

# Swindon Borough Council

## Children's Health, Social Care and Education Overview and Scrutiny Committee

**Wednesday, 3 February 2016**

Committee Room 6, Civic Offices

At 6.00 p.m.

### **Conservative Councillors**

*Michael Bray  
John Haines  
Cathy Martyn  
Gemma McCracken  
Maureen Penny  
Eric Shaw  
Steve Weisinger*

### **Labour Councillors**

*Teresa Page  
James Robbins  
Carol Shelley  
Nadine Watts  
Julie Wright*

### **Co-opted Representatives**

Steve Colledge Swindon Association of Secondary Headteachers  
Simon Cowley Paul Swindon Association of Primary School Headteachers  
Alison Paul Swindon Association of Special School Headteachers  
David Dawson Catholic Church Diocese  
Paul Sunners Standing Advisory Council on Religious Education  
Steve Henderson Equalities Advisory Forum  
Mary Cosker Healthwatch  
TBC Church of England Diocese  
TBC Parent Governors

**Committee Officer:** Rita Glen Gallo 463611  
email: RGlen-Gallo@swindon.gov.uk

Swindon Borough Council can be contacted at the Civic Offices, Euclid Street,  
Swindon, SN1 2JH (Telephone 01793 445500)

**Access Arrangements** - The venue is wheelchair accessible and an infrared receiver hearing system is provided. If you have any special requirements to enable you to attend the meeting or would like to receive any of the pages contained in this agenda in a larger print size, please contact the Committee Officer as soon as possible prior to the date of the meeting.

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## **AGENDA**

### **1. Apologies for Absence**

**2. Declarations of Interest**

Members are reminded that at the start of the meeting they should declare any known interests in any matter to be considered, and also during the meeting if it becomes apparent that they have an interest in the matters being discussed.

**3. Public Question Time**

See explanatory note below. Please phone the Committee Officer whose name and number appears at the top of this agenda if you need further guidance.

**4. Minutes (Pages 3 - 6)**

To receive the minutes of the meeting held on 2<sup>nd</sup> December 2015.

**5. Member of Youth Parliament - Report on Achievements and Performance 2014 - 2016 HCF&CH/IDCS (Pages 7 - 12)**

**6. Children's Safeguarding Update HCF&CH/IDCS (Pages 13 - 34)**

**7. Restorative Youth Services Work Programme 2015/ HCF&CH/IDCS (Pages 35 - 70)**

**8. Children's Services Performance Report HCF&CH/IDCS (Pages 71 - 92)**

**9. Work Programme 2015/16 DLDS (Pages 93 - 100)**

**Date of Despatch:** 26 January 2016

**Key:**

**Officers:**

DLDS	-	Director of Law and Democratic Services (Monitoring Officer)
HCF&CH	-	Head Of Children, Families & Community Health
IDCS	-	Interim Director of Children's Services

**Public Question Time** - Swindon Borough Council remains committed to increasing its accountability to the public and to promoting active citizenship. 15 minutes will be allowed at the start of all Council meetings for questions to the Chair from the public about the work of the Committee (except for confidential matters, and matters relating to planning and licensing applications). We will give priority to those who submit questions in writing at least two days before the meeting. Questions must be relevant, clear, and concise. You may not use Public Question Time as an opportunity to make speeches or statements.

Questions in writing should be sent to the Committee Officer whose contact details appear on the agenda above or to the Director of Law and Democratic Services, we will publish it, along with the answer, alongside the Minutes. The process associated with asking a public question is set out in the "Public Question Time at Council Meetings Protocol and Guidance" available on the Council's Website.

(<http://www5.swindon.gov.uk/moderngov/ecCatDisplay.aspx?sch=doc&cat=13338&path=0>) or from the Committee Officer named above.

Agenda Item 4

**CHILDREN'S HEALTH, SOCIAL CARE AND EDUCATION OVERVIEW AND  
SCRUTINY COMMITTEE**

**WEDNESDAY, 2 DECEMBER 2015**

**PRESENT:-** Councillors Gemma McCracken (Chair), Michael Bray, John Haines, Cathy Martyn, Teresa Page, James Robbins, Eric Shaw, Carol Shelley, Nadine Watts, Steve Weisinger and Robert Wright, Paul Sunners (Standing Advisory Council for Religious Education), Valerie Johnstone (Governor), Jo Garton (Swindon Association of Primary Headteachers), Alison Paul (Swindon Association of Special Schools Headteachers), Liz Townend (Bristol Diocese) and Mary Cosker (Healthwatch).

Apologies for absence were received from Councillors Fionuala Foley, Maureen Penny and Julie Wright, David Dawson (Catholic Diocese), Kevin McNamara (Great Western Hospital), Dr Wendy Wodhouse (Oxford Health NHS Foundation Trust).

**18. Declarations of Interest**

The Chair reminded Members of the need to declare any known interests in any matters to be considered at the meeting.

Councillor James Robbins declared a personal and non-prejudicial interest as he was a Foster Carer.

Councillors Nadine Watts, James Robbins and Gemma McCracken and Mr Paul Sunners declared personal and non-prejudicial interests as they were school governors.

**19. Minutes**

Resolved: That the minutes of the meeting held on 2<sup>nd</sup> September 2015 be confirmed and signed as a correct record.

**20. Public Question Time**

No public questions were asked or submitted for this meeting.

**21. Education Standards and Performance Report**

The Board Director, Commissioning and the Head of Education submitted a joint report setting out the achievements of Swindon children and young people in their public assessments in primary and secondary schools.

Mr Peter Nathan, Head of Education explained that the report highlighted improvements in performance and areas for development. He advised that performance was measured against national averages and the report included data regarding attendance and behaviour which could be an indicator of pupil and school performance.

Mr Peter Nathan introduced Ms Sarah Foulkes, Commissioner for Education and Mr Nigel Pickering, Additional Provision and Regeneration Manager. He explained that at the end of Key Stage 1, attainment had risen in all subjects.

Members noted the difference in attainment for disadvantaged pupils and that at Key Stage 2 girls attained a higher standard than boys. He commented on the Ofsted Inspection Framework that had changed over recent years and that a new Framework was implemented with effect from September 2015.

Mr Peter Nathan referred to school exclusions and attendance and explained that attendance was above the national average for both primary and secondary schools. Fixed term exclusions had increased over the past years and that together with the Local Swindon Safeguarding Board, the Local Authority partnered with schools to address this.

The Committee welcomed the improvements in 2014/15 and Mr Peter Nathan, Ms Sarah Foulkes, Mr Nigel Pickering and Mr John Gilbert, Board Director Commissioning, responded to questions put by members regarding the following points:

- Addressing the disadvantage relating to the attainment gap particularly as this widened when pupils progressed from primary to secondary schools and how Pupil Premium Funding helped in narrowing the gap. The Committee noted the following factors that were relevant to the attainment gap:
  - (a) socio-economic factors;
  - (b) how the pupil premium was utilised to raise pupil attainment, particularly those receiving free school meals;
  - (c) how information relating to pupil premium expenditure was available on schools' websites;
  - (d) work undertaken by schools to reduce the gap; and
  - (e) proposed work to be undertaken by the virtual head teacher to address narrowing the attainment gap.
- How to utilise pupil premium funding. Members enquired if Pupil Premium Funding could be utilised solely for the child attracting the funding and how this was applied by other authorities. Members noted that Appendix 7 of the report indicated a narrowing in the disadvantaged attainment gap, particularly at Key Stage 2 and that schools were allowed to use Pupil Premium Funding as they saw fit to ensure the attainment gap narrowed. In response to a query regarding national standards, Ms Jo Garton (Swindon Association of Primary Headteachers) referred to the work being undertaken in primary schools to narrow the attainment gap.
- The type of support, particularly through Traded Services, available to assist academies.
- The effect of pupils with English as an Additional Language on schools' performance. Members noted that this was not an issue in Swindon schools and nationally, pupils with English as an additional language outperformed their peers in the range of subjects studied.
- Discussions undertaken with the Regional Schools Commissioner regarding schools' performance.
- The importance of strong leadership in schools.
- Local Authority Ranking as reflected in Appendix 5 (Provisional Key Stage 4 results). Members noted that as with Ofsted practices, Swindon ranked itself against other local authorities.
- Why the level of attainment fell between Key Stages 2 and 4 and actions being taken to address this. Mr Peter Nathan confirmed that various factors may affect a pupil's progress such as the quality of teaching and change in personal circumstances. He elaborated on

discussions undertaken with schools to address this, particularly raising pupils' aspirations.

- Awareness that a number of Swindon pupils study out of Borough and statistics relating to their performance was unavailable.
- Confirmation that Academy Schools were autonomous. Mr Peter Nathan referred to the working relationship with academies, including the Teaching School. Members noted that all academies worked in different ways and that working as part of a cluster offered various opportunities to improve performance.
- Schools attendance at events that enabled networking opportunities.
- Understanding the importance of parents' involvement within the school community.
- Behavioural Policies and how these can contribute in the reduction of exclusions.
- Confirmation of how the Fair Access Panel provided strong guidance to pupils and schools.
- Strategies being implemented to reduce the number of exclusions in special schools.
- Clarity on the behavioural strategy utilised for Looked After Children.

Resolved: (1) That the Head of Education be thanked for his informative report.

(2) That the Head of Education be requested to circulate attainment data reflected by school type, particularly reflecting where academies were stand alone or part of a trust.

(3) That the Elected Member of the Youth Parliament be requested to circulate information regarding her campaign, "Raising Aspiration".

(4) That the Head of Education be requested to circulate exclusion data for Looked After Children.

## **22. Special Educational Needs and Disabilities (SEND) Reform Task Group Update**

Mr Paul Sunners, the Chair of the SEND Reform Task Group, reported on the progress of the Task Group to date. He referred to the importance of member's attendance and collaboration, and to the discussions held at the meetings. The Chair thanked Mr Sunners and the task group for their work and advised that the Committee looked forward to their report and recommendations in April 2016.

Resolved – That progress made by the SEND Task group, be noted.

## **23. Work Programme 2015\_16**

The Director of Law and Democratic Services submitted a report concerning a work programme detailing the activities that the Committee would be undertaking during the forthcoming Municipal Year, with the aim of producing evidence based recommendations intended to provide service improvements for Cabinet and external agencies/bodies to consider.

Resolved – That the report be noted.

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# Member of Youth Parliament – Report on Achievements and Performance 2014 - 2016

## Children's Health, Social Care and Education

### Overview & Scrutiny Committee

Date: 3<sup>rd</sup> February 2016

Author: Head Of Children, Families & Community Health & Interim Director of Children's Services

Wards: All

Locality Affected: All

Parishes Affected: All

### 1. Purpose and Reasons

- 1.1 This report provides the Children's Health, Social Care and Education Committee with an update of performance and key issues relating to the Member of Youth Parliament (MYP). This will be the last report from the current MYP as the term of office ends in February 2016.
- 1.2 A key purpose of Children's Health, Social Care and Education Overview & Scrutiny Committee is to hold Commissioners of Children's Health and Social Care Services to account.
- 1.3 Any Commissioner of Children's Health and Social Care Services in Swindon is required to provide information on the planning and provision of children's health and social care services within the Borough and consult with the Committee on any planned substantial changes or developments to service provision.

### 2. Recommendations

The Committee is recommended to:

- 2.1 Note the report.

### 3. Detail

- 3.1 What challenges did you face?

Top Priorities	Process	Outcomes
<b>Ellie James</b> – MYP Adapting and changing a campaign to represent as many people as possible	A survey was conducted with young people to find out their views	The development of a DVD highlighting how difficulties can be overcome to achieve potential
<b>Wilfred Steenbergen</b> – Deputy Member of Youth Parliament (DMYP). How to affect change is	Remain accountable and follow processes	Production of an Anti-Bullying Poster and dissemination and sign up from secondary and

Further information on the subject of this report can be obtained from Claire Smith, Direct Dial Telephone Number 01793 465815, cesmith@swindon.gov.uk.

# Member of Youth Parliament – Report on Achievements and Performance 2014 - 2016

## Children's Health, Social Care and Education

### Overview & Scrutiny Committee

Date: 3<sup>rd</sup> February 2016

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challenging		special schools
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### 3.2 What have you done well?

Top Achievements	Next steps
<b>Ellie James</b> - I have grown significantly in confidence and my ability to speak publicly to a wide range of audiences has improved massively	I am planning to go to university in September 2016 and have been offered conditional places at both Durham and York. I am going to study Politics / Sociology and Anthropology.
<b>Wilfred Steenbergen</b> - I think that I have grown in confidence and that I can now speak in public (something I could never have attempted 2 years ago).	I have applied to University and will be studying creative writing

### 3.3 Supporting Information

#### 3.3.1 Ellie James – Member of Youth Parliament

##### Campaign successes

My original campaign was 'education before procreation' with a focus on teenage pregnancy and how it can affect an individual's future prospects in life. However I quickly realised that to fulfil my role as an MYP for Swindon I had to adapt and change my campaign to be more relevant (to the young people of Swindon) and to reach / represent a wider audience.

My campaign developed a focus on education and achievement. Following a survey carried out to discover what was preventing young people in Swindon achieving their potential I discovered that the two main factors were a lack of confidence and fear of failure. I decided to make a film with the support of ITV Fixers (who offer a service to all young people who have a campaign they want to broadcast). The short 90 second animation highlights how difficulties can be overcome to achieve your potential. This film is now available on the internet and I have sent links to all secondary schools across Swindon and I am hoping that the schools will use the clip during PSHE lessons to inspire and motivate young people to succeed.

#### 3.3.2

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Further information on the subject of this report can be obtained from Claire Smith, Direct Dial Telephone Number 01793 465815, cesmith@swindon.gov.uk.



# **Member of Youth Parliament – Report on Achievements and Performance 2014 - 2016**

## **Children's Health, Social Care and Education**

### **Overview & Scrutiny Committee**

**Date: 3<sup>rd</sup> February 2016**

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#### **Other opportunities**

- I have had the opportunity to work with Angus MacPherson, Police and Crime Commissioner for Wiltshire and Swindon, also peers from Wiltshire regarding the 'curriculum for life' agenda and how Personal, Social and Health Education (PSHE), lessons can be adapted so that all young people across Swindon and Wiltshire receive the same learning, this is a piece of work that hope to continue post my role as Youth Member of Parliament.
- Attending the House of Lords and meeting the speaker of the Lords.
- Attending the House of Commons and experiencing live debates and being chosen to speak from the dispatch box.

#### **3.3.3**

#### **Biggest learning experience**

- That you have to adapt and change your campaigns to represent as many people as possible.
- That sharing a resource (my 90 second film) is difficult to publicise and get out to the masses.
- Be prepared to be challenged, not everyone shares your views.
- Being part of regional and national meetings has given me the opportunity to have a voice in the decision making process for regional and national campaigns.

#### **3.3.4**

#### **Shaping me for the future**

I believe that without this experience I would not be the person I am today; I have grown significantly in confidence and my ability to speak publicly to a wide range of audiences has improved massively. I have met peers who have inspired me to push myself academically and who have motivated me to achieve. I have met an amazing group of young people from diverse backgrounds who I hope will remain friends for life.

