establishments for children and young people with learning and/or physical disabilities have reduced with increasingly good quality services provided in the community and in the home.

18. Children and young people appear to be generally safe. Most children reported feeling safe in many areas of Sunderland but they have concerns about safety in some areas of the city. The rate of serious road accidents involving children has reduced, but remains above the national average. Levels of reported domestic violence are decreasing but remain high. There has been a significant reduction in numbers of children on the child protection register. This fall in numbers is significantly better than the national average. All children on the child protection register have an allocated qualified social worker and most are reviewed within timescales.

19. Children are well prepared for and enjoy school. Educational standards are in line with those of similar authorities up to age 11, with significant progress made at ages 14 and 16. At age 14 improvements in English, mathematics and

science are better than the national average. GCSE results for those achieving 5+ good grades have shown a marked improvement and are now better than similar areas. The achievement of pupils from the Bangladeshi community has shown significant improvement and is now better than the national average. Standards for looked after children are improving and at age 16 are higher than the national average, although still below those achieved by many other groups of children. Children and young people with learning difficulties and/or disabilities generally make good progress in school. Attendance has steadily improved and is in line with national figures and those of statistical neighbours. Permanent exclusions are very low; fixed exclusions are declining and are below similar authorities and national figures. There were no looked after children permanently excluded in 2005/06.

20. Children and young people have a wide range of opportunities to make decisions that affect their lives and make a contribution to their communities. Many services routinely and systematically engage children and young people in key decisions affecting their lives. The number of entrants to the youth justice system and the rate of re-offending are higher than for similar areas, although figures are falling; for re-offenders there has been a reduction in the seriousness and frequency of offending. However, the rate of offending for looked after children is decreasing and is now below the national average of 3%.

21. Rates of participation in further education and training at age 16 have increased significantly and are broadly in line with national average. Success at A level is very good, with an average points score well in excess of national averages. Overall success rates for all work-based learners have improved significantly and are now just above the national average. Most young people have access to decent and affordable housing. The numbers of young people having to use bed and breakfast accommodation, and average length of stay, is less than the national average.

The impact of local services

22. **The impact of local services in improving outcomes for children and young people is good overall with individual services varying between adequate and good.** There is very good partnership working across agencies on health issues and a number of new initiatives to tackle public health issues for children and their families. Universal services work well to keep children and young people safe but there are some weaknesses in the assessment of children in need and in some areas of child protection activity. Education services are good and have a clear impact on the achievement of children and young people. Leisure and recreation activities are good and most young people enjoy and benefit from their leisure time, although young people from black and minority ethnic groups are sometimes deterred from taking part in activities because of fears for their personal safety.

23. Opportunities for consultation and participation by young people are very good and there is good evidence that young people are able to influence decisions about their own lives and service development. Although aspects of this work are outstanding, the fact that some black and minority ethnic children and young people say they experience high levels of racism, means that the impact of services on making a positive contribution is good rather than excellent. Collaborative working ensures a wide range of vocational and academic courses is available to young people with generally good take-up rates, except for A level.

Being healthy

24. **The impact of all local services in securing the health of children and young people is good.** Partnership working across agencies on health issues is very good. Some measures of health are below national averages, but many are improving at a fast rate due to concerted efforts from all agencies. There is a good range of multi-agency initiatives targeted at groups with particular health needs, including those on breastfeeding, smoking, healthy eating, sexual health, physical activity and emotional well-being. There has been effective work to identify and develop plans to respond to the health needs of black and ethnic minority communities in Sunderland. Some parents are still experiencing difficulty accessing appropriate healthcare but improvements are being made at a rapid pace.

25. A strong Healthy Schools programme is in place, notably Food in Schools, and there are examples of effective partnership working, including outreach programmes between primary and secondary health services and education. There are good hospital services for children and robust links between in and outpatient services, primary health care teams and child protection services. Good, open access arrangements are in place between CAMHS and other agencies, including telephone advice clinics and a programme of 'drop ins' in secondary schools.

26. Children and young people who are looked after and their carers receive an excellent service from the OK2 health team. Carers can access this service directly. Close working between all agencies ensures the early identification of children with learning difficulties and/or disabilities. A named health visitor carries out the 'lead professional' role for children under five, to coordinate services and act as the main point of contact for families. Parents value opportunities to have their views and concerns about services heard and would welcome more such opportunities, particularly in relation to benefit entitlements, communication with service providers and consultation on service development.

Staying safe

27. **The work of all local services in keeping children and young people safe is adequate. There are good universal services but those for some of the most vulnerable children have some weaknesses.** Most

children report that they feel safe. There is a good range of accident prevention schemes, with high quality information for children and their parents on being safe provided in and out of schools. Good developments have enabled better co-ordinated responses to vulnerable children in the community, with a good range of voluntary sector activity. The Council's Community Support Team offers extensive preventative services for those at highest risk of becoming looked after. There is good work across agencies to identify and track missing children. The Local Safeguarding Children Board (LSCB) has an enhanced membership and is developing work plans well for the wider safeguarding issues. Good safe recruitment practices are in place across all the agencies. Education and health child protection advisers support their staff well.

28. All children on the child protection register are allocated to qualified social workers and appear to be well protected with good multi-agency work, plans and communication between agencies. Many frontline social workers and their managers have responsibility for supporting very high numbers of children at risk. Most looked after children spoke well of the services they received. Family placement and residential services are good, with most children being placed close to their families and friends. Foster placements are stable and the need for external placements has been maintained at a low level compared to similar areas. At the time of the review the designated children's complaints manager was located within adult services and the advocacy service for looked after children did not always meet regulatory requirements. Services for children and young people with a learning difficulty and/or disability are good, with established and effective multi-agency working and information sharing systems, particularly in the early years sector. Levels of domestic violence in the city are high although decreasing, with robust links between children's services and the police.

29. Child protection activity is significantly higher than in similar areas and there has been concerted effort to reduce this and provide alternative support through children in need systems. However, the drive to reduce child protection activity is not sufficiently embedded in the partnership working of the LSCB. This has resulted in some children's social care staff being unclear about changes in their roles. Thresholds for services for children in need and child protection are not sufficiently clear and understood by all partner agencies. At the time of the review, the work of the Initial Response Team was not operating to national guidance. The council's performance information, electronic database and quality assurance systems do not identify or deal with these significant issues.

Enjoying and achieving

30. **The impact of all local services in helping children and young people to enjoy their education and recreation and to achieve well is good.** There is a strong partnership between the council and its partners, who are committed to inclusive practice and further raising standards of achievement. Parents and carers receive good support and young children are

well prepared for and enjoy school. Support and challenge to early years settings and schools is good and progress in raising standards has been particularly effective at ages 14 and 16. Standards achieved by Bangladeshi pupils (the largest black and ethnic minority group) are good. Pupils with learning difficulties and/or disabilities make good progress. Support for schools causing concern is effective resulting in a very low proportion being identified by Ofsted. Home educated children and young people are monitored in line with minimum standards and provision overall is good.

31. There are sufficient school places and planning has effectively reduced surplus places in the primary sector, although there remains a significant number of surplus places post-11. Attendance has been improving, permanent exclusions are very low and fixed exclusions are reducing. The innovative and very effective Every Schoolday Counts initiative has had demonstrable impact and is highly valued. Support for behaviour is good. There has been improvement in the attendance and achievement of looked after children. Children and young people with learning difficulties and/or disabilities make good progress and they and their parents are provided with effective support. Access to a wide range of enrichment and voluntary learning activities is good, although young people from the black and minority ethnic community remain concerned about their safety in some areas of the city. There is a lack of support for young people discharged from secure establishments who experience delays in accessing education on return to the community.

Making a positive contribution

32. **The impact of all local services in helping children and young people to contribute to society is good.** Some aspects of the work are outstanding, but some black and minority ethnic children and young people say they experience high levels of racism. Individual children with a broad range of needs receive very good support to develop socially and emotionally and to cope with changes and difficulties in their lives as a result of a strong focus on multi-agency approaches. Parents and carers receive a wide range of support to help them maintain positive relationships with their children. Almost all children and young people find it easy to get help, advice or information when they need it.

33. The attention given to ensuring that children and young people are consulted about key developments in services, participate in the delivery of services and are engaged in decisions that affect their lives is outstanding. It is routine and systematic in many services. The range of consultative forums is impressive. Children and young people have been highly successful in bringing about many improvements to services. However, looked after children and young people are not in regular contact with and not able to influence directly the corporate parenting agenda. There are several well-established programmes to reduce anti-social behaviour that have been recognised nationally for the quality of their work and the youth offending service makes

effective use of a comprehensive range of specialist support programmes to meet the needs of young people who offend.

Achieving economic well-being

34. **The impact of all local services in helping children and young people achieve economic well-being is good.** Excellent partnership arrangements exist between the local council and key strategic partners. The level of interventions of the Connexions service is high. The service maintains a strong presence in schools and, although targeted towards the most vulnerable groups, the service ensures all young people receive individual appointments. Young people from minority ethnic groups are well represented in employment, education and training. Collaborative working between schools, work-based learning providers and City of Sunderland College is good, ensuring a wide range of vocational and academic courses. Transition from school to post-16 education and training is good and well supported. The future planning for entry level programmes, however, is unclear.

35. The council has made significant investment in projects across the city that are targeted to the neediest areas and the council now works well to involve children and young people in community regeneration initiatives. Leisure and sporting facilities are satisfactory although the cost of transport remains a barrier to some. Most young people have access to decent and affordable housing; however, those who have challenging behaviour find it difficult to find appropriate accommodation. Sunderland uses a good range of schemes to encourage children who are looked after into work. Agencies make effective use of communications passports to share information between services about young people with learning difficulties and/or disabilities.

Service management

36. **The management of services for children and young people is generally good. Despite some weaknesses in safeguarding, the capacity to improve further is good.** The Children and Young People's Plan contains clear and challenging ambitions with associated targets. However, target-setting is only adequate, with some targets missing and a few insufficiently challenging or unrealistic. The plans are based on extensive analysis of needs and excellent consultation with children and young people, including vulnerable groups. Clear, robust priorities, shared and understood by middle managers and frontline staff, are set out in the Plan. There are sound strategies to deliver these priorities and detailed action plans. Children and young people are heavily involved in the design and evaluation of services. Multi-agency groups are very effective in identifying and collectively acting upon the needs of individual children and young people.

37. The capacity of local services to deliver children's services is good overall. There is a well-established Children's Trust with appropriate representation. The links to the LSCB and to the Sunderland Partnership are good. There are good mechanisms to improve value for money in the council. While the council has

taken effective action on primary school surplus places, it has not tackled spare places in secondary schools sufficiently vigorously. Joint commissioning is adequate, but the council commissions extensive services from the voluntary sector well. There is a good approach to performance management which has yielded improved outcomes in some areas. However, there are some weaknesses in performance measurement and management in some aspects of safeguarding; the council is acting on these.

38. The capacity of local services to improve further is good. The leadership of the partnership and within the council is good. The Director of Children's Services brings a very outcome-focused vision for children and young people, with a clear determination that improvements can and will be made. Overall the quality of management is good, but there are some weaknesses in the safeguarding of children and young people. The partners have agreed a sound workforce development strategy, which acknowledges shortages in some specialisms. Most outcome measures show improvement over recent years, some faster than the national rate. The track record on recent major projects is good.

Grades

Grades awarded:

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

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

Recommendations

For immediate action

The council should ensure that:

- assessment, child protection and children in need services in social care are working to the national guidance, *Working together to safeguard children*.¹
- the quality assurance of files and casework is effective
- key performance indicator data in children's social care is accurate and fit for purpose
- workload management systems are effective.

For action over the next six months

- Improve communication in relation to contact with health agencies for minority ethnic communities.
- Improve value for money through joint commissioning of services.
- Seek further opportunities for parents and carers of children and young people with learning difficulties and/or physical disabilities to contribute their views about services.

For action in the longer term

- Take action to tackle racism so that young people from black and ethnic minorities can feel safer in the city.

Main report

Outcomes for children and young people

39. Outcomes for children and young people in Sunderland are good in enjoying and achieving, making a positive contribution and achieving economic well being. Health outcomes are variable and reflect the level of social deprivation in the city. They are adequate in staying safe.

40. Children and young people are generally healthy. The number of mothers who breastfeed their babies is improving markedly from a low base and is now just below national averages. The conception rate amongst 15 to 17 year olds is higher than the national average but is decreasing at a faster rate than elsewhere in the region and throughout England. The percentage of babies with a low birth weight is in line with similar areas. Immunisation rates are high and increasing. The level of chlamydia diagnoses in 16 to 19 year olds is significantly higher than the average in England but diagnoses for under 16s are in line with the national average. The health of looked after children is very

¹ *Working together to safeguard children* (ISBN 13: 978 0 11 271187 2), The Stationery Office, 2006.

good. Admissions to residential establishments for children and young people with learning and/or physical disabilities have reduced with increasingly good quality services provided in the community and in the home.

41. There is a dedicated health team for looked after children and basic health checks and other measurements are very good. Arrangements for easy access to specialist services such as CAMHS are in place. High referral rates to the service are being managed through a new approach to assessment and consultation. Admissions to residential establishments for children and young people with learning and/or physical disabilities have reduced due to work by all agencies to provide good quality services in the community and wherever possible in the home.