I am planning to go to university in September 2016 and have been offered conditional places at both Durham and York. I am going to study Politics / Sociology and Anthropology with a view to a career in International Development with a large charity or Non Profit Organisation. My ultimate dream is to work for the United Nations.

# **Member of Youth Parliament – Report on Achievements and Performance 2014 - 2016**

## **Children's Health, Social Care and Education**

### **Overview & Scrutiny Committee**

**Date: 3<sup>rd</sup> February 2016**

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#### **3.3.5 Wilfred Steenbergen – Deputy Member of Youth Parliament**

##### **Campaign successes**

My campaign was focused around 'zero tolerance of bullying'. Working with Swindon Young Carers and Swindon Youth Forum we devised an anti-bullying poster that was sent out to all secondary schools in Swindon. The poster is now displayed in all these schools and each school has signed up to supporting the campaign.

#### **3.3.6**

##### **Other opportunities**

Being part of the Thought Tank Participation Group for disabled young people has enabled me to have a voice when it comes to shaping services for disabled young people across Swindon. I have learnt that young people can influence change and that adults do listen to what young people are telling them. Thought Tank feedback on changes that were being proposed regarding the Aiming High service, received some of our feedback that actually changed the paper that went to Cabinet.

With Thought Tank I had the opportunity to become a 'young inspector' and we have been asked to inspect 3 groups that are delivered by Aiming High.

I find it challenging to mix with my peers but Thought Tank has shown me that it is something I can do.

Shadowing Robert Buckland gave me a real insight into what it's like to be an MP attending the House of Commons.

#### **3.3.7**

##### **Biggest learning experience**

That the process of how to affect / make change is complicated, it's not an easy business and you have to stick to due processes and be accountable for the decisions you make.

#### **3.3.8**

##### **Shaping me for the future**

I think that I have grown in confidence and that I can now speak in public (something I could never have attempted to do 2 years ago). Being a Youth Member of Parliament has enabled me to gain a sense of independence, I now

# **Member of Youth Parliament – Report on Achievements and Performance 2014 - 2016**

## **Children’s Health, Social Care and Education**

### **Overview & Scrutiny Committee**

**Date: 3<sup>rd</sup> February 2016**

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realise that I can achieve things and that if I give things a ‘go’, I actually do enjoy them, something as simple as catching a train to regional meetings.

I have applied to university and will be studying creative writing; I love the written word and cannot imagine my future without it. My ultimate dream is to become a published author but writing articles through journalism would be great in the interim.

I have decided to defer starting university until September 2017 as I feel that even though the past two years has helped me to develop the skills I need to go to university, I want to continue my work with Thought Tank so I can be even more prepared to take that step towards independence.

3.3.9

### **Member of Youth Parliament Elections**

The Election for a new Member of Youth Parliament is currently underway. Six young people ranging in ages from 12–15 years from the following schools attended a recent candidate day and all expressed an interest in standing for the next election.

- Warneford Academy
- Swindon Academy
- St Josephs
- Churchfields

The election results will be announced on 23<sup>rd</sup> February 2016 in the Council Chambers, Civic Offices from 5pm. Do please feel free to join the event.

The newly elected Member of Youth Parliament and Deputy will report to the Committee in due course.

## **4. Alternative Options**

4.1 None

## **5. Implications, Diversity Impact Assessment and Risk Management**

### Financial and Procurement Implications

5.1 None

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Further information on the subject of this report can be obtained from Claire Smith, Direct Dial Telephone Number 01793 465815, [cesmith@swindon.gov.uk](mailto:cesmith@swindon.gov.uk).

# Member of Youth Parliament – Report on Achievements and Performance 2014 - 2016

## Children's Health, Social Care and Education

### Overview & Scrutiny Committee

Date: 3<sup>rd</sup> February 2016

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#### Legal and Human Rights Implications

5.2 None

#### All Other Implications (including Staff, Sustainability, Health, Rural, Crime and Disorder)

5.3 None

#### Diversity Impact Assessment

5.4 None

#### Risk Management

5.5 None

### 6. Consultees

6.1 The Board Director, Resources (Section 151 Officer) and Director of Law and Democratic Services (Monitoring Officer) are consulted in respect of all reports.

### 7. Background Papers

7.1 None

### 8. Appendices

8.1 None

## Children's Safeguarding Update

### Children's Health, Social Care and Education

#### Overview Committee

Date: 3<sup>rd</sup> February 2016

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Author:	Head of Children, Families & Community Health & Interim Director of Children's Services
Wards:	All
Locality Affected:	All
Parishes Affected:	All

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#### 1. Purpose and Reasons

- 1.1 This report updates the Committee on work being undertaken regarding Child Sexual Exploitation, Female Genital Mutilation, Honour Based Violence, Domestic Abuse and the Multi-Agency Safeguarding Hub.
- 1.2 Safeguarding Children, promotes the Council Vision, specifically Priority Four, "Help people to help themselves, while always protecting our most vulnerable children and adults". Safeguarding is also an integral element of the Swindon Health and Wellbeing Strategy.

#### 2. Recommendations

The Committee is recommended to:

- 2.1 Comment on the progress set out in the report and how these relate to safeguarding children in Swindon.
- 2.2 Identify any areas of concern that require further investigation.

#### 3. Detail

- 3.1 The report sets out both progress as well as challenges on the following Children's Safeguarding related work of the Council and its partners, namely, Child Sexual Exploitation, Female Genital Mutilation, Honour Based Violence, Domestic Violence and the Multi-Agency Safeguarding Hub.

Child Sexual Exploitation (CSE)

- 3.2 The creation of the Local Safeguard Children's Board (LSCB) Child Sexual Exploitation (CSE) Delivery Plan/Action Plan has enabled the prioritisation, resourcing, co-ordination and progressing of key deliverables of the CSE Strategy. The majority of actions on the delivery/action plan were complete in 2015 and work is currently taking place to refresh the plan against the new priorities which will be developed in line with the findings of the Partnership Profile and Serious Case Review.

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Further information on the subject of this report can be obtained from Michael Ash, Direct Dial 01793 464410, mash@swindon.gov.uk.

## Children's Safeguarding Update

### Children's Health, Social Care and Education

#### Overview Committee

Date: 3<sup>rd</sup> February 2016

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- 3.3 The Partnership Profile for CSE has provided an understanding of those people who are at most risk across Swindon. It has enabled targeted partnership activity, focused on identified areas of concern in Swindon.
  - 3.4 The council has had a CSE working group since January 2015, which is chaired by John Gilbert. There is a delivery plan in place that links closely with the LSCB action plan (**Appendix 1**). A presentation was made to the Children's Overview and Scrutiny Committee on 6th January 2016. The majority of actions in the delivery plan have been achieved within timescales.
  - 3.5 Funding and agreements are in place for a co-located CSE team with significant representation from Police and Local Authority, operating under one roof, ensuring a more co-ordinated response to CSE from key agencies. The Opal Team is expected to be operational by March 2016.

#### Multi-Agency Safeguarding Hub

- 3.6 A Multi-Agency Safeguarding Hub (MASH) provides the opportunity to improve safeguarding approaches through better information sharing across a range of agencies and shared high quality and timely safeguarding responses. The Wiltshire MASH began in January 2014 in County Hall, Trowbridge. At that time it was agreed that Swindon Borough Council would be a 'virtual partner' it is now appreciated that arrangements need to be more localised with workers co-located and integrated to share real time decision making.
- 3.7 A project to establish the Swindon MASH, where the three core members, Council's Children's Services, Health and Police members will be co-located, is making good progress with the MASH scheduled for testing in February 2016. Accommodation in Clarence House, on the Council's Civic Campus has been refitted to accommodate the MASH. The Police have successfully recruited experienced staff to work in the MASH, Health representation has been agreed and work is continuing to identify the Health staff who will work in the MASH.
- 3.8 The processes and procedures for the MASH have been defined and changes are being made to the computer systems that staff will use building on the already established Family Contact Point (FCP) structure and systems. As part of this progression the Domestic Abuse Pathway into Social Care is also being reviewed to ensure a timely and proportionate response to children and families that experienced domestic abuse within the family.
- 3.9 The Council and its partners continue to work with wide range of agencies to establish the MASH and agreement has been reached with the Probation Service to participate in the MASH from January 2016.

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Further information on the subject of this report can be obtained from Michael Ash, Direct Dial 01793 464410, mash@swindon.gov.uk.

## Children's Safeguarding Update

### Children's Health, Social Care and Education

#### Overview Committee

Date: 3<sup>rd</sup> February 2016

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#### Domestic Abuse

3.10 Domestic abuse continues to be a complex and challenging priority; it is a crime, as well as a social and public health issue, cutting across all geographic and cultural groups. The impact on those living with its effects is long lasting and devastating. Victims experiencing domestic abuse may suffer not only physical violence but also be subject to long systemic periods of psychological and emotional assaults, financial control and threats. The impact extends to their families and includes children and young people.

3.11 The Council and its partners have adopted the following definition in accordance with Home Office guidance:

*"Any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who are or have been intimate partners or family members regardless of gender or sexuality. This can encompass, but is not limited to, the following types of abuse: psychological, physical, sexual, financial and emotional."*

3.12 The Council and its partners commissioned a new Domestic Abuse Strategy in 2015. The work has been completed and Cabinet recently agreed the new strategy. The priorities are:

**Victims and Survivors**, Swindon and Wiltshire agencies will work together in partnership to meet the needs of all victims and survivors to ensure access to quality appropriate support

**Children and Young People**, to recognise the specific needs of and provide support for children and young people whose lives are affected by domestic abuse

**Perpetrators of domestic abuse**, to ensure that perpetrators are held accountable for their actions and brought to justice, using both supportive and enforcement approaches to reduce offending behaviour and harm

**Training and Awareness Raising**, to increase the local communities and organisations understanding and awareness of the extent and impact of domestic abuse

**Continuous improvement**, in both statutory and voluntary agencies, sharing skills, resources and good practice to reduce the prevalence of domestic abuse

3.13 The completion of the Strategy is timely given that monthly returns show the reporting of Domestic Abuse increasing by just over 30% in the first 6 months of 2015/16. The new Strategy and Action Plan will help to address this. One example is improving the work agencies deliver at Multi Agency Risk

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Further information on the subject of this report can be obtained from Michael Ash, Direct Dial 01793 464410, mash@swindon.gov.uk.



## Children's Safeguarding Update

### Children's Health, Social Care and Education

#### Overview Committee

Date: 3<sup>rd</sup> February 2016

Assessment Conferences (MARACs). Here we have seen an increase in repeat referrals with 45% of cases being referred back again due to repeat incidents. The detailed Action Plan is shown in **Appendix 2**.

#### Female Genital Mutilation (FGM)

- 3.14 In 2015 Swindon LSCB has developed multi-agency guidance and procedures to address Female Genital Mutilation (FGM). The board has developed a pocket guide to raise awareness of the issue amongst the children's workforce, 1400 pocket guides have been distributed to date. The LSCB has incorporated FGM into Level 3 safeguarding training and provided two specialist courses in 2015.
- 3.15 Work in the area of FGM will be incorporated into a strategy to address violence against women and girls and will be led by the Community Safety Partnership. The strategy will join up the areas of; CSE/Sexual Violence, Teenage Domestic Abuse. Forced Marriage and FGM.

#### Honour Based Violence

- 3.16 Training in awareness of 'Honour' Based Violence (HBV), Forced Marriage (FM) and Female Genital Mutilation was delivered in 2015. Since 2010 over 400 frontline staff have attended this course. Two further courses are scheduled for 2016.
- 3.17 MARAC (Multi Agency Risk Assessment Conferences) continue to deal with cases. Some of which have been identified at the MARAC as risk factors. The cases are dealt with in a closed MARAC as appropriate.

#### **4. Alternative Options**

- 4.1 The Council has a duty to scrutinise its operational activities.

#### **5. Implications, Diversity Impact Assessment and Risk Management**

##### Financial and Procurement Implications

- 5.1 There are no specific financial implications arising from this report

##### Legal and Human Rights Implications

- 5.2 All legal and human rights considerations have been taken fully into account in compiling this report. It is considered that the recommendations of this report are compatible with Convention rights.

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Further information on the subject of this report can be obtained from Michael Ash, Direct Dial 01793 464410, mash@swindon.gov.uk.



## Children's Safeguarding Update

### Children's Health, Social Care and Education

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#### All Other Implications (including Staff, Sustainability, Health, Rural, Crime and Disorder)

- 5.3 There are no direct implications in this report.

#### Diversity Impact Assessment

- 5.4 Diversity Impact Assessments have been carried out on all of the functions reported.

#### Risk Management

- 5.5 No additional risks have been identified.

### **6. Consultees**

- 6.1 The Board Director, Resources (Section 151 Officer) and Director of Law and Democratic Services (Monitoring Officer) are consulted in respect of all reports.

### **7. Background Papers**

- 7.1 None.

### **8. Appendices**

- 8.1 Appendix 1: Child Sexual Exploitation Action Plan  
8.2 Appendix 2: Domestic Abuse Action Plan

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**Council CSE Strategy**  
**Action plan @ November 2015 Version 11**

**Priority 1 – Leadership and Management**

<b>Actions</b>	<b>Lead</b>	<b>Target Date</b>	<b>Progress review</b>	<b>Evidence of Impact</b>	<b>RAG Rating (Action completed or on track to complete in time)</b>
<b>1. Elected Members</b>  a) Elected Members briefed on CSE  b) Elected Members have completed online training as a minimum  c) Elected Members are engaged in raising awareness in their localities	Children, Families and Community Health (Karen Reeve)	June 2015  Oct 2015  2015-2016	a) Elected Members briefed in early 2015  b) On line training set up, Members started to complete  c) Members' engagement will need support and clarification as to what this will look like – possibly through the Localities team (tba)	Small number of Cllrs now actively asking for news & updates.  Scrutiny Committee have requested a briefing in early new year 2016  All bar 17 Councillors have started or completed the on line training.	<b>Green</b>
<b>2. Corporate Board and senior leaders are aware and engaged across the Council</b>  a) Briefing for Corporate Board October 2015 b) Briefing for Cabinet Member Children's Services October 2015 c) Report to Children's Overview and Scrutiny Committee December 2015, as part of wider Safeguarding report d) 2 hour Briefing Meeting on Council CSE work for Overview and Scrutiny Committee and Corporate Parenting Board January 2016 e) Overview and Scrutiny Committee have requested to undertake specific project to contribute to Council CSE Agenda, for example preparing a CSE Information pack for taxi drivers. To be discussed after January 2016 Overview and Scrutiny Briefing Meeting.	John Gilbert  Karen Reeve  John Gilbert Karen Reeve  Karen Reeve  TBA	Oct 15  "" ""  Dec 15  Jan 2016  TBA	All on track. Briefing meetings arranged.	Corporate Board asked for action dates to be completed & monitored Council located funding for Opal service and other activity as a priority. Board Directors are ensuring their teams are engaged and activity as agreed is taking place  Scrutiny request for involvement	<b>Green</b>
<b>3. Whistleblowing policy effective across the Council</b> a) Ensure that the Council whistleblowing policy is understood and visible across the Council	Sam Mowbray	Sept 15	Nick Hobbs has updated whistleblowing policy, posters redesigned and internet updated.	Whistleblowing reports have been made (not CSE related)	<b>Green</b>
<b>4. Data on prevalence, research etc is used to inform and revise the CSE Strategy and ensure adequate resource provision</b>	Children, Families and Community Health (Karen Reeve)	Autumn 2015	CSE strategy agreed at Cabinet/Council Jan 15. To be reviewed in Autumn 15.  Data is being routinely collected and second profile has been collated and circulated and has informed activity of both police and social care.	Data used to direct activity in a number of cases which has led to updated protection plans.	<b>Green</b>
<b>5. Local arrangements with partners are effective, and challenged if needed</b>  a) Chairs of Community Safety Partnership Board, LSCB, LSAB, Health and Wellbeing Board, One Swindon Board to have twice yearly meetings to establish	John Gilbert	March 2016  March 2016	Update reports have been on the various Boards as set out.  Reports to be introduced as set out for increased awareness.	Increased awareness for partners and members alike.  Increased awareness for partners etc.	<b>Green On Track</b>

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cross-overs in agendas and set joint priorities in relation to CSE. Through One Swindon, this should include DWP.  b) John Gilbert to discuss CSE Agenda with Influence, to ensure effective links with business community.	John Gilbert	March 2016	Meeting to receive CSE report update with JG attending.	Business awareness and feedback to CSE	
<b>6. Ensure staff across the Council are briefed on the CSE Strategy &amp; they know what their role is in relation to it.</b>  a) Provide training for SENAT and LACES team  b) Strengthen links with EWO/schools to identify children at risk when attendance has been flagged as an issue. Could this be an issue when the preventative work with schools is a traded service, so schools could choose not to trade  c) Agencies may not always pick up on learning difficulties, a key risk factor of CSE - how can we support them to do this better?	Education (Peter Nathan)	Autumn 2015	a) Training for LACES Summer Term 2016 due to team restructure. SENAT Team Training to be provided in Spring Term 2016. <b>Green</b>  b) EWOs to be invited to be part of the same training with SENAT. PN and KR to liaise. <b>Amber</b>  c) We commission specialist services for instance working with children with hearing/vision difficulties, autism etc. Could also be picked up through the Teaching School. JC to follow up with PN. <b>Amber</b> Barnardos trainer (funded by West of England Project) will be facilitating courses in 2016 based on recent research		<b>Green</b>

**Priority 2 – Community Engagement**

<b>Actions</b>	<b>Lead</b>	<b>Target Date</b>	<b>Progress review</b>	<b>Evidence of Impact</b>	<b>RAG Rating</b>
<b>7. Development of community communication &amp; engagement strategy to include work of the Communities/Localities staff</b>  <b>Identify who in our communities to best engage and discuss how we progress the prevention agenda in defined groups or neighbourhoods (as informed by the CSE Profile)</b>	Patrick Weir/Sam Mowbray		<u>Progress at 13 August</u> Strategy for community engagement taking place at 3 levels: 1. 'Broadcast' / universal level Council messages to be developed and delivered through corporate communications 2. Use Locality Forums for public engagement / awareness raising / education and advice to ward members, community representatives and residents on how to raise concerns. Briefing to be jointly delivered by service experts and police. Dates through 2015/16 to be identified. Jeanette/Patrick, Localities and Police teams to progress. 3. Targeted engagement of defined community groups and leaders – to be informed by CSE risk profile. Joint approach with Police to be worked up – Jeanette and Patrick to progress, with Mark Walker (Community Programme and Locality Lead for Town Centre)		<b>Green</b>

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			(Mike Ash) The Community Safety Partnership could take a lead on some of this. Covered in partnership groups meeting together, and included in discussion on VAWG.		
8. Ensure good engagement and understanding in schools	Peter Nathan	Autumn Term 2015	a) School/College leaders consulted through school headteacher fora (SASH/SAPH/ASSSH) to ensure that all appropriate staff and governors are fully aware of procedures to follow and are fully able to access support and training as required.	Schools making referrals to social care about children they are worried about Schools positively engaged in child protection planning meeting, conferences, and TACS	Green
a) Work with education providers and seek ways to better support them to deal with the issues.					
b) Ensure there is a minimum level of training delivered within and across governors, school leaders, teaching and support staff	Peter Nathan and Sarah Turner	Autumn Term 2015	b) Training to be offered to schools via Teaching School and to governing bodies via Governor Services. Sarah will link with the Teaching School/Simon Cowley		
c) More to be done to raise awareness in schools of possible indicators of CSE across wide range of school staff, being particularly mindful of young people with learning disabilities.	Peter Nathan and Sarah Turner	Autumn Term 2015 through safeguarding training	c) Schools safeguarding advisor to input to headteacher group meetings including headteacher breakfast briefing		
d) Ensure that Behaviour Policy includes information for school signposting targeted support/resource to young people, especially girls, with autism as they are particularly at risk as they find it more difficult to understand or recognise grooming.			d) Policy being developed on Behaviour including looking at reducing exclusions (particularly Fixed Term Exclusions) through Fair Access Panel and behaviour working group with input from EOTAS. Policy to include signposting on CSE.		
e) Work with schools to build their capacity to support young people if they become victims			e) Through training on CSE as identified above.		

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<p><b>9. Develop ways to engage young people and help to educate them about areas of risk and prevention</b></p> <p>a) Learning disability is one of the key risk factors. How do we support young people with SEND to understand the risks? Engage with specialist providers (through CSE Working Group for school headteachers referenced above) to ensure the strategy to do this meets the needs of the SEND cohort. We need to better understand how can we educate children and young people with SEND about the risks of CSE? They are at risk of becoming both victim and perpetrator.</p> <p>b) Develop further strategies to prevent young people from being drawn in to CSE e.g. such as Chelsea's Choice</p> <p>c) Healthy Schools Coordinator to be involved in developing and delivering this work, including through PSHE.</p>	<p>Peter Nathan</p>                      <p>Cherry Jones for Healthy Schools Coordinator</p>	<p>Spring Term 2016</p>	<p>a) CSE Council Lead to attend SENCO Forum to raise awareness of CSE. Also to attend SEND Strategic Board to ensure CSE is part of SEN Strategy.</p> <p>b) Monitor use of Chelsea's Choice in secondary schools – aware that many schools used this last year but cost may prevent continued use (PN) <b>Amber</b></p> <p>c) Schools Safeguarding Advisor to raise awareness of CSE through Headteacher Briefing and through Coordinators meetings. And Healthy Schools Coordinators to continue to promote SRE (Sex and Relationship Education), anti-bullying etc as part of healthy schools agenda to raise self-esteem and self-awareness amongst young people.</p>	<p>Green</p>
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	Priority 3 – Case Identification				
Actions	Lead	Target Date	Progress review	Evidence of Impact	RAG Rating
<b>10. Role of early help provision is supported to identify early indicators of CSE risks in the community</b> a) All Early Help (EH) staff to complete on line training b) Clarify how early help record to be used in CSE c) Clarify expectations of Education Welfare Officers and Youth Engagement Workers (EWOs and YEWs)	C,F & CH J Chipping Kevin Leaning	October 15       Feb 15	a) Vast majority of EH staff now completed on-line training. Tools being shared and briefed in. b) EH to use exemplar for cases to enable reporting c) EWO to be undertaken -JC	Case file audits indicate better understanding and identification of cases Tools being used	<b>Green</b> <b>On track</b>
<b>11. Use of tools to aid practitioners identify cases</b> a) CSE handbook to be updated b) CSE tool to be adapted to move away from scoring	C,F & CH J Chipping	October 15	Screening tools have been updated and agreed at CSE and Missing Children Sub-group. On track for handbook to be updated by end October. - completed	Handbook available on line CSE tool adapted and being used	<b>Green</b> <b>On track</b>



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Priority 4 – Practice Development					
Actions	Lead	Target Date	Progress review	Evidence of Impact	RAG Rating
<b>14. Social Work Practice Improvements to include:</b> a) Better use of tools- screening tool, handbook, CSE ICS exemplar, vulnerability checklist  b) Minimum standard of case work document to be developed	C,F & CH       J Chipping	Oct 15       Oct 15	a) CSE ICS exemplar complete, tools being updated with partners.      b) Not yet developed but will be completed on time. Meeting have taken place with all social work teams in relation to completion of the CSE	Cases audited showing improved practice in some cases. Terminology used in case files is being checked as a proxy indictor      Case audits evidence better management oversight.   MARP now functioning better, greater intelligence sharing	<b>Green</b>      <b>All actions on track</b>

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c) Further improve management oversight	J Chipping	Dec 15	exemplars. c) Management oversight being regularly audited, has improved but some areas still need further action (relates to quality of agency staff)	evident Some cases being challenged	
d) Further improve case working (care plans)	M Young & V Williams	Dec 15	d) As c) above		
e) Ensure missing children processes compliance & intelligence to inform continued improvements in case-working	M Young & V Williams	Oct 15	e) Process being revised and made more robust		
f) Ensure further improvements in risk management and understanding across all cases	V Williams	April 2016	f) MARP review recommendations being implemented, which will and has changed aspects of the risk management actions to ensure intelligence, actions and cross agency working to secure greater security for children is achieved.		
g) Role /requirements of the Outreach Service defined	M Young/J Chipping	Dec 15	g) Completed		
h) Threshold criteria to be specified for CSC and CSE cases	V Williams	Nov 15	h) Discussions have started. Will request on agenda for next SW managers meeting so ownership agreed across teams. Meeting will be arranged with FCP, Assessment and Child Protection Team prior to this.		
i) Role of dedicated worker – recruit, define, ensure the role is effective	J Chipping	Apr 15	i) Recruitment complete and in post		
<b>15. Develop stronger systems to co-work and share information – Council and partner agencies, including schools and colleges</b> a)				<b>THIS ACTION POINT HAS BEEN REMOVED</b>	<b>Green</b>
<b>16. Define model of proposed case working with the benefit of research and best practice examples shared nationally</b>	C,F & CH K Reeve	June 15	Model defined and report written	Opal team designed from this and model being implemented	<b>Green</b>
<b>17. Ensure good engagement in the LSCB CSE &amp; Missing Sub group to ensure effective liaison</b> (Chair of LSCB CSE and Missing Sub Group is Wiltshire Police)	C,F & CH K Reeve	complete	Complete but to monitor going forward		<b>Green</b>
<b>18. Undertake evaluation of the Multi-Agency Risk Panel that the Council leads and Chairs</b>	C,F & CH K Reeve	May 15	Complete, implementation plan now being implemented		<b>Green</b>
<b>19. Training &amp; development of staff</b> - on line course. a) Ensure meets needs b) Ensure all relevant staff across the council attended Inc:  Housing Leisure		April 2016	<ul style="list-style-type: none"> <li>Training for <u>town centre multi agency teams</u> reviewed on 10 August – new plan in place for front-line workers, in conjunction with Police colleagues – dates to be confirmed</li> <li>Training plan for mobilising <u>Localities teams</u> (to include</li> </ul>		



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Parking Enforcement			Community Programme Leads, Community Facilitators, Health Ambassadors, Community Navigators, Researchers, Link Workers, Sports Coaches and neighbourhood volunteers) to be developed on 18 <sup>th</sup> August.		
<b>20. Enable partners to offer appropriate support to their staff when working with young people subject to CSE so that social workers are not carrying out this function</b> a) Evidence examples to be sought b) Exploration of how best to carry out this action to be determined	CF & CH J Chipping & CSE Sub group of LSCB	Feb 16	Methodology has been determined and audit to be conducted to gather the evidence o need and impact		
<b>21. Taxi licensing to include CSE training, checking and vetting, and drivers alert to issues to aid identification of risk</b>	R Bell \ K Ashton	31 December '15	All of our licensed taxi and private hire drivers now have an up to date DBS.  New checks now reviewed every 3 years in line with best practice advice. Taxi Panels ongoing with a view to possible revocation in a small number of cases, though these are not linked to CSE.  Training on CSE matters is now included in mandatory test for new drivers.  CSE pocket guide and cards distributed for display in taxis for drivers and customers.		<b>Green</b>
<b>22. Support local hoteliers to be alert to CSE</b>	CJ to involve Public Protection	October 2015	Brief for Council CSE Comms Group e.g. formal letter to all hoteliers and national groups re this issue, and potentially offer training.  Gavin Calthrop comms update - will be picked up in plan for Jan through March leading up to national awareness day and following liaison with hoteliers and businesses to see what they are already doing.	Public Protection (Environmental Health to lead alongside BAU activities with Hoteliers	<b>Amber</b>
<b>23. Role of Early Help professions. i.e. YEWS, EWOs, Youth Offending Team (YOT), School nurses to be further enhanced</b>	C,F & CH J Chipping & Kevin Leaning	October 15	People have done training, info sent out through Early Help Lead Briefing. On track. Attending skills base and working with parents training provided by Barnardos trainer funded by West England Project		<b>Green</b>
<b>24. Legal Services to research and identify what legal powers are available to the Council and advise support and assist relevant services as and when these powers may need to be deployed</b>	AF and Litigation Team	14 July 2015	Document prepared and circulated	Used as a key tool in the MARP	<b>Green</b>
<b>25. Expectations of sexual health clinics links with council to be defined</b>	Cherry Jones		Through commissioning of sexual health services, Agenda item at SHEG. Jo Hartley leading. Data sharing.		

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			JC has met with Jo Hartley. Sexual Health worker will be part of Opal Team.		
			All school nurses and sexual health nurses have been trained.		

**Priority 5 – Long Term and Therapeutic Support for victims**

Actions	Lead	Target Date	Progress review	Evidence of Impact	RAG Rating
<b>26. Define commissioning need and relate to commissioning of Child and Adolescent Mental health services</b>  a) Use young people's feedback to inform 'what works'	Sue Wald	April 2016	Commissioning Strategy for children and adolescent mental health services reflects needs of children who have experienced abuse Further submission on CAMHS Transformation plan which includes support for children who have experienced abuse due April 2016 to NHS England. Feedback from young people to be included on strategy	Commissioning strategy for CAMHS in place but not yet impacting on improving outcomes for children	Amber

**Priority 6 – Engagement with LSCB**

Actions	Lead	Target Date	Progress review	Evidence of Impact	RAG Rating
<b>27. Ensure we fully support the LSCB to engage all areas of the wider children's workforce and community</b> a) Check process and systems in place at GWH/AWP/CAMHS re identification, risk assessment and notification	LSCB Sub group- J Chipping the lead for the Council	January 16	Extend to other partnership boards.  Written reports from MARP have been submitted to LSCB CSE and Missing sub-group since July 2015. JC is the link between the Council CSE working group and LSCB CSE sub-group. To ensure information is shared across groups and plans. Plan is the LSCB Quality Assurance Group will audit CSE and agencies processes/systems/recording.		