42. **Children and young people are generally safe in Sunderland.** Most children reported feeling safe, however, they have varying levels of concern about their safety in some areas of the city. There has been a reduction in the rate of children killed or injured in serious road accidents, however, this remains higher than similar authorities. All children on the child protection register have an allocated qualified social worker and most are reviewed within timescales. There are delays in addressing some children's needs, including child protection concerns. The proportion of the child population looked after is reducing steadily and most looked after children and young people are in effective, stable placements. Reviews of looked after children are held within timescales and nearly all children participate in their reviews. Disabled children and their families have access to a range of support services, including short break care, family aides and support to access day care.

43. **The overall educational achievement of children and young people is good.** Children are well prepared for and enjoy school. Educational standards are in line with those of similar authorities up to age 11 with significant progress made at ages 14 and 16. At age 14 improvements in English, mathematics and science are better than the national average. GCSE results for those achieving 5+ good grades have shown a marked improvement and are now better than similar areas. The achievement of pupils from the Bangladeshi community has shown significant improvement and is now better than the national average. Standards for looked after children are improving and at age 16 are higher than the national average although still below those achieved by many other groups of children. Children and young people with learning difficulties and/or disabilities generally make good progress in school. Attendance has steadily improved and is in line with national figures and those of similar authorities. Permanent exclusions are very low, and fixed exclusions are declining and are below similar authorities and national figures. There were no looked after children permanently excluded in 2005/06. There are very good opportunities and participation in enrichment and voluntary activities.

44. **Children and young people have an excellent range of opportunities to make decisions that affect their lives and many make a good contribution to their communities.** There is an extensive range of

groups through which young people are able to express their views. Many services ensure that children and young people are routinely and systematically engaged in key decisions affecting their lives, including looked after children and those with learning difficulties and/or disabilities. The majority of children and young people find it easy to have a say in the way things are run in schools. The number of entrants to the youth justice system and the rate of re-offending are higher than for similar areas, although these are reducing as is the seriousness and frequency of offending for re-offenders. The rate of offending for looked after children is decreasing and is now below the national average of 3%. Most children and young people are enabled to develop positive relationships with both their peers and adults. A higher than average proportion of children and young people initiate or are involved in voluntary and community activities through the youth service. Few looked after children are placed at a distance from the local area.

45. Children and young people are able to achieve economic well-being and are prepared well for working life. The take-up of tax credits in the city is increasing and the number of people claiming job seekers allowance is reducing. There is an adequate supply of childcare places. Local action to reduce the numbers of young people not in employment, education or training is very good. The Connexions service is extremely successful at reducing the number of people whose destinations are not known. Rates of participation in further education and training at age 16 have increased significantly and are broadly in line with national average. Success at A level is very good, with an average points score well in excess of national averages. Overall success rates for all work-based learners have improved significantly and are now just above the national average. Most young people have access to decent and affordable housing. The numbers of young people having to use bed and breakfast accommodation and average length of stay is less than the national average. All looked after young people have a pathway plan to which they contribute. Sunderland uses a good range of schemes to encourage children who are looked after into work.

The impact of local services

46. In relation to being healthy, enjoying and achieving, making a positive contribution and achieving economic well-being local services are making a good contribution to these outcomes. Universal services impact well on keeping children and young people safe, but there are some weaknesses in assessment and protection services for the most vulnerable children.

Being healthy

47. The work of all local services in securing the health of children and young people is good. Children and young people in Sunderland are generally healthy. Although some measures of health are lower than national averages, a range of multi-agency initiatives targeted at groups with particular health needs, including those on breastfeeding, smoking, healthy eating, sexual

health, physical activity and emotional well-being is delivering good improvements in the health of children and young people. Increasing levels of information on health needs in specific geographic areas and in key groups, for example parents and parents to be, are being used as a basis for health promotion work by health and partner agencies. Programmes have been developed with intended service users resulting in services that are relevant, user friendly and generally accessible. There is a culture of proactive multi-agency working with a strong child-centred approach.

48. Good initiatives, including input from a specialist midwife, are in place and are reducing the number of expectant mothers who smoke. Referrals to primary and specialist health care services are timely and appropriate. Most GP practices provide child health surveillance services, higher than the England average, helping with early identification of developmental problems. Immunisation rates are high and increasing, with the exception of the second MMR vaccination; initiatives are in place to address this and early indications suggest an increase in uptake of the second MMR vaccination. Young parents receive individual programmes of multi-agency support.

49. A strong Healthy Schools programme is in place, including Food in Schools, and there is good multi-agency working between primary (particularly school nurses) and secondary health services (for example, dietician and paediatricians) and education staff. A good range of sports facilities is available within schools and health promotion initiatives are in place to promote their use by key groups. Good joint education and health initiatives have been developed, including a peer 'health trainer' programme, in which young people are 'trained as trainers' in key lifestyle issues such as exercise, sexual health, smoking and substance misuse. This programme is linked to an accredited award.

50. Outreach health promotion programmes are developing across all services and include drop-in events at secondary schools by CAMHS, the drug and alcohol services and the sexual health team. The response to such initiatives has been positive, resulting in increased self-referrals. There are some problems with the level of cultural awareness in some health services; for example, letters and advice leaflets about children's health issues written in English being given to non-English speaking Bangladeshi mothers and some women reported choosing not to attend all post-natal health checks because no female doctor was available. Some good, relatively recent work has been carried out to identify and develop plans to respond to these needs.

51. There are two 'walk in' minor injury centres, one of which is open 24 hours and a 24-hour children's accident and emergency department enabling good access to hospital services. The records of all children and young people using these services are screened by paediatric liaison nurses and there are good links between hospital and community health teams and child protection services.

52. CAMHS have good, open access arrangements. Telephone advice clinics are available for contact by other agencies and professionals. Increasing numbers of referrals are being dealt with through a new approach to managing assessment and consultation. Young people aged 16 and 17 requiring acute mental health care are admitted to a local adult mental health hospital. Some under 16s are cared for in a regional inpatient unit a short distance away while others receive intensive (sometimes daily) support at home from the CAMHS team. A model for local service delivery of specialist and inpatient services has been agreed between the TPCT and Northumberland Tyne & Wear NHS Trust. The presence of teachers in the CAMHS team supports good links with schools, where a programme for 'anxious school refusal' is well established in secondary schools and a screening programme for this is being piloted in primary schools. Review and referral meetings with specialist staff are held in school each term to deal with mental health issues.

53. Children who are looked after receive an excellent service from the specialist health team OK2 consisting of a doctor, nurse and two CAMHS psychologists who assess and review all children's health needs. This ensures consistency of assessment process and a detailed knowledge of individual children and young people. Carers can access the team directly for advice, information and support. The team is proactive in developing and improving the service; for example, the introduction of psychological screening for all children over three years to enable an appropriate level of emotional care and support and the development of the Multi-Agency Looked After Group to support workers dealing with children and young people with complex needs.