**Priority 7 – Data Set**

Actions	Lead	Target Date	Progress review	Evidence of Impact	RAG Rating
<b>28. Develop a robust multi-agency local data set in order to develop further our intelligence, direct resources, benchmark including:</b> a) Cross reference soft data i.e. truant, missing, exclusions b)	C,F & CH K Reeve	March 15 update due Oct 15	Second 'profile' produced in March 15. Further development underway including Wiltshire Council to get consistency across the authorities. Completed Update16/11/15-Police are undertaking annual profile. Meetings taking place 7/12/15 with police missing coordinator, EWO, School safeguarding advisor to look at missing data.		Green
<b>29. Campaign for a national definition and data set – on-going debate within ADCS to support this area, no likely developments before General Election.</b>	J Gilbert & K Reeve	On-going	ADCS links being used to raise this at every opportunity. National agenda gone quiet other than in relation to the new national inquiry.	Discussion at ADCD, aware of debates at DfE, DCLG & HO, unclear what arisen from this as yet	

**Priority 8 – Partnerships / Prevent**

Actions	Lead	Target Date	Progress review	Evidence of Impact	RAG Rating
<b>30. Ensure staff are supporting the use of disruption activity that use the full range of powers available to the Council,</b>			Update from meeting MA,KR, JC and Mark Walker (3/11/15) a) Police and SBC are about to pilot a Multi-agency	c) Housing Management Team received awareness training to be followed up with operational staff receiving e-	

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including <ul style="list-style-type: none"> <li>a) Links to CSP- Offender Group</li> <li>b) Enforcement- Where there are concerns about a place</li> <li>c) Housing</li> <li>d) Licensing</li> <li>e) Parking Enforcement</li> <li>f) EHOs</li> </ul>	KR and MA		<p>Sexual Exploitation Group (MASE.), which will focus on Offenders. Chaired by the police and TOR being written by Mark Luffman for Swindon and Wiltshire. Will be convened when concerns are raised about individual or group.</p> <p>b) Weekly meetings are already in place to highlight activity in the community and to decide what to disrupt. CSE will be included. There are also quarterly events which are police led.</p> <p>EHOs – establish training programme for all EHOs. Maximise opportunities that EHO work presents for using their power to ‘disrupt’. Consider reviewing the opportunity to ‘disrupt’ through e.g. the cumulative impact policy (alcohol)</p>	learning module. Case already referred to Opal following initial training (Railway Village)	
<b>31. Interventions</b> <ul style="list-style-type: none"> <li>a) Ensure Children’s Social Care are finding alternatives to secure accommodation for young people who do not see themselves at risk,</li> <li>b) Clear specific multi agency case management through Child protection procedures or through a Multi-agency Sexual Exploitation Meeting (MASE), where the focus is on the offenders.</li> <li>c) Closure Orders (new powers – CSP taking first 2 Closure Orders through the courts)</li> </ul>	MA/KR Actions need to be cross referenced to other plans.		<p><u>Mike Ash updates 17.8.15</u>  <u>Update Meeting</u>  <u>MA,KR,MW,JC 3/11/15</u></p> <p>a)This to take the form of appropriate accommodation as agreed by the existing Housing Panel that considers complex needs</p> <p>b) Police and SBC are about to pilot the MASE. Chaired by the police and TOR being written by Mark Luffman for Swindon and Wiltshire. Will be convened when concerns are raised about individual or group.</p> <p>c)First Closure Order taken place although not for CSE purpose</p> <p>Jeanette/Karen attended Housing Management Team to promote awareness amongst Housing Managers. 10th Sept .</p>	<p>MARP -when discussing each child the panel are considering whether there are any orders available that can disrupt the abusers activities. New suspects form attached to the Vulnerability checklist so we are now able to collated intelligence about suspects.</p>	

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## Domestic Abuse Reduction Strategy Action Plan 2015-2016 Version 4

Theme	Action	Lead	Completion	Progress Report
<b>1. Victim &amp; Survivors</b>				
1.1	Look at options to develop third party reporting pathways. Establish clear definitions and make links to MARAC.	DASG	March 2016	
1.2	Undertake 24 Hour Snapshot	Lin Williams/DA Steering Group/DA Forum	January 2016 & 2017 June 2016 & 2017	
1.3	Set up Domestic Abuse Scrutiny Panel	Lin Williams/Andy Fee/DASG & partners	November 2015	Task & Finish group working on ToR/membership.
1.4	Widen support networks for victims & survivors by introducing Champions to relevant organisations and improve links to i) Community Navigators ii) SAIL iii) 5 Wards Project	Lin Williams/PST Lead Network	March 2016	Champions for Community Navigators identified and working alongside SWA
1.5	The Care Act - ensure links with Adult Safeguarding.	Lin Williams/Doug Bale/Jennifer Laibach	September 2016	
1.6	Develop mechanism for consultation with victims & survivors	Lin Williams/Service Providers	December 2016	
1.7	Develop standardised responses to reporting- shared response/signposting/referral. Same service regardless of organisation	Lin Williams/Service Providers/DA Forum	December 2016	

1.8	Review and improve responses to standard risk victims	Lin Williams/Andy Fee/Pam Gough/SWA	October 2016	Pilot through Horizons with Wiltshire. Evaluation, then consider implementation in Swindon
1.9	Establish Stronger links to Family Life/Troubled Families	Lin Williams/Charmaine Tarring/Emilia Koza		
1.10	Monitor and implement recommendations from DHR1	Lin Williams/DASG	June 2016	Recommendations for each agency ongoing
1.11	Monitor and evaluate the Health Project	Lin Williams/Ian Stenner/Sarah Hardwick/Joanne Smith/DASG	May 2016	After initial difficulties, victims are now being supported.
1.12	Continue to look at viability and identify funding to implement the Business cases: 1) Befriending Project. 2) Early Family Interventions (see also CYP and Perpetrators)	Lin Williams/Arlene Griffin	ongoing	
<b>2. Children &amp; Young People</b>				
2.1	Develop School engagement - healthy relationships both primary/secondary. Make the agenda relevant to schools – link to truancy/exclusions. Engage through head teachers forum	Healthy Schools Co-ord/Lin Williams/LSCB	December 2016	
2.2	Review and develop systems for supporting children particularly Under 5s	Lin Williams/Health Visitors/LSCB	March 2017	

2.3	Develop role of and input from YOT – work with young people displaying harmful behaviours – DA	Lin Williams/Mat Bywater	March 2017	
2.4	Continue to review information sharing protocol within early years settings and schools/colleges around DA incidents and timely information linked to MASH		2016	
2.6	Monitor JSNA to ensure actions are delivered	DASG/Public Health	ongoing	
2.7	Early Family Interventions Business case see 1.12			
2.8	Continue to look at viability and identify funding to implement business case: 1) PPD1 review	Lin Williams/Arlene Griffin/Andy Fee		
2.9	Review and update Protocol 5 – Children experiencing domestic abuse	Domestic Abuse Forum		
<b>3. Perpetrators</b>				
3.1	Develop processes for sharing information on perpetrators including from specialist DV Courts	HMCS/Police/Probation/DASG	September 2016	
3.2	Evaluation of non-mandatory perpetrator programme	BGSW/Lin Williams/PST/DASG	March 2016	
3.3	Communications Strategy to include campaign to target perpetrators	Lin Williams/Probation/Police/BGSW	March 2016	

3.4	Monitor actions from DHR1	Lin Williams DASG	June 2016	
3.6	Early Family Interventions Business case see 1.12			
3.7	Continue to look at viability and identify funding to implement the business case: 1) DVPO additional interventions 2) CARA Project – conditional cautioning and interventions	Lin Williams/Arlene Griffin/Andy Fee		
<b>4. Training &amp; Awareness</b>				
4.1	What agencies training wants/needs are. Questionnaire/Needs Assessment to inform & develop TRAINING STRATEGY	Lin Williams/DASG	February 2016	
4.2	Develop and implement a COMMUNICATIONS STRATEGY targeting frontline staff: - on signs & symptoms and how to refer and to whom  - health frontline staff – GPS, Health visitors, GP Staff, pharmacies, GWH around health & wellbeing  -Campaign on social media/cyber bullying and how it's used by abusers  -Programme of train the trainer for cascading training to staff across agencies.	Lin Williams/Communications Team/Awareness Sub Group  Health Project workers/community navigators/Communications strategy	July 2016	



4.3	Develop closer links with Sexual Health Services/training and awareness in educational work and adding to their toolkit.	Dawn Mullis/Jo Hartley/Lin Williams	October 2016	
4.4	Monitor recommendations and actions from DHR1	Lin Williams/DASG/CSP	ongoing	
<b>5. Continuous Development</b>				
5.1	Identify effective ways of measuring outcomes. What does success look like and how to ensure victims are safe	DASG/Scrutiny Panel	March 2017	
5.2	Develop links with Registered providers and encourage active engagement with policies and Forums	Lin Williams/Arlene Griffin/Registered Providers	July 2016	
5.3	Identify what data is collated and by whom, its usefulness and what is required for the future	DASG/Lin Williams/Sally Penver/ partner organisations/Steve Kensington	March 2016	
5.4	Continue to look at viability and identify funding to implement the 5 business cases: 1. Befriending Project 2. Early Family Interventions – whole family approach 3. Interventions alongside DVPOs 4. PPD1 Review 5. Perpetrator Provision – CARA	Lin Williams/Arlene Griffin	ongoing	

5.5	Continue to identify national/international up to date research and good practice to support children & young people experiencing domestic abuse either within the family or in their own relationships	DA Lead/DA Steering Group/LSCB		
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## **Restorative Youth Services Work Programme 2015/16**

**Children's Health, Social Care and Education Overview & Scrutiny Committee**

**Date: 3rd February 2016**

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Author:	Head of Children, Families & Community Health & Interim Director of Children's Services
Wards:	All
Locality Affected:	All
Parishes Affected:	Not Applicable

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### **1. Purpose and Reasons**

- 1.1. The Children's Health, Social Care and Education Overview & Scrutiny Committee have specific responsibility for the review of Local Authority services delivered to children and young people in Swindon. This includes the provision of specialist integrated services delivered against local and national performance indicators, including Restorative Youth Services (**RYS**) which comprise the Youth Offending Team, confidential youth counselling service On Trak, and the (youth) substance misuse service U-Turn.
- 1.2. The Committee's work programme requires a Report to be submitted providing an overview of the work of Restorative Youth Services, including progress in relation to targets and challenges to future service delivery.

### **2. Recommendations**

The Committee is recommended to:

- 2.1 Note and approve progress in relation to the strategies for meeting Government and local targets for reducing first time offending, re-offending, remand, custodial rates, and substance misuse. This Report also reflects on progress with the delivery of confidential youth counselling services.

### **3. Detail**

- 3.1 The Local Authority (Chief Executive) with responsibility for Children's Services is required to ensure that the range of Youth Justice Services outlined in section 38 (4) of the Crime and Disorder Act 1998 are delivered through the Youth Offending Team and associated services.
- 3.2 The confidential youth counselling service On Trak, and the youth alcohol & drug misuse service U-Turn, are now under the direct management of the YOT's Manager (now entitled RYS Service Manager) and, accordingly, have separate plans incorporated into the Restorative Youth Services Plan 2015-16. This plan acknowledges national and local priorities relating to offending, substance misuse and counselling, and describes strategy, performance, partnerships,

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Further information on the subject of this report can be obtained from Matt Bywater, 01793 463890, mbywater@swindon.gov.uk.

# **Restorative Youth Services Work Programme 2015/16**

## **Children's Health, Social Care and Education Overview & Scrutiny Committee**

**Date: 3rd February 2016**

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finance, as well as the challenges and opportunities which now govern future priorities.

- 3.3 The Restorative Youth Services Plan 2015/16 was approved by the Youth Offending Team Management Board on the 23 July 2015 and submitted to the Local Authority's Health and Wellbeing Board on the 9 December 2015 for approval. Board members offered their congratulations to the (RYS) team for the successful inspection which took place in March 2015. The RYS Plan was also approved by the Youth Justice Board on the 4 November 2015, and their letter of approval included a statement by the Head of the YJB South West Business Area stating that he was "particularly impressed by the highly detailed plan which meets the requirements of the YJB guidance expectations as well as providing a comprehensive description of the local inter-agency environment in which the YOS operates; and has a creative presentation which lends itself to a number of different audiences."
- 3.4 Developments in 2015 associated with the Youth Offending Team include a historic fall (year on year) in the number of first time entrants to the youth justice system and a low rate of custody due in part to the success of working closely with the Courts to show that risk and rehabilitation, for even the most troubled young people, is manageable and effective in the local community. Re-offending rates experienced a spike as a result of a more complex cohort of offenders which was explored further in the HMIP Inspection of the Youth Offending Team in March 2015. This resulted in the production of a full report and a local post inspection Action Plan. This Plan incorporated subtle but important changes in operational practice and overarching strategies, including the more sophisticated analysis of re-offending data using a specialised tool kit. Other key factors (influencing progress with the objectives set out in the 2015/16 Plan) include: the provision for Magistrates to make a requirement known as 'Unpaid Work' in the community; the implementation of communications software programmes to improve the confidence and self-esteem of young people; intervention by a speech and language specialist; and a national overhaul and update of the ASSET assessment tool which will require the training of multi-agency staff in anticipation of new systems and processes due for implementation in May 2016 designed to assess the risks and causes of offending behaviour.
- 3.5 RYS Performance for period April 2015 to January 2016 shows that: -
- The rate of first time entrants into the youth justice system remains slightly above national and south west averages, but is continuing to reduce (from 138 to 117 over this period).
  - Since October 2013 custody rates have continued to fall (from 8 young people to 4 young people) well below the national average.

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Further information on the subject of this report can be obtained from Matt Bywater, 01793 463890, mbywater@swindon.gov.uk.

# **Restorative Youth Services Work Programme 2015/16**

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- Re-offending rates are monitored in two ways. Firstly, by monitoring a cohort of young people who offended in the period January to December 2012. For this group, re-offending rates decreased from a peak of 41.7% to 41.2% at current rates. By comparison, national averages stand at 37.9%. A more realistic count of re-offending is now obtained from a new 'live tracker' tool, which monitors rates of re-offending for current offenders. This shows a rate of 35.4%, well under national averages.
- The Local Authority and YOT have a target to reduce the number of remands into custody by providing packages of bail & remand support which have the confidence of Magistrates. This has resulted in a saving in the remand budget in the order of £30,000 (for 2015/16).

3.6 The Plan for 2015/16 also incorporates strategies to educate young people about the harm caused through the misuse of alcohol and drugs. To support this, U-Turn operates through the Traded Services initiative to help schools raise awareness about the impact of drugs (including legal highs) on the teenage brain. U-Turn worked with 129 young people in treatment last year and all were able to demonstrate positive outcomes. Out of these 129 young people, only 2 required specialist pharmacological treatments for class A use. U-Turn have received 89 referrals during April-December 2015, with 52 assessments completed. Close partnership working with CREATE studios resulted in a joint funding initiative to produce a short educational film to help young people understand the impact of substance misuse on the adolescent brain. The film was successfully launched at Cineworld in December 2015, receiving over 800 YouTube hits within the first few days, as well as extensive media coverage.

3.7 A number of challenges were faced at the beginning of 2015 in relation to the confidential youth counselling service On Trak. These included a high rate of referrals, mostly from GPs, which had resulted in over-long waiting times for young people in need of counselling, requiring new efforts from partners to find solutions and work in new ways. The Local Authority's Children's Services, as well as Health, allocated one-off funding of £30,000 and £70,000 respectively to recruit the additional skilled counsellors needed to address these problems, and waiting times have fallen as a result. In addition, On Trak are driving innovations associated with the development of new forms of social media and other digital tools, including an authoritative website with links to Health and other services delivered by the Local Authority and due for launch in April 2016. In 2015 On Trak worked with 132 young people who engaged in weekly one to one counselling sessions. In the past 18 months referrals have steadily increased which has caused some delay in young people commencing treatment after assessment. On Trak received 79 new referrals during April – December 2015, with an average 27.9 days referral to assessment.

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3.8 Against this overall background, Restorative Youth Service (RYS) is facing a series of unprecedented challenges associated with:

- A wide-ranging review of youth justice services announced in October 2015 by the Rt. Hon Michael Gove to be conducted by Mr Charlie Taylor, Chief Executive of the National College for Teaching and Leadership. Mr Taylor has already made visits to several YOTs, establishments in the secure estate, police stations, and courts. The Association of YOT Managers has made strong representations, raising concerns about the current threats to services' budgets from within the MoJ, and the potential for the National Probation Service to alter its YOT funding model (see below) before the Taylor review has had time to do its work and report back in the late spring of 2016.
- A National Probation Service (NPS) review (E3) encompassing the funding arrangements and future roles of Probation staff seconded to youth offending teams (YOTs), and a reconfiguration of the level of management expected to represent NPS on YOT Boards. The Youth Justice Board (YJB) is participating in the review, and has been working closely with NPS on this future allocation model. Against this background the YOT has already seen one of its one of its qualified seconded Probation Officers replaced by an 'unqualified' Probation Services Officer and is likely to see a further reduction in staffing seconded from the NPS.
- Further significant cuts in funding following on from a reduction in the complement of social worker posts (from three to two); the deletion of a post within the YOT's support functions; and an efficiency review of the RYS managerial structure which will result in the deletion of the post of the manager of the confidential youth counselling service On Trak on the 1 April 2016. Following extensive consultation under agreed local authority procedures, the post holder has elected to take redundancy rather than seek re-deployment, resulting in a saving of £45,000 per annum. However there are other financial cost pressures, including a further reduction in funding from the YJB, who had already announced an unexpected in year reduction in grant of 10.6% (equivalent to £26,966) which had to be met by holding a vacancy at Operational Manager level for eight months with effect from August 2015. Setting a balanced budget for 2016/17 remains challenging, whilst still awaiting details of the amount of further funding cuts from the Youth Justice Board, in addition to the potential withdrawal of funding from the National Probation Service.

3.9 In spite of these financial pressures RYS continues to have the full confidence of the YOT Management Board. Their scrutiny of performance has recently been the subject of a detailed review carried out after the HMIP inspection, leading to changes in the methodology used by partner agencies to receive and analyse performance data. The Youth Offending Team also has a close working

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relationship with other YOTs in the South West and is encouraged by the Youth Justice Board's local partnership adviser to compare outcomes in order to promote best practice and ensure that resources are deployed where they can be most effective. The Plans for 2015/16 take account of these challenges, and set out local objectives and targets, ensuring that young people in Swindon receive the best start in life and are afforded access to appropriate and timely resources and opportunities.

- 3.10 All three RYS services are also set in the wider context, acknowledging the influence of changes associated with 'Stronger Together', of which the move to Clarence House to co-locate with other teams from Children's Services was a key component.

#### 4. Alternative Options

None

#### 5. Implications, Diversity Impact Assessment and Risk Management

##### Financial and Procurement Implications

- 5.1 The YOT is financed through a combination of funding from the Youth Justice Board, Local Authority (Children's Services), Wiltshire Police Crime Commissioner, and partner organisations. The total Youth Justice grant for 2015/16 amounts to £242,500 including funding set aside specifically for engaging more victims of crime in restorative justice processes, and helping to meet new devolved demands associated with Unpaid Work and Attendance Centre orders from Court. Partnership cash funding amounts to £373,661, of which £257,500 comes from Children's Services. The following agencies also provide cash contributions: £76,994 from the Police and Crime Commissioner; £19,067 from the National Probation Service; and £20,100 from the Clinical Commissioning Group (CCG), in addition to staffing resources (based on secondments) such as the Police Officer, Health worker, Probation staff and Education worker.
- 5.2 The substance misuse service U-Turn is funded from three sources; Local Authority based Public Health (£75,000); Youth Justice grant funding transferred from YOT income to U Turn (£13,000); and Children's Services core funding (£26,800), in addition to £3,600 from Health, making a total budget of £118,400.
- 5.3 The youth counselling service On Trak is funded by the Local Authority (£134,000), and the CCG (£64,000) making a total budget of £198,000.

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### Legal and Human Rights Implications

- 5.4 The Plan conforms to all SBC protocols and policies concerning the Legal and Human Rights of Swindon residents.
- 5.5 The Plan also builds in interventions on behalf of young people designed to promote opportunities for constructive use of their leisure time and as a result, a reduction in anti – social behaviour or crime.

### All Other Implications (including Staff, Sustainability, Health, Rural, Crime and Disorder)

- 5.6 Restorative Youth Services are uniquely placed to straddle the criminal justice and care environments, resulting in strong links with the overarching strategic themes encompassed within key partner agencies including the Police and Crime Commissioner (Wiltshire and Swindon).

### Links to One Swindon, Strategic Objectives, Plans and Policies

- 5.7 The Plan takes account of developments incorporated into Local Authority plans (including Community Safety) around crime prevention and reducing re offending, as well as links to 'One Swindon' Priorities and specific targets around improving life for families in Swindon.

### Diversity Impact Assessment

- 5.8 The work of the YOT, substance misuse service U-Turn, and the youth counselling service On Trak, are embedded in the Restorative Youth Services Plan 2015-16 which includes the Diversity Impact Assessment.

### Risk Management

- 5.9 Plans include activities or protocols and procedures designed to address known or anticipated risks, including those associated with the potential for public sector funding reductions, as well as safeguarding of staff and young people.

## **6. Consultees**

- 6.1. The Board Director, Resources (Section 151 Officer) and Director of Law and Democratic Services (Monitoring Officer) are consulted in respect of all reports.

## **7. Background Papers**

- 7.1 None

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# **Restorative Youth Services Work Programme 2015/16**

**Children's Health, Social Care and Education Overview & Scrutiny Committee**

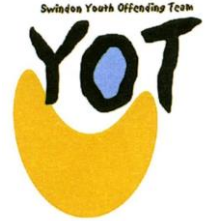
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## **8. Appendices**

- 8.1 Post Inspection Action Plan (Exception Report).
- 8.2 Post Inspection Action Plan (Completed Actions).

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# **SWINDON YOT POST INSPECTION ACTION PLAN 2015/16**

**Exception Report**

**21<sup>st</sup> January 2016**

## **SUMMARY**

### **Reducing reoffending**

*Overall work to reduce reoffending was satisfactory.* Case managers had a good understanding of the reasons why children and young people offended. They used their knowledge to provide sound information to court both to inform sentencing decisions and to put appropriate intervention plans in place. A holistic approach with the family and specialist workers was taken to work to reduce the likelihood of reoffending. This led to a range of positive, sustainable outcomes that, some young people advised, could be accredited to their time with the YOT.

### **Protecting the public**

*Overall work to protect the public and actual or potential victims was unsatisfactory.* The YOT often underestimated the level of harm a child or young person posed to others and the subsequent need to plan to manage this. Work relating to risk of harm was not always given sufficient priority, especially when there were other needs in a case to address. There was a lack of guidance and structures in place for managing high risk of harm cases and too little use was made of the expertise held by YOT police staff and the information they could access.

### **Protecting children and young people**

*Overall work to protect children and young people and reduce their vulnerability was unsatisfactory.* The YOT worked proactively to manage safeguarding issues as they arose. Case managers made determined efforts to link with partner agencies and contributed to interagency safeguarding processes in order to protect children and young people. However, case managers were not good at assessing the vulnerability needs in their cases. There were issues relating to the quality of planning, and delays in the delivery of some specialist interventions.

### **Ensuring the sentence is served**

*Overall work to ensure that the sentence was served was good.* The YOT's key asset was its staff. The YOT worked holistically with other agencies to build effective relationships with children and young people and their families. Case managers worked flexibly to take the specific needs of a case into account and remove potential barriers to engagement in order to encourage engagement. They also took appropriate and effective measures to encourage and enforce compliance where necessary.

### **Governance and partnerships**

*Overall, the effectiveness of governance and partnership arrangements was unsatisfactory.* The YOT Management Board had a clear appreciation of the role and importance of the YOT's work. However, the success of the YOT was underpinned by strong, informal relationships and ambitions rather than

governance, scrutiny and challenge by its Management Board. Its evident commitment to improving services lacked strategic direction and planning. Despite a range of internal assurance mechanisms, there was more to be done to ensure the effectiveness of work to protect the public and safeguarding.

### **Interventions**

*Overall, the delivery and management of interventions to reduce reoffending were satisfactory.* The YOT had access to a good range of interventions to reduce offending behaviour, protect the public and safeguard children and young people. They also paid due consideration to addressing the needs of victims. Case managers gave thought to what should be delivered, and how, in order to achieve the greatest level of engagement by children and young people, many of whom showed positive progress in key factors linked to their offending behaviour.

### **RECOMMENDATIONS**

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Post-inspection improvement work should focus particularly on achieving the following outcomes within 12 months following publication of this report:

1. The work of the YOT should be targeted, meet local need, and driven by a clear YOT strategy and effective delivery plan (Chair of YOT Management Board).
2. Governance arrangements, at all levels, should provide appropriate support, scrutiny and challenge to the YOT's work and outcomes (Chair of YOT Management Board).
3. Systematic, effective critical oversight of the YOT's work should be used to identify and help to address areas for improvement in practice relating to safeguarding, protecting the public, and children looked after by the local authority (Chair of YOT Management Board).
4. Effective YOT and partnership working arrangements should promote the safeguarding of children and young people and the protection of the public and victims: specifically, assessment, planning, and the delivery of interventions should be of good quality and underpinned by effective joint working structures, protocols and guidance (YOT manager).

### **Key areas of focus will be in the following areas:**

- Seeking a greater take up of victim involvement in Restorative Justice.
- Improving staff skills in reflecting, analysing and recording risk of harm and vulnerability issues more widely and in more depth.

- Seeking to strengthen links to local colleges and education providers to better understand the quality of educational provision – to inform placements.
- Reviewing agreements and protocols with partners in regards to health provision, especially into the secure estate.
- Training related to the role of Police personnel with regards to intelligence sharing and risk management.
- Improving governance relating to Looked After Children, improving links with ICT and Social Care teams such as Family Contact Point.
- Improving communication with young people, mainly around understanding their Court Order.
- Review the working of the Board to ensure there is leadership and challenge from all agencies.

## SWINDON YOT POST- INSPECTION ACTION PLAN 2015-16

(02/03-20/03/15)

Insp. Report Ref. No.	Inspection Key Findings and Explanations of Findings:	Actions by YOT Lead and others who can help	Deadlines	Progress	RAG
<b>THEME 1: REDUCING RE-OFFENDING</b>					
EF - 1	Some reports, however, contained too much description about the index offence which could have been condensed into a shorter analysis from the report writer's perspective.	i. Operational Manager and PSR writers to meet and discuss. Assess PSR gatekeeping form to ensure less narrative/ more analysis.	Dec '15	i. New Interim Senior Practitioner has been tasked with tackling this with PSR authors in supervision. Ongoing briefing notes to follow.	AMBER
		ii. In house training to be delivered outlining the difference between narrative and analysis.	Feb '16 (1/3 of PSR staff on sick leave)	ii. Not yet planned but will follow the above.	RED
EF - 3	They were not as good at planning how to change the level of the child or young person's motivation to change.	i. Staff to look at new modules available on YJILS. Post YJILStraining Jan '16	Feb '16	i. Not yet started as ASSETPlus training will incorporate this.	AMBER
		i. Interactive briefings to be delivered at Team meetings.		ii. N/A see above.	N/A

EF - 4	The majority of assessments and plans were reviewed sufficiently but the YOT should be aware that in some cases previous assessments were copied and labelled as reviews without sufficient update.	<ul style="list-style-type: none"> <li>i. When copying an assessment need to ensure that it is sufficiently updated - Even if there has been no change this fact must be recorded.</li> <li>ii. Managers to monitor this through QA process e.g. Dip Sample of live cases. Assess PRAISE to ensure this aspect is monitored.</li> </ul>	Dec '15	<ul style="list-style-type: none"> <li>i. Staff have been advised of this. PRAISE audits are ongoing to ensure this takes place. Senior Practitioner and Ops Manager to monitor this via Q&amp;A processes/ supervision.</li> <li>ii. Ongoing.</li> </ul>	<p>AMBER</p> <p>AMBER</p>
EF - 8	There were fewer indications that core offending behaviour work, focusing on attitudes to offending and motivation to change, was undertaken. There also appeared to be cases where we identified a need for work to address drugs misuse, but there was no evidence this had been delivered. We recognise that this may have been due to a lack of recording in the YOT relating to interventions.	<ul style="list-style-type: none"> <li>i. Case Managers need to specify on the Intervention Plan who has provided the awareness session - need to record evidence and be more descriptive when doing so.</li> </ul>	Dec '15	<ul style="list-style-type: none"> <li>i. Senior practitioner and Ops Manager have begun to monitor this via Q&amp;A processes/ supervision.</li> </ul>	AMBER
<b>THEME 2: PROTECTING THE PUBLIC</b>					
KF – 1	<b>The YOT was not exploring risk of harm thoroughly enough and often underestimated the level of harm a child or young person posed to others and the need to plan to manage this.</b>	<ul style="list-style-type: none"> <li>i. Staff need to take into account any historic information relevant to the analysis of the current offence.</li> <li>ii. Ops Manager to deliver training to Case Managers, followed by PRAISE audits.</li> </ul>	Dec '15	<ul style="list-style-type: none"> <li>i. Senior Practitioner is currently researching/ sourcing best practice materials for new Risk Panel – which will closely monitor and guide practitioners in risk assessment/ analysis/ management.</li> <li>ii. New 'Risk' aides following launch of SHARP panels have been created/ distributed to all staff.</li> </ul>	<p>AMBER</p> <p>AMBER</p>
EF – 1a	Not all case managers had sufficient understanding around risk of harm and frequently focused their analysis on the current offence. As a result, previous serious offending behaviour was often overlooked and the level of risk of harm to others underestimated.				