54. Healthy living is promoted in foster care and residential settings and a training programme supports healthy lifestyles, with healthy eating sessions also delivered to young people in the leaving care service. Strong multi-agency partnerships exist and information sharing on health issues is undertaken in a timely and appropriate manner. Health services are delivered in a good variety of settings to encourage young people to make use of them. Children who are looked after can be 'fast tracked' to specialist services when necessary.

55. Integrated multi-agency working ensures early identification of children with learning difficulties and/or disabilities. Services to children and young people with complex needs are coordinated through a family service plan which identifies the child's and the family's priorities and the range of support required to meet them. Named health visitors work as lead professionals for all under fives, coordinating service provision and acting as the contact point for families; however this role is not as well developed for older children. Specialist community nurses provide good, flexible support at home to children and young people with physical disabilities, their families and primary care staff, resulting in a reduction in hospital admissions. There are also good close working links between community and hospital services; direct admission to wards can be arranged, by-passing accident and emergency, for children with longstanding conditions who are already known to hospital staff. There are some difficulties

in the coordination of health care for young people who have been in secure establishments and return to the community.

56. Good quality short break care is available for children and young people with learning disabilities and physical disabilities. The range of options has been expanded imaginatively and includes a wide range of activity-based breaks. Parents and young people expressed very positive views about these services. Transition planning is beginning to take place earlier than previously and is dealt with in a flexible and individual way. The QUEST service, which works with children and young people and their carers to increase understanding and improve the response to challenging behaviours, is highly valued by carers and considered by them to have a good and significant impact in this extremely difficult and complex area. There are some opportunities for discussion with parents and carers about their views and concerns but more are needed, particularly in connection with information about services, communication with service providers, consultation on how services should develop in the future and benefit entitlements.

Staying safe

57. **The work of all local services in keeping children and young people safe is adequate. There are good universal services but those for some of the most vulnerable children have some weaknesses.** Most children report that they feel safe. For all children there is a good range of accident prevention schemes, with high quality information for children and their parents on being safe, provided in and out of schools, including Stepping Out, Zone Rangers and IMPS (an injury minimisation programme). The rate of serious road accidents involving children has reduced but remains high and above the national average. An excellent anti-bullying charter mark has been developed by children and young people themselves and has been taken up by 23 schools. The scope of the programme is now widening to include early years settings and children's homes. Arrangements for managing dangerous offenders and safe recruitment practices are in place to safeguard children.

58. There has been a good piloting of the common assessment framework in two children's centres, with almost 2,000 professionals having received training to enable better-coordinated responses to vulnerable children in the community. There is a good range of voluntary sector activity focused around children in the highest need. The council's Community Support Team is good, offering extensive preventative services for children at risk of being looked after, with focused work in their own communities. This has resulted in only four children becoming looked after out of 52 young people who were provided with support from the team, with the majority of the former returning home quickly.

59. There is good progress to identify missing children who may be at risk. This includes a multi-agency group developing a policy and set of procedures, records kept of looked after children placed in the area by other councils and

good work done by school inclusion and attendance services to track children who are not in school. In response to high levels of domestic violence, a robust referral process has been developed between children's services and the police Public Protection Unit; this has improved early identification and increased confidence in reporting and intervention. Levels of reported domestic violence and repeat victimisation are slowly reducing. A 24 hour helpline run by Wearside Women in Need and specialist police officers provide good support and signposting for victims. There are close links between the Domestic Violence Forum and the LSCB. Domestic violence information packs have been produced for children and young people in schools and a multi-agency information sharing pack is in preparation.

60. All children on the child protection register are allocated to qualified social workers. Children on the child protection register appear to be safe and protected with good multi-agency work, plans and communication between agencies. There is a good multi-agency referral form utilised by all agencies and the education and health child protection advisers support their staff well. In children's social care, there are stable social work teams, with managers doing good work supporting their staff. However, many frontline social workers and their managers have responsibility for caseloads of children at risk of harm and family breakdown that are high. The council has recognised that this workforce issue needs to be reviewed. At the time of the inspection, the council's computer client database was inaccurate regarding social worker caseloads. The quality assurance system was also inadequate in not being able to inform and address issues about variability of quality of social work practice.

61. The Children and Young People's Plan contains a good set of safeguarding priorities which are managed through the local Safeguarding Board. The LSCB has an enhanced membership and is developing work plans for wider safeguarding issues. Good training is provided through a range of courses and with a significant uptake. There has been good work done to inform all council employees about recognising concerns in relation to children and how to respond to them. There has also been good multi-agency work on serious case reviews held appropriately, with their lessons disseminated across professional groups. Safe recruitment practices are in place across all the agencies in Sunderland. There is a good Volunteering in Child Protection project, which is also a national pilot.

62. The number of child protection investigations, conferences and registrations has markedly reduced. Work being done by social care to divert children from the child protection system and provide alternative support for children in need is not yet sufficiently embedded in the wider partnership working of the LSCB. This has resulted in some children's social care staff being unclear about changes in their roles. Thresholds for services for children in need and child protection have not been sufficiently clarified and understood by all partner agencies. At the time of the inspection, the work of the children's social care Initial Response Team was inadequate because it was not working to the national guidance. In some cases decisions about assessments were

being delayed for several weeks, with alternative children in need support being provided to families. No child was identified as unsafe during the period of the review, however, the systems were not offering the necessary protection which would be provided by following the national guidance. Key performance indicator data on response times appeared to be better than was actually the case. The council has recognised these findings and is committed to the improvement of these services.

63. All children who are looked after are allocated to qualified social workers. Most looked after young people spoke well of the services they received overall and said they felt safe. Family placement and residential services are good. Reductions in numbers looked after and in those in residential care have provided the opportunity for further investment in and development of the fee paid fostering service, introduced in 1999, which provides an alternative to residential care for children with very complex needs. The impact of this is good: foster placements are stable and the need for external placements has been maintained at a low level. Residential placements comply with national minimum standards generally but have recently suffered from being 'over numbers' for short periods and therefore have been operating outside of their statements of purpose. This is unsatisfactory and has impacted negatively on the lives of young people. Both residential staff and foster carers report delays in the provision and exchange of some children's information from social workers. There have been some delays in planning for children, and although a relaunch of a protocol between legal services and children's services has contributed to some improvements in performance, this is not yet fully embedded in practice. The quality of children's plans was variable.

64. Services for children and young people with a learning difficulty and/or disability are good, with established multi-agency working and information sharing systems. This is particularly the case in early years. Residential homes, residential short breaks services and community-based services are good and highly regarded by parents and the young people who used them. The number of direct payment arrangements to help parents to support children in their own homes had increased twofold between October 2005 and September 2006, and this is good.

Enjoying and achieving

65. **The work of all local services in helping children and young people to enjoy their education and recreation and to achieve well is good.** There is a strong and effective collaboration and partnership between schools and the council, which is evident in the commitment to working together to promote inclusive practice and to further raise standards. There is a joint understanding and desire to address the key issues facing children and young people in the city.