EF – 1b	Some case managers were not identifying relevant links between drugs use and offending behaviour.	i. Operational Manager to audit regularly.	Dec '15	i. Ongoing – U-Turn Manager is Dip sampling/ Q&A any young person with 2 or more score in SMU in Asset.	AMBER
KF – 2	<b>Assessment and plans were not reviewed or updated well enough.</b>	i. YJB and HMIP have different views on definitions. Irrespective, we need to embed a culture of 'risk of harm' assessment as per agreed guidelines/ definitions.	Dec '15	i. YOT have moved away from risk of serious harm, Senior practitioner is now embedding training and briefing materials which look at harm. (SHARP panel materials).	AMBER
EF – 1c	Reviews were not improving understanding around risk of harm; many were copied from previous assessments and were not updated sufficiently.	ii. Senior Practitioner to issue practice direction on what risk of harm is (based on shared consensus) and this should be reflected in PRAISE. iii. Staff need to obtain and record details from secure estate about any information relating to a young person's behaviour whilst in custody e.g. sanctions (To inform understanding around risk).		ii. Flow charts created/ work in progress. iii. Case Managers routinely contact weekly Secure Estate to ensure they have up to date and relevant information about their young people in custody.	AMBER AMBER
EF - 2	It stands to reason that good planning	Senior Practitioner/ Ops Manager	Feb '16	• Incorporated in PRAISE	AMBER



# Appendix 1

	will link to the quality of assessment. We identified planning in the community as an area for improvement with the planned response too often not meeting the needs of the case. Some plans would have benefited from greater focus on future potential harm, with better contingency planning and more thought to how information would be shared with other agencies.	to review plans as part of supervision and PRAISE.		review form.  • Plans also routinely QA'd via the SHARP process to ensure risks/ vulnerabilities are addressed/ managed in young person's intervention plan.	
EF – 3	Plans for work in the community were not reviewed well enough. Health workers were not involved in case reviews and, as they shared little information through formal systems, there was a risk that case managers could remain unaware of issues that would impact on their work or that should be addressed at review stage.	i. If Health Worker is made aware of any information which affects the level of risk it is their duty to share that info with the YOT. This information needs to formally sent (via e-mail) to the Case Manager who should then record it on ChildView.  ii. If the change in risk is significant the Asset needs to be updated and also record what is going to be done about it. Review in supervision and PRAISE.	Feb '16	i. YOT Health Nurse now routinely records health discussions/ liaison with case managers on YOT Case Management System. Will attend reviews in custody. Will attend other reviews as/ when required.  ii. • PRAISE review ongoing.  • Risk Panel developed and activity has commenced.	AMBER  AMBER
KF – 4  EF - 6	<b>Interventions to manage risk of harm were not consistently delivered.</b>  However, there was more that should have been done to address risk of harm in over one-third of the 21 cases where there was a need to undertake such work. In three cases, no interventions had been delivered.	ROH training for case managers. Group and YJILS ROH module.	Feb '16	Not yet started will be incorporated into ASSET and YJILS learning which covers Risk of Harm amongst other areas.	RED

# Appendix 1

EF – 7	There were also gaps in assessment and planning around victims. We found that case managers weren't often enough considering the impact of offending behaviours on actual or potential victims and planning how to manage or reduce this.	Case Managers to liaise with RJ Workers who will now be taking the lead in completing the RJ Assessment Form on each case file.	Aug '15	Restorative Justice workers are taking the lead and reparation options are new, more closely linked to the victim.	AMBER
KF - 5  EF - 10	<b>There was no effective written guidance or structures in place to help YOT workers manage cases where it was considered a child or young person posed a high risk of harm to others.</b> However, we identified two cases that may have benefited from a referral into MAPPA but no action had yet been taken to start this process. While the police YOT officers were clear about the process and potential positive outcomes linked to MAPPA, we were not assured that this appreciation was shared across the YOT, at an organisational or individual case manager level.	MAPPA definitions to be included in new Risk Guidance being developed by Senior Practitioner.	Dec '15	<ul style="list-style-type: none"> <li>Flow chart completed.</li> <li>Lunch and Learn earlier in the year.</li> <li>Guidance is work in progress.</li> <li>We have established routine reporting of all eligible MAPPA cases to Wiltshire MAPPA Co-ordinator on quarterly basis.</li> </ul>	AMBER
EF - 12	Work to manage risk of harm to others was underpinned by a Managing Risk Procedure. This was a short document setting out some basic procedures linked to the management of risk of harm to others and Child Protection cases. While supported by a number of joint working protocols, this lacked clarity, especially around MAPPA, and did not contain enough detailed guidance for the management of risk of harm within the YOT or in partnership with others.	New guidance being developed by Senior Practitioner as above.	Dec '15	Work in progress – SHARP panel and materials have been disseminated / commenced. Routine QA of all cases via SHARP will focus on these specific areas	AMBER

EF - 13	There was no formal risk management forum to which to present cases.	Although this already covered in SOS and PRAISE will now also be covered by new Dashboard which identifies new cases (to be reviewed monthly).	June '15	<ul style="list-style-type: none"> <li>Risk Panel developed – led by Senior Practitioner.</li> <li>Outcomes to be reported to YOT Board via data report.</li> </ul>	AMBER
<b>THEME 3: PROTECTING THE CHILD OR YOUNG PERSON</b>					
KF – 2	<b>Decisions about the level of vulnerability of a child or young person were often inaccurate.</b>	i. Perception of 'vulnerability' is limited. It is anything that can impact negatively in a young person's development and wellbeing. Other areas to be taken into consideration: <ul style="list-style-type: none"> <li>Substance Misuse</li> <li>CLA</li> <li>Peer Pressure</li> <li>CSE</li> <li>Accommodation</li> <li>Neglect</li> <li>Health &amp; Mental problems</li> <li>Special Educational Needs</li> <li>BME</li> <li>Travelling Community</li> <li>Girls</li> <li>Gangs</li> </ul> ii. Staff to undertake training on 'vulnerability'. Look at AssetPlus training on YJLS and Resettlement Guidance as well as take training from other relevant Thematics.	Feb '16	i. • Senior Practitioner is working on building on a safeguarding poster which was re-launched/ revamped following Inspection.	AMBER
EF – 1	Threads of information relating to vulnerability, especially that linked to offending behaviour, were found to be spread throughout case files. Case managers were good at identifying the need for specialist assessments relating to, for example, emotional or mental health and substance misuse. However, they were not consistently pulling all the information they had together to analyse the nature of vulnerability in a case. Sometimes the screening was not being completed well enough, or information held by other agencies was not used to help inform the assessment. This lack of analysis made it difficult to make an accurate decision around the level of vulnerability in a case; we considered the level recorded to be inaccurate in 11 cases, which is unsatisfactory.			<ul style="list-style-type: none"> <li>Girls/ young women's group to be launched.</li> </ul> ii. Will form part of YJLS mandatory ASSETPlus training for Mar '16.	AMBER

## Appendix 1

<b>KF – 1</b>  EF – 2	<b>Too often, assessment focused on child protection issues, suicide and self-harm, especially in pre-sentence reports.</b>  Often, in a pre-sentence report (PSR), the focus of vulnerability was confined to child protection and the risk of suicide or self harm.	i. Report writer training in addition to the above. PSR gatekeeping form will be amended/ updated to reflect this.  ii. Staff to look at other vulnerabilities that young people experience.	Feb '15	i. Senior Practitioner to incorporate this into briefing/ training Q&A.  ii. As above.	<b>AMBER</b>
<b>KF – 3</b>  EF – 3	<b>The quality of planning at the start of the sentence for work in the community to address safeguarding and vulnerability was poor.</b>  There was a need for more careful planning to address safeguarding in relation to a range of areas; emotional or mental health, employment training or education (ETE), substance misuse, and family and accommodation issues. We noted that the YOT's health workers were not asked to contribute to the planning process, even in cases where they would be asked to deliver interventions. YOT plans did not take sufficient account of the emotional impact on children and young people of being in care and, as recognised by YOT management, there was still more to be done in making sure that 'other people's plans are [reflected] in our plans'.	Ops Manager/ Senior Practitioner: Assessment training for all Case Managers. Group and online modules in YJLS.	March '16	<ul style="list-style-type: none"> <li>ASSET and YJLS training will incorporate this – planned for all staff in Feb/ Mar 2016.</li> <li>Children's Services Plans (CHIN, CP etc.) to be incorporated into YOT intervention plan following review of YOT / Children's Services protocol.</li> </ul>	<b>RED</b>  <b>AMBER</b>

<b>KF - 5</b>  EF - 6	<b>There was a delay in the delivery of some specialist interventions.</b>  However, in a high number of cases, relevant specialist interventions had yet to be delivered by the time of our inspection. This was especially noticeable for ETE, family and accommodation issues and emotional or mental health. There was also a small number where there had yet to be a referral to UTurn, the provider of substance misuse services.	Ops Managers to review systems and practice – monitor through PRAISE.	Dec '15	<ul style="list-style-type: none"> <li>Started and ongoing – monitored via PRAISE.</li> <li>Ops Manager Q&amp;A cases and PRAISE.</li> <li>EWO now embedded in YOT for 1 day per week.</li> <li>New YEW recourse has been sourced for 1 day a week to complement this.</li> </ul>	<b>AMBER</b>
<b>THEME 4: ENSURING THAT THE SENTENCE IS SERVED</b>					
EF - 3	Some of the children and young people providing us with feedback advised that they would have benefited from more support and information from the YOT at the beginning of their orders rather than having to rely on their parents/carers to understand what was happening after sentence.	<ul style="list-style-type: none"> <li>i. Report writers need to ensure that YP/ Family understand wording – explain content in detail.</li> <li>ii. Need to review post court methods of communication – ensure service users are given overview of YOT e.g. RYS website.</li> <li>iii. Review service user feedback exercise.</li> </ul>	Dec '15  Mar '16	<ul style="list-style-type: none"> <li>i. All panel report shared prior to first meeting. Posted if not able to so face to face. PSR's shared.</li> <li>ii. <ul style="list-style-type: none"> <li>Website being developed by Business Manager.</li> <li>Chat services/ Digital tools being piloted – October - March 2015.</li> </ul> </li> <li>iii. Recommended View Point for HMIP/ YOT.</li> </ul>	<b>AMBER</b>  <b>RED</b>  <b>AMBER</b>  <b>AMBER</b>
<b>THEME 5: GOVERNANCE AND PARTNERSHIPS</b>					
<b>KF - 8</b>	The YOT's genuine commitment to management oversight and quality assurance was not improving the management of risk of harm to others or safeguarding work.	Service Manager to review case management practice and make necessary improvements – specifically in response to management oversight and audit.	Dec '15	<ul style="list-style-type: none"> <li>i. Started and ongoing – Senior Practitioner is driving this area forward – to be continued by Ops Manager (YOT) when appointed.</li> <li>ii. Changes to auditing tools</li> </ul>	<b>AMBER</b>  <b>AMBER</b>

				under review.	
KF - 2  EF – 1.2	<p><b>The YOT Management Board did not drive the direction of the YOT or provide enough challenge.</b></p> <p>Agencies represented on the board did not always actively contribute to meetings and there was little evidence of robust challenge and guidance to the YOT from the Board.</p> <p>Governance arrangements were not sufficiently robust, with performance management information in a number of areas under-developed. Data reports were provided to the YOT Management Board but, in the main, the YOT decided the priority areas for scrutiny.</p>	<p>Agreed action by Board members:</p> <p>i) Board members to undertake front line visits – to scrutinise their specific areas of expertise or concern (as a Critical friend) as well as relevant thematic and report back to Service manager and Board.</p> <p>ii) YOT 'visibility' by Board (e.g. Team Days).</p> <p>(iii) It was agreed that current induction processes would be reviewed, seeking improvements relevant to this action plan.</p>	Wef Jan '16	i. Clerk to governing body to diary commitments from Board members wef. January 2016.	AMBER
			Wef Oct '15	ii. Board to be advised of Team Days 2015/16 and to other events.	AMBER
			Jan '16	iii. Processes under review by Service Manager/ Business Manager.	AMBER
EF – 1.3	<p>YOT Management Board members had an understanding of the local and national outcome priorities for, and the work undertaken by, the YOT. However, there was no expectation by the Board that the YOT dig more deeply into these and learn from relevant incidents.</p>	<p>(i) Revised induction processes for all Board members to include explanation of local and national priorities / Role of Board members.</p> <p>(ii) Board agreed to focus on <b>local plans</b>. Exception reporting from the Service Manager to account for exceptions / variance at Board meeting.</p> <p>(iii) Performance data to fit with broader picture and to include PCC plan/ strategic needs plans</p>	Jan '16	i. Processes under review by Service Manager/ Business Manager.	AMBER
			Oct '15 and ongoing	ii. Suggest a different format for reporting performance/ use of data subject to Board approval in 2016.	AMBER
			Oct '15	iii. Processes under review by Service Manager/ Business Manager.	AMBER

# Appendix 1

		<p>etc.</p> <p>(iv) Board to take a more proactive role in the drafting of the YOT Plan and revisit progress seeking promotion of areas of good practice and innovation at Board meetings.</p> <p>(v) Service Manager / YOT to use 'live tracker'. This will enable the Board to begin to identify trends as well as scrutinise and challenge <b>current cases</b>.</p> <p>(vi) Take opportunities to raise awareness of the core YOT work in areas including: -</p> <ul style="list-style-type: none"> <li>• ETE</li> <li>• YPs who are CLA</li> </ul>	<p>Jan '16 to April '16</p> <p>Post Oct '15</p> <p>Post Oct '15</p>	<p>iv. Drafting of Plan 2016/17 underway, with Board meeting in February planned to progress.</p> <p>v. Planned for scrutiny at Jan '16 meeting.</p> <p>vi. New reports due for scrutiny from Jan '16.</p>	<p>AMBER</p> <p>AMBER</p> <p>AMBER</p>
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Page 56	KF - 3	<b>The YOT committed to improving services but there was no structured approach to this.</b>	Board members to develop annual plan of themes, take responsibility for their key performance area and seek detailed analysis of data including trends.	Oct '15 and beyond	Progress to be monitored by Board and evidenced via minutes.	AMBER
	EF – 1.6	The YOT, with other providers, introduced a number of good and sometimes innovative initiatives that were of benefit to children and young people who offend but these were not driven by the Board, were not part of a strategic plan and were not underpinned by an assessment of need. The YOT's annual plan met YJB minimum criteria but was high level and contained no specific objectives. It did not include work to address additional, locally identified, specific needs of Swindon's children and young people who offend.				
	EF – 1.8	The YOT Management Board did not provide effective oversight of the work of the YOT in relation to critical areas of their work, for instance looked after children, safeguarding and public protection activity.	(i) The Service Manager to review examples of other performance reports to incorporate good practice from elsewhere.  (ii) Case studies and the possibility of case holders attending the Board to be considered.	Oct '15	i. Progress with Board wef Jan '16.  ii. Progress with Board wef Jan '16.	AMBER  AMBER
	EF – 1.9	A range of data relating to ETE was available to the YOT but, again, not scrutinised regularly by the Board. Data systems used by partners for collecting information were not always aligned, making it difficult to assess the true picture around ETE and identify outcomes for the YOT's children and young people after referral to education providers.	Board members will align themselves to particular cohorts of YP's (e.g. Girls, LAC, custody cases) and track their journey through the YOT and CJS; as well as follow and report back to the Board.	Oct '15 onwards	To be confirmed following outcome of Board (Lead) meetings with YOT staff.	RED



EF – 2.4	The YOT would have benefited from more formal links with partners in order to enhance service delivery in a small number of areas. For instance, case managers had found it difficult to help children and young people access courses at the college. This issue could have been ameliorated through better working agreements relating to the admissions policy.	The YOT will establish more formal links with FE and other providers/ partners.	Wef Jan '16	Work in progress.	AMBER
KF - 6  EF – 2.5	<b>There were gaps in joint working practice with children's social care.</b>  There was also potential for tighter joint working with Swindon's children's social care services. The interface with Family Contact Point was still a work in progress. However, there were still examples of children's social care being slow to respond to concerns raised by the YOT. There was a reluctance to use the escalation process, leaving children and young people at possible risk.	The new Service Manager will establish links with FCP / CS's to look at possibility of incorporating 'edge of offending' concept and service response and provision	Planned for Sept '15  Mar '16	<ul style="list-style-type: none"> <li>Initial links established with Service Manager and revision of SLAs in respect of PACE, remand and YOT/ Children's Services joint working protocol.</li> <li>Further planned work to look at 'edge of offending' possibility.</li> </ul>	AMBER
EF – 2.9	Year six pupils were recruited and trained to deliver crime prevention messages to their peers in other schools. We would urge the YOT to take a more targeted approach, to maximise the positive outcomes of the scheme.	Business Manager to explore a wider approach to providing prevention messages in schools.	Dec '15	Meetings being held with relevant contacts, following advice & guidance from Peter Nathan.	AMBER
EF – 3.3a	Protocols and memorandums of understanding were in place for all health care providers except the speech and language therapist. These	Service Manager to draft and implement a Protocol re Speech and Language Therapy.	Dec '15	Meeting set up with providers/ Service Manager/ Business Manager to discuss and agree protocol.	RED

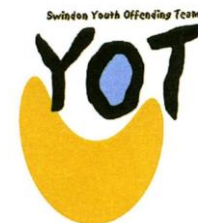
## Appendix 1

	were all in need of updating and needed to be clearer about aspects such as lines of accountability, targets and expectations.				
EF – 3.3b	The link between YOT operational management and direct line management of some health practitioners (e.g. nurse and CAMHS) was limited and there was no evidence of joint supervision or appraisals, or sharing of the contents of these. It was difficult, therefore, to ascertain how operational management monitored the work and outcomes of the health professionals.	Service Manager to review practice re 3 way supervision of seconded and linked staff.	April '16	<ul style="list-style-type: none"> <li>Awaiting outcome of RYS tier 4 management restructure/ appointments then move to AMBER.</li> <li>Agree supervision/ appraisal arrangements with seconded staff/ agency line managers.</li> </ul>	RED
EF – 3.5	At least three YOT workers had had AIM assessment and intervention training. However, not all workers were up to date. We noted that one case manager had not had any health related awareness training since joining the YOT and several case managers advised that they would like to improve their knowledge relating to speech, language and communication.	Service Manager to review staff training re AIM and speech and language communications and resource as appropriate.	Dec '15	SALT launched and promoted resource at Dec.'15 RYS Team Day. To follow up with 1 to 1 meetings with case managers.	AMBER
EF – 3.6	While the YOT kept a log of training, this was not up to date. As a consequence, it was difficult to monitor the skills mix of the team effectively and ensure key courses were being undertaken.	Service Manager to update training log.	Dec '15	Currently work in progress.	AMBER
EF - 4.5	The YOT had plans to continue to assess the quality of work for looked after children but had yet to implement these, potentially leaving some of its most vulnerable children and young people at higher risk of offending.	Service Manager to implement new practices and reporting processes re LAC (CLA).	Oct '15  Feb '16	<ul style="list-style-type: none"> <li>Bail/ Remand processes updated and agreed Oct '15.</li> <li>YOT/ Children's Services joint working protocol update/ refresh draft completed.</li> </ul>	AMBER  AMBER

EF – 4.7	To complement this, regular line management checks were performed on the work of case managers, to see if case management processes were being completed and to sufficient quality. It was disappointing to see that case managers were not necessarily addressing areas identified as needing improvement.	Service Manager to require Operational Managers to review practice of case holders following supervision and audits re compliance.	Feb '16	Work in progress.	RED
KF - 8	<b>The YOT's genuine commitment to management oversight and quality assurance was not improving the management of risk of harm to others or safeguarding work.</b>	Service Manager to seek best practice, implement changes, and monitor progress.	Feb '16	Work in progress.	RED
EF – 4.8	The YOT's commitment at a senior level to management oversight and quality assurance is to be commended. However, despite the range of systems in place and the time dedicated to this work, there was no evidence that it led to overall improvements in the management of risk of harm to others or safeguarding work.				
<b>THEME 6: INTERVENTIONS</b>					
EF - 9	We noted a small number of areas of delivery that could be developed further: making more use of the Youth Justice Centre programme and the enhancement of courses through greater use of group work (although we acknowledge the difficulties inherent with so doing in a small YOT). There was also an apparent need to deliver more work relating to substance misuse, and work to change children and young peoples' attitudes to offending, or their motivation to change	Attendance Centre was transferred from Home Office to the YOT who together with the YJC Manager will be working to develop it further.	Wef Oct '15	i. YOT together with YJC Manager working to develop Attendance Centre further.  ii. Group work programmes under review, including On Trak (Beginning Oct '15) and for Girl's Group (Wef Jan '16).  iii. Substance Misuse work under review.	AMBER  AMBER  AMBER

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	their behaviour. In some cases it was unclear what was being delivered and the YOT could benefit from more detailed recording of work being undertaken.	Recording on ChildView – part of previous action.		iv. Work around attitudes to offending to be based on best practice – under review.	AMBER
EF - 11	However, the focus of case managers appeared to be on the child or young person who had offended rather than the victim and we found some disconnect between the work taking place with victims and the level of knowledge of case managers about this.	RJ workers to work more closely with Case Managers - from outset RJ workers will now also be doing an assessment on the young person.	Dec '15	Progress to be reported in April '16.	AMBER



# **SWINDON YOT POST INSPECTION ACTION PLAN 2015/16**

**Completed Actions**

**21<sup>st</sup> January 2016**

## **SUMMARY**

### **Reducing reoffending**

*Overall work to reduce reoffending was satisfactory.* Case managers had a good understanding of the reasons why children and young people offended. They used their knowledge to provide sound information to court both to inform sentencing decisions and to put appropriate intervention plans in place. A holistic approach with the family and specialist workers was taken to work to reduce the likelihood of reoffending. This led to a range of positive, sustainable outcomes that, some young people advised, could be accredited to their time with the YOT.

### **Protecting the public**

*Overall work to protect the public and actual or potential victims was unsatisfactory.* The YOT often underestimated the level of harm a child or young person posed to others and the subsequent need to plan to manage this. Work relating to risk of harm was not always given sufficient priority, especially when there were other needs in a case to address. There was a lack of guidance and structures in place for managing high risk of harm cases and too little use was made of the expertise held by YOT police staff and the information they could access.

### **Protecting children and young people**

*Overall work to protect children and young people and reduce their vulnerability was unsatisfactory.* The YOT worked proactively to manage safeguarding issues as they arose. Case managers made determined efforts to link with partner agencies and contributed to interagency safeguarding processes in order to protect children and young people. However, case managers were not good at assessing the vulnerability needs in their cases. There were issues relating to the quality of planning, and delays in the delivery of some specialist interventions.

### **Ensuring the sentence is served**

*Overall work to ensure that the sentence was served was good.* The YOT's key asset was its staff. The YOT worked holistically with other agencies to build effective relationships with children and young people and their families. Case managers worked flexibly to take the specific needs of a case into account and remove potential barriers to engagement in order to encourage engagement. They also took appropriate and effective measures to encourage and enforce compliance where necessary.

### **Governance and partnerships**

*Overall, the effectiveness of governance and partnership arrangements was unsatisfactory.* The YOT Management Board had a clear appreciation of the role and importance of the YOT's work. However, the success of the YOT was underpinned by strong, informal relationships and ambitions rather than

governance, scrutiny and challenge by its Management Board. Its evident commitment to improving services lacked strategic direction and planning. Despite a range of internal assurance mechanisms, there was more to be done to ensure the effectiveness of work to protect the public and safeguarding.

### **Interventions**

*Overall, the delivery and management of interventions to reduce reoffending were satisfactory.* The YOT had access to a good range of interventions to reduce offending behaviour, protect the public and safeguard children and young people. They also paid due consideration to addressing the needs of victims. Case managers gave thought to what should be delivered, and how, in order to achieve the greatest level of engagement by children and young people, many of whom showed positive progress in key factors linked to their offending behaviour.

### **RECOMMENDATIONS**

Post-inspection improvement work should focus particularly on achieving the following outcomes within 12 months following publication of this report:

1. The work of the YOT should be targeted, meet local need, and driven by a clear YOT strategy and effective delivery plan (Chair of YOT Management Board).
2. Governance arrangements, at all levels, should provide appropriate support, scrutiny and challenge to the YOT's work and outcomes (Chair of YOT Management Board).
3. Systematic, effective critical oversight of the YOT's work should be used to identify and help to address areas for improvement in practice relating to safeguarding, protecting the public, and children looked after by the local authority (Chair of YOT Management Board).
4. Effective YOT and partnership working arrangements should promote the safeguarding of children and young people and the protection of the public and victims: specifically, assessment, planning, and the delivery of interventions should be of good quality and underpinned by effective joint working structures, protocols and guidance (YOT manager).

### **Key areas of focus will be in the following areas:**

- Seeking a greater take up of victim involvement in Restorative Justice.
- Improving staff skills in reflecting, analysing and recording risk of harm and vulnerability issues more widely and in more depth.
- Seeking to strengthen links to local colleges and education providers to better understand the quality of educational provision – to inform placements.

- Reviewing agreements and protocols with partners in regards to health provision, especially into the secure estate.
- Training related to the role of Police personnel with regards to intelligence sharing and risk management.
- Improving governance relating to Looked After Children, improving links with ICT and Social Care teams such as Family Contact Point.
- Improving communication with young people, mainly around understanding their Court Order.
- Review the working of the Board to ensure there is leadership and challenge from all agencies.

SWINDON YOT POST- INSPECTION ACTION PLAN 2015-16					
(02/03-20/03/15)					
Insp. Report Ref. No.	Inspection Key Findings and Explanations of Findings:	Actions by YOT Lead and others who can help	Deadlines	Progress	RAG
<b>THEME 1: REDUCING RE-OFFENDING</b>					
EF – 3	They were not as good at planning how to change the level of the child or young person's motivation to change.	i. Motivational Interviewing training pack to be made available to staff. ii. Senior Practitioner to share essay (personal learning) on the Desistance Theory.	Dec '15	i. Disseminated to all YOT staff October 2015. ii. Done / Good practice guidance sourced from another YOT and circulated to staff.	GREEN  GREEN
EF - 5	Initial referral order panels were sometimes convened late.	Case Managers and/ or RO Administrator (to be clarified) to contact young people reminding them of panel appointments.	Sep '15	Text and phone reminders taking place.	GREEN
EF - 8	There were fewer indications that core offending behaviour work, focusing on attitudes to offending and motivation to change, was undertaken. There also appeared to be cases where we identified a need for work to address drugs misuse, but there was no evidence this had been delivered. We recognise that this may have been due to a lack of recording in the YOT relating to interventions.	U-Turn need to take ownership/ responsibility for filling in/ recording in contacts on intervention page.	Dec '15	Training has been given to U-Turn staff in relation to this.	GREEN
EF - 10	We noted that although custody cases were delivered as a single integrated	i. Any work undertaken by the secure estate needs to be	Aug '15	i. Ongoing and happening – low custody rates mean we can	GREEN



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	<p>sentence, the quality of work to address reoffending during the custodial phase was not as good as work in the community. The YOT's health professionals were not involved with children and young people during this time and there was no evidence that they were asked to contribute to licence conditions.</p>	<p>recorded on ChildView by the Case Manager as well reasons when something cannot be delivered.</p> <p>ii. Health and other relevant professionals to be invited as required to review meetings.</p>		<p>focus on this aspect currently.</p> <p>ii. Arrangements now in place that EWO attends initial and final meeting. ISS to attend the final reviews and involvement on release.</p>	GREEN
<b>THEME 2: PROTECTING THE PUBLIC</b>					
KF – 1	<p><b>The YOT was not exploring risk of harm thoroughly enough and often underestimated the level of harm a child or young person posed to others and the need to plan to manage this.</b></p>	Review in PRAISE audits.	Dec '15	Additional prompt added to pro-forma.	GREEN
EF – 1b	<p>Some case managers were not identifying relevant links between drugs use and offending behaviour.</p>				
KF – 2	<p><b>Assessment and plans were not reviewed or updated well enough.</b></p>	<p>i. Staff need to adopt an holistic approach getting as much info from partners.</p> <p>ii. Ensure that attendance to Substance Misuse Service appointments where it has been identified as part of the intervention is enforceable.</p>	Dec '15	<p>i.</p> <ul style="list-style-type: none"> <li>• Police Staff now disseminate intel and missing info daily.</li> <li>• EWO/YEW are sighted on all new referrals/ cases.</li> <li>• Police Staff now routinely liaise with Family Contact Point colleagues to flag up young people known to Children's Services.</li> </ul> <p>ii. Embedded and agreed.</p>	<p>GREEN</p> <p>GREEN</p> <p>GREEN</p> <p>GREEN</p>
EF – 1c	<p>Reviews were not improving understanding around risk of harm; many were copied from previous assessments and were not updated sufficiently.</p>				

<b>KF – 3</b>  EF - 8	<b>Too little use made of police information systems and the expertise of the YOT Police staff.</b>  YOT police workers were not being used in a consistent way to help manage risk of harm to others. In some cases, there were serious gaps in information about a child or young person's offending behaviour that could have been addressed through greater use of police information systems and the expertise of YOT police colleagues.	Matter has been addressed.	June '15	<ul style="list-style-type: none"> <li>• Police staff providing daily intelligence briefings.</li> <li>• Runaways/ Mispers list disseminated regularly.</li> <li>• Overnight Police notification process has been firmed up.</li> <li>• Pre-cons can be made available by Police Staff within the hour on request.</li> </ul>	<b>GREEN</b>
EF - 13	There was no formal risk management forum to which to present cases.	Although this already covered in SOS and PRAISE will now also be covered by new Dashboard which identifies new cases (to be reviewed monthly).	June '15	Complete.	<b>GREEN</b>
<b>THEME 3: PROTECTING THE CHILD OR YOUNG PERSON</b>					
<b>KF – 2</b>  EF – 1	<b>Decisions about the level of vulnerability of a child or young person were often inaccurate.</b>  Threads of information relating to vulnerability, especially that linked to offending behaviour, were found to be spread throughout case files. Case managers were good at identifying the need for specialist assessments relating to, for example, emotional or mental health and substance misuse. However, they were not consistently pulling all the information they had together to analyse the nature of vulnerability in a case. Sometimes the screening was not being completed well enough, or information held by other	i. Perception of 'vulnerability' is limited. It is anything that can impact negatively in a young person's development and wellbeing. Other areas to be taken into consideration: <ul style="list-style-type: none"> <li>• Substance Misuse</li> <li>• CLA</li> <li>• Peer Pressure</li> <li>• CSE</li> <li>• Accommodation</li> <li>• Neglect</li> <li>• Health &amp; Mental problems</li> <li>• Special Educational Needs</li> <li>• BME</li> <li>• Travelling Community</li> <li>• Girls</li> </ul>	Feb '16	i. Key practitioners attended SEND conference in November 2015.  ii. YOT apprentice has produced posters.  iii. Senior Practitioner/ Ops Manager incorporating into supervision pro-forma 'Audits'.	<b>GREEN</b>  <b>GREEN</b>  <b>GREEN</b>

	agencies was not used to help inform the assessment. This lack of analysis made it difficult to make an accurate decision around the level of vulnerability in a case; we considered the level recorded to be inaccurate in 11 cases, which is unsatisfactory.	<ul style="list-style-type: none"> <li>• Gangs</li> </ul> <p>ii. Need to produce a large poster which lists most of the areas of vulnerability experienced by a young person.</p> <p>iii. Management oversight to take learning from PRAISE.</p>			
KF – 3	<b>The quality of planning at the start of the sentence for work in the community to address safeguarding and vulnerability was poor.</b>	Ops Manager/ Senior Practitioner: Assessment training for all Case Managers. Group and online modules in YJILS.	March '16	YOT Health Nurse to record discussions/ interventions in ChildView case management system.	GREEN
EF – 3	There was a need for more careful planning to address safeguarding in relation to a range of areas; emotional or mental health, employment training or education (ETE), substance misuse, and family and accommodation issues. We noted that the YOT's health workers were not asked to contribute to the planning process, even in cases where they would be asked to deliver interventions. YOT plans did not take sufficient account of the emotional impact on children and young people of being in care and, as recognised by YOT management, there was still more to be done in making sure that 'other people's plans are [reflected] in our plans'.				