66. A wide range of support for parents and carers wishing to help their children enjoy and achieve well at school is available. The children's information service provides excellent support to parents and is well integrated into customer contact points for the public. There is an extensive network of support facilities available through children's centres and good programmes of family literacy, numeracy and training and support in behaviour management. Good quality information is available to help parents in finding a suitable school place for their child.

67. There is a good strategy for early years. Arrangements for monitoring the quality of provision in all settings are effective and additional training and support is provided when necessary. There has been a substantial increase in childcare places available over the last two years. Sufficient free nursery places are available and children are well prepared for school. The plans for the development of 17 children's centres with extended activities based around five area clusters are well developed and take into account the specific needs of local communities. These also provide the basis for the development of multi-agency teams. There is recognition in the local council of the need to improve levels of development by the end of the Foundation Stage, particularly where they are below national levels.

68. There is a comprehensive strategy to raise standards in schools, which has been particularly successful in secondary education. The school improvement service knows its schools well and provides timely and appropriate support and there are two schools judged by Ofsted to be of concern. There is effective and increasingly robust challenge and support to schools which is grounded in good data. This is valued and used by schools and the local council to target improvement, both within individual schools and in identifying particular groups of pupils across the city who require additional support. There is good evidence of the impact of initiatives to raise achievement such as Pupil First and in raising boys' achievement. Schools receive good support for self-evaluation.

69. Planning of school places is effective in the primary sector. In secondary education there are plans to reduce surplus places linked to the innovative BSF vision for the future. The local council recognises that given the timescales of the second wave of developments and the declining pupil population, this plan may not produce sufficient timely reductions. Admissions procedures are good. There is clear guidance for admission and priority is given to the most vulnerable. The vast majority of parents access their first choice of school.

70. The personal and academic development of children and young people is effectively supported. Children and young people are generally positive about school. There is good support to improve attendance and reduce unauthorised absence and levels of attendance are in line with national figures. The innovative and very effective Every Schoolday Counts initiative has had demonstrable impact and is highly valued. Young people are encouraged to attend school and achieve well. An integrated attendance strategy is being developed to provide greater coordination to activity in this area. Support for

managing behaviour difficulties is highly valued by schools and there is excellent partnership working. Permanent exclusions are very low and fixed term exclusions are reducing and below similar authorities and national figures. The process of managed moves of pupils between schools is working well and a hard-to-place protocol is in place, the procedures for which are under development.

71. Provision for young people excluded from school is good; reintegration is effective for pupils at Key Stages 2 and 3. Records of children who are missing from school are good. Suitable education is provided by the hospital and home tuition service for those unable to attend school due to medical reasons and for school age mothers. There is an up-to-date register of home educated pupils. Whilst the monitoring of these children meets minimum statutory guidelines, it is possible for them not to be seen by any professional over a period of several years.

72. Children and young people have access to a good range of enrichment and voluntary learning opportunities and further development is a priority in the Children and Young People's Plan. Provision through extended services in schools, youth service activities and the voluntary sector all contribute to a universal and targeted offer of services to children and families. The Young Asian Voices project is very successful in providing enrichment and voluntary activities for their community. Participation overall in activities is generally good, although young people from the black and minority ethnic community can be disadvantaged due to their fears for personal safety in the community.

73. Outcomes for looked after children are generally improving. There were no permanent exclusions in 2005/06. All schools have a designated teacher, schools feel support is good and accessible and training is well delivered. All looked after children have a personal education plan which is reviewed twice a year. All looked after children have a MAX card providing free or subsidised access to leisure and cultural facilities. There is a new project aimed at improving outcomes for looked after children but this is not yet well integrated into the wider strategy for them. There are some delays in arranging education for young people discharged from secure establishments and returning to the community.

74. Children with learning difficulties and/or disabilities generally make good progress. There is good support to schools and settings in identifying and meeting individual pupil's needs. Early intervention is encouraged by giving schools funding to meet the needs of children who have non-complex special needs. Schools support the inclusion principle and the funding methodology. The single referral process from schools to a multi-agency panel is working well. Statements are of good quality but too many are produced outside the required timescales. Parents are provided with effective support and young people are encouraged to participate in reviews and make their views known. A number of the targets and priority actions for 2005/06 were not met in relation to learning difficulties and/or disabilities, for example, the review of the

educational psychology service; this review is currently underway and the trends are all improving in terms of performance indicators. There is considerable change in the children's services directorate at present and the planning and monitoring of outcomes in relation to inclusion is improving. Good progress has been made in developing provision for children and young people with learning difficulties and/or disabilities. such as the establishment of the special and mainstream schools as hubs for outreach across the city and with lead schools in localities. This is effective and highly valued by schools. There is an extensive training programme in relation to the needs of children with learning difficulties and/or disabilities for school staff in mainstream schools which has been effectively developed through consultation.

Making a positive contribution

75. The work of all local services in helping children and young people to contribute to society is good. Aspects of the work are outstanding, but some black and minority ethnic children and young people say they experience high levels of racism. The work to engage children and young people in activities to help them make a positive contribution is extensive and the focus on securing their participation as well as consulting with them is excellent. In addition, the strong emphasis on multi-agency teams and approaches results in very good support to individual children and young people with a broad range of needs. This support, for example from the Home School Partnership Team, enables children to develop socially and emotionally very well. Schools support the development of children's confidence and self-esteem well. Youth workers establish strong, productive relationships with young people that enable young people to develop high levels of motivation and achieve well through a broad range of voluntary activities. Young people speak highly of the mentoring support they receive through schools and other agencies.

76. There is a wide range of programmes providing specialist, targeted and universal support to help parents and carers maintain positive relationships with their children. Services identify potential parenting problems well and are usually adept at referring those who need additional help to appropriate support through efficient, multi-agency structures. There are many examples of high quality support provided to parents and carers, including the work of the Behaviour and Education Support Team to support families in crisis. Foster carers are supported well through support groups, training and an out-of-hours 'on call' system enabling them to get help from more experienced foster carers. Foster carers are able also to use the Fostering Network Independent Advice and Mediation Service when they are in disagreement with the council.

77. There is a very good range of services to help children and young people make transitions and manage changes at key points in their lives, including support to asylum-seekers and refugees in gaining a place at school. Schools have good arrangements for the induction of pupils. Children and young people have been engaged very well in designing and improving the support available,

for example one primary school council was involved in drawing up travel guidance for pupils transferring to secondary school. Transition reviews with the Connexions service for children and young people with learning difficulties and/or disabilities aged 14+ assist them in moving into further education and employment. The Keys Project enables young people experiencing crises to find accommodation and other services to improve their well-being. There is good support for looked after children in moving from primary to secondary school and between care placements.

78. Almost all children and young people find it easy to get help, advice or information when they need it. Schools, the youth service and Connexions provide very good access to a wide variety of support. In addition, projects such as 'Y-Not?' have been successful in re-engaging care leavers in education and training. The Young Carers Project enables over 250 children and young people to enjoy social, leisure and educational activities frequently, although these children do not always receive appropriate support in schools. At the time of the review the designated children's complaints manager was located within Adult Services and advocacy for looked after children did not always meet regulatory requirements. The council intends to redesign and recommission this service.

79. The attention given to ensuring that children and young people are consulted about key developments in services, participate in the delivery of services and are engaged in decisions that affect their lives is outstanding. It is routine and systematic in many services. The range of consultative forums is impressive and the coordination of their activities increasingly effective. The We're All Ears campaign, developed by young people themselves, was singularly successful in involving an exceptional 7,500 voters in elections for the Youth Parliament, an increase of approximately 300%. Young people rightly speak with pride of this achievement. The 4UM and City Equals forums ensure the views of looked after children and young people with learning difficulties and/or disabilities are represented fully. Most young people involved in these forums speak very positively about services' responsiveness to their views and there are many examples to support this view. Young people's representatives meet regularly with the senior leadership team of the council's children's services and the city treasurer. Children and young people have a strong sense of themselves as advocates for their peers in such meetings. However, those taking part in the Young Asian Voices felt that not enough had been done sufficiently quickly to help them find a permanent base for their activities; this longstanding problem appeared close to a resolution as this joint area review finished. In addition, the absence of representation from young people on the recently established Corporate Parenting Board is a notable exception.

80. Opportunities for children and young people to express their views on services are many and varied. The Youth Inspection Team provides feedback on the quality of youth work that is used in the performance management of the service. Children and young people have been highly successful in bringing about many improvements to services, from the school council that worked

successfully to get a school crossing warden, to projects sponsored by the Youth Matters Team. These have led directly to improvements in local facilities for children and young people, including those with learning difficulties and/or disabilities, for example through the construction of a sensory park. Improvements in the last 12 months mean that almost all looked after children are now involved in their regular reviews. Children and young people with learning difficulties and/or disabilities are enabled to take part in their reviews using information and communication technology. These young people are also involved in decisions about the running of residential homes and short break services. The majority of children and young people find it easy to have a say in the way things are run in schools and in their local area but many children and young people are not yet aware of the opportunities Sunderland provides.

81. Most children and young people express concerns about anti-social behaviour, but the level and nature of their concerns vary widely. Children and young people's concerns led directly to the production by them of an anti-bullying charter mark, which has been adopted for use across the city. Children and young people are themselves now involved in improving their schools' work to tackle bullying and in assessing the quality of other schools' work. There are several well-established programmes to reduce anti-social behaviour that have been recognised nationally for the quality of their work, including the Youth Offending Service (YOS) Tackle It and Phoenix projects and Wear Kids. A good strategy has reduced exclusions from schools, which are now very low. Key services are engaged well in multi-agency responses to preventing anti-social behaviour, including an example of work by the local housing agency with primary school children in a particular neighbourhood. Despite the work of services to tackle racism through various initiatives and programmes in schools and the community, too many children and young people experience racism frequently. This leads them to feel unsafe and restricts them from making full use of leisure and recreational facilities.

82. The concurrent inspection of the YOS has found it to be highly successful and it has been consistently well-regarded. It provides a comprehensive range of specialist support programmes and uses these effectively to meet the needs of young people. The Resettlement and Aftercare Programme and Intensive Support and Surveillance Programme provide effective additional support and supervision for those young people who need it. A very high proportion of children and young people who offend are involved in full-time education and Sunderland is one of the few youth offending services nationally to achieve its target for placing young offenders on E2E programmes. Referrals from the YOS to the CAMHS are within appropriate timescales. There is a considered and coordinated approach to using anti-social behaviour orders that ensures they are used appropriately, particularly in relation to identified hot-spots. There has been a moderate reduction in the seriousness and frequency of cases amongst the most persistent offenders, but targets for reducing recidivism have not yet been met. The YOS has been unable to access the Positive Activities for Young People programme, reducing opportunities for the re-engagement of those who have offended. The number of looked after children receiving final warnings,

reprimands and cautions has changed little since 2001, although it is now lower than the national average.

Achieving economic well-being

83. The work of all local services in helping children and young people achieve economic well-being is good. There is a good level of support to help families achieve economic well-being. An up-to-date and detailed family support strategy focuses on the delivery of targeted services to disadvantaged areas of the city, with a clear emphasis on the early identification of additional needs. Partnerships with early years services to target families in relation to literacy and numeracy skills are good. A variety of good initiatives are working well to engage all family members. Financial stress on families is minimised through effective planning and costing of programmes. Most training carries no costs for transport, entry fees, visits or resources. The Children's Information Service provides easily accessible, good quality information to parents and carers. Take-up of tax credits is increasing and the council works closely with Jobcentre Plus and the Connexions service to promote these and other benefits. The education maintenance allowance is well promoted and has a high level of uptake. Sufficient childcare provision is available and places have increased at a much higher rate than the national average. SureStart provides some good facilities for childcare and family learning, including a highly responsive programme of access to professional support. The number of schools offering extended hours and services is increasing through the Extended Schools programme.

84. The involvement of the Connexions service with the local council is excellent. The service maintains a high level of presence in schools and ensures all young people receive individual appointments. The service has a good level of involvement with a range of groups across the council, for example teenage pregnancy groups, leaving care teams, the YOS and substance abuse workers. Personal advisers provide objective and balanced advice and guidance from Year 8. Local action to reduce the numbers of young people not in employment, education or training is very good. Although the current figure is just above the national average, it has fallen significantly over the last four years. In addition, the Connexions service is extremely successful at reducing the number of people whose destinations are not known. Data is clear and well presented. Young people from minority ethnic groups are well represented in employment, education and training. The council makes good use of alternative curriculum arrangements, including a good range of Aimhigher activities and a well-respected Education Business Partnership. Schools offer an increasing number of students into successful vocational programmes within good realistic working environments. One vocational skill centre is operational to help meet this need and a second is on target to be operational by September 2007.

85. Good collaborative working between schools, work-based learning providers and City of Sunderland College ensures a wide range of vocational and academic courses. Key stakeholders are highly responsive to the needs of

young people through, for example, mid-year entries to the college for vocational courses and common timetabling. There are good arrangements for joint school and college governance and sixth form management. Transition from school to post-16 education and training is good. There are no significant gaps in provision. Temporary funding from the European Social Fund funds the Planning for Progression (P4P) pre-entry to employment programme, a core part of the curriculum in the city. The strategy for the development of this programme when European Social Fund funding ceases is unclear.

86. The council has made significant investment in children and young people's projects across the city. This investment is targeted well to the most needy areas. Sunderland has a collaborative and responsive approach to regeneration. Young people's views are sought through a variety of forums. Most view access to leisure and sporting facilities as good. There are, however, concerns over the cost of access to organised leisure services. Transport remains a barrier to some young people, through either cost or level of service. The city has some excellent facilities for young people, including the highly successful and well used Lambton Fellowship and Pennywell centres which both provide a range of youth services and activities.

87. Sunderland has managed a significant reduction in the proportion of homes that do not meet the decent homes standard to approximately 3%. Most young people have access to decent and affordable housing. Young people over 16 are placed in bed and breakfast accommodation as a last resort and adequate safeguarding arrangements are in place. The use of, and average length of stay in, this accommodation is lower than the national average. The council has implemented a number of support measures for vulnerable groups and this is a key aim in the council's housing action plan. The council has a satisfactory policy for homeless people based on partnership arrangements. Support for teenage parents is provided at a number of sites across the city and in neighbouring areas, through a number of agencies. There are, however, too many teenage mothers placed away from the support of their families. Young people who have challenging behaviour find it difficult to find appropriate accommodation.

88. All looked after young people have a timely, good quality and regularly reviewed pathway plan to which they contribute. A multi-agency strategic level transitions group has improved the transitions process. Sunderland uses a good range of schemes to encourage children who are looked after into work. Young people value the additional support from the council and the Connexions service. The Teenagers to Work programme is well-used and the changing focus of this programme now ensures an increased emphasis on employment skills. Initiatives such as 'Unlocking Potential' help to support young care leavers to access education, employment or training. There is a well managed process to ensure that a range of accommodation available to care leavers, which includes supported, semi-independent and independent living. The majority of care leavers are in suitable accommodation, in line with national averages.

89. The council has made significant strategic changes to improve transition arrangements for young people with learning difficulties and/or disabilities. A transitions development worker is enhancing partnership working through the implementation of an information sharing strategy. Person centred planning is being introduced for Year 9 students and is reported to be helpful by students, school staff, parents and carers. Agencies make effective use of communications passports to share information about young people between services. Money from the European Social Fund is used well to target those young people most at risk of not entering employment, education or training, particularly those with profound and multiple learning difficulties. The Connexions service has developed a young person's and carers' guide to transition planning and has a team of dedicated personal advisers working with young people. Young people are able to access education and training in the city at all levels. This can be through mainstream or specialist schools and Sunderland College. Progress to vocational programmes is higher than the national average.

Service management

90. **The management of services for children and young people is good. The capacity to improve further is also good.** The local partnership's self assessment is generally accurate, though the partners had not recognised some weaknesses in the arrangements for the safeguarding of some of the most vulnerable children and young people. There are clear and challenging ambitions set out in a child-focused Children and Young People's Plan that embraces all local services. This plan addresses both improving outcomes for children and young people and improving service design and delivery. The council's draft Children's Services' Strategic Plan 2007–10 contains clear aspirational aims. However, target-setting is only adequate: the Children and Young People's Plan lacks some numerical targets for 2006–07 and beyond and a few targets are insufficiently challenging or unrealistic.

91. These plans have been developed following very extensive analysis of needs, drawing upon excellent consultation with children and young people, partners' views and analysis of data. Increasingly, neighbourhood level information is being used to identify need. The needs of children and young people from vulnerable groups (such as travellers and black and minority ethnic groups) are adequately reflected in the strategic objectives, but there are few numerical measures to assess progress in this area. The agreement between the sponsors, headteachers and local employers of outline plans for three academies is an example of the good partnership planning in Sunderland.

92. Clear, robust priorities are set out in the Children and Young People's Plan and these are reflected in the Local Area Agreement. These priorities are shared and understood by middle managers and frontline staff in partner agencies. There are robust strategies to deliver these priorities. The Children and Young People's Plan identifies the actions required to meet the targets set, together with the lead officer and deadline for each. While the Plan itself does

not indicate the resources required for each action, the partners have made a realistic estimate of the cost of the work and thereby assure its deliverability. There is a range of good strategy documents, such as the Accident and Injury Strategy, the Youth Service Plan and the CAMHS Strategy. There are excellent arrangements for the strategic planning for children with complex learning difficulties and/or disabilities, but strategic planning for the education and leisure of looked after children is a relative weakness. There is a good range of detailed action plans to aid strategy implementation.

93. Multi-agency groups, such as the Multi-Agency Looked After Group and the Behaviour Education Support Team, are very effective in identifying and acting upon the needs of individual children and young people. Children's centres and extended schools provide good venues for multi-agency working: currently health, early years, voluntary sector, family support and social workers are based in them. The council has plans to base most of its social care case management staff in these settings. The partners have piloted the Common Assessment Framework and trained many staff in the procedures; the development of associated processes and information technology systems is making good progress.

94. The capacity of local services to deliver children's services is good. There is a well-established Children's Trust with a clear structure for the top two tiers of governance, and appropriate representation from all local services. However, there is a wide range of specialist partnership groups, whose accountability has hitherto been unclear; this is now being addressed. There are good links to the LSCB and to all the thematic groups of the Sunderland Partnership.

95. The directorate is on track to secure efficiency savings of £1.3 million in 2006–07 and has good mechanisms in place to improve value for money. Examples include careful management of home-to-school transport and local provision of social care and of special educational needs capacity; the drive to reduce the number of looked after children brings economy gains as well as better support for children. The number of schools with significant budget surpluses is below the averages for England and for similar areas in both primary and secondary phases. This is the result of vigorous action by the council in recent years. The council has significant excess capacity in its schools. It has taken action to close or merge primary schools. For the secondary phase, the Building Schools for the Future programme will substantially reduce surplus places, but 16% of places will be surplus in 2007/08 and, with current plans, this drops only to 9% by 2015/16, still well above the national average. The council has recognised the need to revisit secondary schools' capacity.

96. The arrangements for partners to jointly commission services from third parties are adequate. The council, the PCT and others have formally pooled budgets for CAMHS and in the youth offending service and these arrangements work well. Relevant budgets are aligned in the Local Area Agreement. However, as partners recognise, there is room for further development of the processes

of joint commissioning. The council makes good use of partnerships with the voluntary and community sector to deliver services: most of the youth service work is undertaken by the voluntary sector, through contracts awarded following competitive tendering, and the YOS also makes good and diverse use of voluntary sector expertise. The council plans to jointly fund a post to further enhance liaison with the voluntary sector.

97. The approach of the council and its partners to performance management is good. There is a common framework for performance management used throughout the council, in the Strategic Partnership and in the Children's Trust; this is very good. The approach welcomes challenge and makes good use of opportunities to learn. Children and young people are actively involved in many aspects of performance assessment and evaluation. Careful analysis of data has enabled targeted action to successfully address primary school attendance and Key Stage 3 attainment. However, there have been errors in the recording of dates for initial assessments of children, leading to performance being overstated and some social workers' caseloads have been understated. These are significant weaknesses which were not uncovered by the LSCB. The Children's Services Review Committee has made a good contribution to policy development, but its challenge on performance has been only adequate and it has not been using the Victoria Climbié Checklist to guide its work.

98. The capacity of local services to improve is good overall. This is in line with the partners' self-assessment. The political leadership of the Children's Trust and of the development of children's services within the council is good. The children's services directorate in the council is in the final stages of a major restructuring. This change better focuses effort on outcomes for children and young people, but at no extra cost. Despite the radical changes, staff remain committed and morale is good. The Director provides a clear outcome-focused vision and leadership with a determination that the voices of children and young people should be heard. However, there are weaknesses in the management of some aspects of the safeguarding of children and young people most at risk.

99. There is a Workforce Development Strategy embracing the needs of all partners, though with more detail on the council's plans than others'. A longstanding shortage of educational psychologists has had an adverse effect on support to schools. Partners are aware of this and have recently made changes to address it. The council is trying hard to recruit newly qualified social workers and to assist unqualified staff to obtain a qualification; it has had some success with its initiatives but there remains a shortage of qualified social workers and caseloads are too high. The council is developing its detailed knowledge of teaching post vacancies. Plans to secure a bigger component of the workforce from those of black and minority ethnic origin are limited. The council has excellent arrangements for financial planning and financial management, combined with good systems for managing and improving value for money. While there are a number of projects funded by fixed-term grants, the council is good at planning ahead for this situation. Local health services

have a good plan to provide a local inpatient service for young people with acute mental health needs.

100. The track record of improving outcomes for children and young people is largely good, with most measures showing improvement, some faster than nationally. School attendance, exclusions, youth offending, and the numbers of young people aged 16 and over in education, employment or training have all improved in recent years. Educational attainment improvements are mixed, but there have been good improvements at Key Stages 3 and 4, and at A level. Measures of children's safety and health are generally improving; road casualties and teenage conceptions are both reducing faster than nationally, although they are still too high. The council has a good track record of successful projects: establishing the integrated children's services directorate, setting up two vocational skills centres with the full support of all secondary heads, and securing agreement of all stakeholders, including government, to an innovative model of city academies.

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

1. The council's performance in this area is good overall with individual services varying from adequate to good. Outcomes for children and young people are good overall. The capacity to improve is good. Most children and young people appear safe. Children and young people report that they feel safe, although some black and ethnic minority children do not feel safe in some areas of the city. The work of all local services in keeping children and young people safe is adequate with some good features but some weaknesses exist for some of the most vulnerable children. The YOS is performing well.

2. The management of services for children and young people is good. There are clear and challenging ambitions for the area set out in a child-focused Children and Young People's Plan which is based on a detailed needs analysis and extensive consultation with children and young people and other stakeholders. However, target setting is only adequate. Increasingly, neighbourhood level data is being used to identify needs. Black and ethnic minority children are adequately reflected in strategic objectives but the access to and delivery of some frontline services are not sufficiently tailored to their needs. Prioritisation is good and these priorities are well understood and owned by managers, frontline staff and partners.

3. The capacity of local services to deliver children's services is good. The well established Children's Trust has good links to the LCSB and the Sunderland Partnership. The Corporate Parenting Board is underdeveloped and lacks representation from children and young people. The council has a good record on value for money and managing its finances. There is significant excess capacity in the secondary school sector and the timescale for improving this position is too long. There is room for further development of joint commissioning. The council makes good use of partnerships with the community and voluntary sectors.

4. The capacity of local services to improve further is good overall and this is in line with the self-assessment of the council and its partners. Despite a major restructuring, staff remain committed and morale is good. The Director of Children's Services provides a clear outcome-focused vision with strong leadership and a determination to ensure that the voices of children and young people are heard. The Workforce Development Strategy is good but there is room for further work and there are shortages in some key areas, for example qualified social workers. The track record of improving outcomes is generally good and there is a good track record of successful outcomes and impact delivered through specialist project work.

5. The impact of the council in securing the health of children and young people is good; partnership working is good. Some key measures of health are below national averages but many aspects show signs of improvement better

than the national rate due to determined action. The Health Improvement lead from the TCPT is a member of the Children's Services Leadership Team and this link is key to the joint effort by the council and its health partners to improving health outcomes for children in the city. There is a strong health education and Healthy Schools programme, both of which are starting to impact strongly. Not enough has yet been done to improve communication with parents from black and minority ethnic groups to ensure that health services are appropriate for their needs. Health care for looked after children is excellent.

6. The impact of services in keeping children safe is adequate. There are good universal services to keep children safe but child protection activity is significantly higher than in similar areas. The recent drive to reduce numbers on the child protection register has resulted in confusions for some social care staff about their new roles. There are some weaknesses in the management of these issues. There is good work to prevent accidents, track missing children and to support families in the community, preventing children becoming looked after. Services for looked after children are good, as are services for children with learning difficulties and/or disabilities, with effective and well established multi-agency working and information systems, especially in the early years sector.

7. The impact of services in helping children and young people to enjoy their education and achieve well is good. Strong partnerships support inclusive practice and are helping to raise further standards of achievement. Support and challenge to early years settings and schools is good. Provision for children educated otherwise than at school is good. There are sufficient school places, although the considerable surplus in the secondary sector is not being tackled quickly enough. Attendance is improving, exclusions are low and support for behaviour improvement is good. Children with learning difficulties and/or disabilities make good progress. Access to enrichment and voluntary learning activities is good but young people from black and ethnic minority communities can be disadvantaged due to safety fears.

8. The impact of services in helping children and young people to contribute to society is good. Aspects of the work are outstanding but there are significant difficulties experienced by black and minority ethnic children as a result of racism. Children receive good support to develop socially and emotionally and to cope with changes in their lives. There is strong multi-agency support for these services. Almost all children find it easy to get help, advice and information when they need it although the designated children's complaints officer was based in Adult Services at the time of the review and the advocacy service for looked after children does not always comply with regulations. The attention given to ensuring that children and young people are consulted about key developments in services, participate in the delivery of services and are engaged in decisions about their lives is outstanding. Some anti-social behaviour programmes have received national recognition and there are comprehensive support programmes for young offenders.

9. The impact of local services in helping children and young people to achieve economic well-being is good. There are excellent partnership arrangements in this area of work, particularly with the Connexions service. Young people from black and ethnic minority groups are well represented in employment, education and training. Collaborative working ensures a wide range of vocational and academic courses for young people. The council has made very significant investment in children's and young people's projects across the city targeted to the neediest areas and young people are involved in community regeneration initiatives. Most young people can access decent and affordable housing and sport and leisure opportunities, although housing is not good for vulnerable young people discharged from secure establishments or with challenging behaviours. Services for care leavers are good. Transition services for young people with learning difficulties and/or disabilities are improving.