<b>KF - 4</b>  EF - 4	<b>Assessments and plans were not reviewed well enough often enough.</b>  Assessments and plans were often copied at review stage with little update. There was too little thought given to the progress made and changing needs of children and young people in regards to, for instance, health outcomes.	Ops Managers: Training for all case managers. PRAISE will be amended/ updated to reflect this aspect.	Aug '15	<ul style="list-style-type: none"> <li>Staff have been advised to use "updated date" and to mark no change if there have been none.</li> <li>Q&amp;A by Ops Manager/ Senior Practitioner.</li> </ul>	<b>GREEN</b>
EF - 8	The YOT should beware that in a small number of cases the focus on protecting the child or young person detracted attention from public protection, so that important work to minimise risk of harm to others was postponed, sometimes indefinitely.	Ops Managers: Staff awareness.	Sep '15	<ul style="list-style-type: none"> <li>Safeguarding poster/ aide memoire updated and recirculated to all June 2015.</li> <li>Senior Practitioner / Ops Manager monitoring.</li> </ul>	<b>GREEN</b>
<b>THEME 4: ENSURING THAT THE SENTENCE IS SERVED</b>					
EF - 3	Some of the children and young people providing us with feedback advised that they would have benefited from more support and information from the YOT at the beginning of their orders rather than having to rely on their parents/carers to understand what was happening after sentence.	Need to review post court methods of communication – ensure service users are given overview of YOT e.g. RYS website.	Dec '15	Intranet to include crucial info e.g. Legal Highs.	<b>GREEN</b>
<b>THEME 5: GOVERNANCE AND PARTNERSHIPS</b>					

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EF – 1.5	The YOT Management Board was not a priority for some partners who did not consistently attend but relied on feedback at other meetings. As such, key negotiations often took place outside the YOT Board arena and it was not clear what value the Board added to the YOT.	Chair of YOT Board to ensure Board membership consists of most appropriate partners in terms of seniority and ability to challenge and scrutinise the YOT.	Aug '15	Review carried out and ongoing.	GREEN
KF - 5  EF – 2.3	<b>Effective partnership working was linked to the strength of relationships rather than sound partnership agreements, systems and guidance.</b>  However, effective joined up working was often linked to the strength of relationships between practitioners or management. There was a need for more formal, up to date, partnership arrangements and guidance in order to ensure consistency and help sustain implied practice.	Re: the Swindon YOT Partnership Agreement – In future this will incorporate a declaration of commitment to be signed by all Board Members; statutory partners and associate members.	Created July '15	Completed.	GREEN
EF – 2.7	The YOT did not participate in the 6-weekly child protection leads' meetings. This could be a missed opportunity to strengthen the YOT's engagement with, and contribution, to the safeguarding agenda.	The Service Manager will progress, with YOT Operational Managers to attend future meetings.	Wef Jun '15	YOT now participating.	GREEN

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EF – 2.8	There was no effective system in place for ensuring the YOT received a complete picture of children and young people coming to the notice of the police. However, information relating to other children and young people was entered into YOT's computer information system without analysis of trends. This could be a lost opportunity to help positively influence the level of First Time Entrants' to the youth justice system.	YOT Police Officers to provide daily intel reports and briefs; to be accompanied by dissemination of 'vulnerable and missing' data and other relevant information.	June '15	Ongoing and daily.	GREEN
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## Children's Services Performance Report

### Children's Health, Social Care and Education

#### Overview & Scrutiny Committee

Date: 3<sup>rd</sup> February 2016

Author: Head of Children, Families & Community Health & Interim Director of Children's Services

Wards: All Wards

Locality Affected: All Locality Areas

Parishes Affected: All Parish Areas

#### 1. Purpose and Reasons

- 1.1 This report provides the Children's Health, Social Care and Education Committee with an update of performance and key issues relating to (Commissioner's name).
- 1.2 A key purpose of Children's Health, Social Care and Education Overview & Scrutiny Committee is to hold Commissioners of Children's Health and Social Care Services to account.
- 1.3 Any Commissioner of Children's Health and Social Care Services in Swindon is required to provide information on the planning and provision of children's health and social care services within the Borough and consult with the Committee on any planned substantial changes or developments to service provision.

#### 2. Recommendations

The Committee is recommended to:

- 2.1 Note the report.
- 2.2 Identify any areas of concern that require further investigation.

#### 3. Detail

- 3.1 What are the challenges that your organisation is facing?

Top Seven Priorities	Process	Outcomes
<b>Safeguarding at the social care front door – contacts, referrals and assessments</b>	Family Contact Point records all contacts for children's services in the wider sense, so Early Help contacts as well as contacts that become referrals to Children's Social Care. There were 6673 <b>contacts</b> from April 2015 to September 15 compared to 5317 for the	The service is managing increasing risk in referrals and assessments being undertaken due to the sheer volume. The timeliness of the new statutory assessment has increased from 30 to 36 days on average between

Further information on the subject of this report can be obtained from Jo Ash, Direct Dial 01793 465849, [jash@swindon.gov.uk](mailto:jash@swindon.gov.uk).

# Children's Services Performance Report

## Children's Health, Social Care and Education

### Overview & Scrutiny Committee

Date: 3<sup>rd</sup> February 2016

	previous year. There were 1540 <b>referrals</b> between April and September 15 compared to 1374 for the same period in the previous year. From April 2015 to September 2015 a total of 1833 assessments were completed taking an average of 36 working days.	April – September 14 and April – September 15. The vast majority of referrals do result in a statutory assessment being completed which means that screening at the point of contact is good.
<b>Number of children in need (section 17 social care)</b>	The number of <b>children in need</b> cases at end September 15 was 1309. This is above the national average (1140), and is an increase from 1232 at the same point in 2014/15.	The overall number of children in need has reduced slightly as cases assessed are being stepped down to early help service provision in a more timely way in the latest performance reporting period. The number of cases open as children in need will be higher as the referral and assessment rate continues to increase.

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<p><b>Number of Early Help Record and Plans (EHR) completed</b></p>	<p>A total of 296 EHRs were completed during between April and September 15. This compares to 227 in the same period of the previous year.</p>	<p>The Common Assessment Framework (CAF) was replaced by the Early Help Record and Plan in November 2013. Ofsted recognised the strength of Early Help in Swindon and the access that families have to early help before entering statutory services. We need to increase the number of EHRs and Plans that are created and children supported to prevent the escalation of cases to children's social care. Partners need to consider if their staff are appropriately starting EHRs as the proportion of those undertaken in comparison to statutory social care assessments is disproportionate (although this is not particular to Swindon and is a national issue).</p>
<p><b>Number of children having Fixed Term (FTE) and Permanent Exclusions (PEX)</b> Daniel/Paul B</p>	<p>30 Swindon pupils were <b>Permanently excluded from schools</b> in 2014/15, compared to 13 in the previous academic year. Latest official figures, for 2013/14, show Swindon with fewer Permanent exclusions as a proportion of the school population compared to England. In <b>September 2015</b> there were 2 permanent exclusions, compared to none for the same period of the previous year. Both pupils</p>	<p>There is good collaboration between secondary schools and SBC to manage provision for pupils at risk of or in receipt of permanent exclusion. Children with characteristics of vulnerability are over represented among those that are excluded from school. It should be noted here that 11 out of 12 of Swindon secondary</p>

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	<p>attended secondary schools.</p> <p>There were 1,880 <b>Fixed Term school exclusions</b> in Swindon in 2014/15, compared 1,782 in the previous academic year. In terms of pupil numbers, 720 were FT excluded in 2014/15. Latest official figures, for 2013/14, show Swindon among the 25 local authorities in England with highest FT exclusion rates. In Swindon, during the month of <b>September 2015</b>, there were 172 fixed term school exclusions, similar to 179 FTEs in the same period of the previous year.</p>	<p>provision are Academies. Issues around exclusion and also around SEND (see below) are addressed through the Education Strategy Board, chaired by the Regional Schools Commissioner.</p>
<b>Rate of 18 year olds in Swindon that are Not In Education, Employment or Training (NEET)</b>	<p>The proportion of 16-18 year olds (academic ages) that is <b>NEET</b> in Swindon is 6.4% (476 young people), and in line with last year's figure of 6.3% (466 young people), and this compares to national average of 4.9%</p>	<p>When analysing figures by age, the NEET rate for 18 year olds in Swindon is 10.3% (258), above the national average of 7.3%%.</p>
<b>Number of children in care in commissioned (external) placements outside of Swindon</b>	<p>77 children in care (28.7%) were in externally commissioned placements at the end of September 15. This compares with 20% (45children) in September 14. An increase in asylum seeking children is one of the main reasons for the increase as the majority of these children are being placed in with Independent fostering agencies. There was a particular increase during June and July 15. 13% of children were placed more than 20</p>	<p>84.3% of looked after children were in family placements at the end of September 2015, and remains above the national average of 80%.</p>

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	miles away from their home address, down from 17.4% in April 15.	
<b>Special Educational Needs and Disability (SEND) Provision</b>	Swindon has proportionately more children and young people with a Statement of Special Educational Need than regionally or nationally. In 2015 Swindon's % of children with a statement or EHCP increased by 0.2ppts to 4.2%, England and South West remained static at 2.8%.	As more children are identified with SEND and require specific provision to meet their needs, a number of schemes have been identified in the Education Capital Programme, but there is a significant risk that we will create future pressure and expectation as children move from Children to Adult Services. Therefore Commissioners commissioned research to explore in detail the education options and outcomes for our children with SEND and look at the pros and cons of young people being supported in a mainstream or specialist provision. A report was presented to Cabinet on 15 <sup>th</sup> July, setting out the research, and proposing actions for a sustainable level of high quality provision for children and young people with SEND.

Further information on the subject of this report can be obtained from Jo Ash, Direct Dial 01793 465849, [jash@swindon.gov.uk](mailto:jash@swindon.gov.uk).

# Children's Services Performance Report

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#### 3.2 What have you done well?

Top Achievements	Steps taken	Next steps
<b>Child protection – timeliness of conferences</b>	Scheduling systems have been improved and the facilitation of conferences has been reviewed to ensure timely outcomes for families going through the process. The percentage of enquiries that went to initial child protection conference <b>within 15 working days</b> was 72.3% between April and September 2015	The percentage of child protection enquiries going to child protection conference within 15 working days (72.3%) is slightly below the national average of 74.7%, and is good in the context of an increase in the number of children on child protection plans.
<b>Children placed within Swindon area and in a family placement (Corporate Priority measure)</b>	87% of children were placed less than 20 miles away from their home address, up from 82.6% in April 15. This measure is a corporate priority with a target to increase to 93% by 2019. There will always be circumstances where it is in the child's best interest to place them away from the Swindon area.	84.3% of looked after children were in family placements at the end of September 2015, and remains above the national average of 80%.  Swindon is undertaking a campaign to recruit new foster carers so that it can further improve the number of children placed within Swindon locally with in house foster carers.
<b>First Time Entrants (FTE) to the Youth Justice System</b>	Based on the previous year's outturn the target is to have less than 44 <b>first time entrants</b> into the justice system per quarter. Against this figure there were 75 First Time Entrants (figure still provisional), by the end of Q2, which shows a continuing trend for the reduction in FTEs. These trends are in line with what is happening nationally, as overall there has been a significant reduction in youth	To sustain the decrease and ensure interventions with young people are effective in preventing re-offending.

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	offending.	
<b>Apprenticeships for 16-18 year olds</b>	September 2015 figures show that 4.9% of 16 – 18 year olds were in apprenticeships, 0.7%pts higher than September last year. Swindon's apprenticeship levels for this age group are higher than comparative areas: national average at 4.5% and regional average at 4.6%.	The latest performance data for November 15 indicates a continued increasing trend in the number of young people in apprenticeships.
<b>Child Protection Reviews held within timescales</b>	100% of children on child protection plans at the end of September received all of their reviews within timescales between April and September. This is an achievement in the context of an increased number of children on child protection plans.	The target will continue to be 100% in line with good practice

### 3.3 Supporting Information

#### 3.3.1 None

## 4. **Alternative Options**

### 4.1 None

## 5. **Implications, Diversity Impact Assessment and Risk Management**

### Financial and Procurement Implications

- 5.1 There are no direct financial or procurement implications arising as a result of this report. Any expenditure arising as a result of an item on the Committee's work programme will be met by the Overview & Scrutiny Support budget, subject to the approval of the Committee report.

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#### Legal and Human Rights Implications

- 5.2 Section 21 of the Local Government Act 2000 (as amended) requires every Local Authority to establish an overview and scrutiny function to hold the Executive to account, undertake policy development and review, monitor and improve performance report.

#### All Other Implications (including Staff, Sustainability, Health, Rural, Crime and Disorder)

- 5.3 There are no other direct implications arising as a result of this report. Any further implications will be identified when a topic is reviewed by the Overview and Scrutiny Committee and in any recommendations made by the Overview and Scrutiny Committee.

#### Diversity Impact Assessment

- 5.4 No Diversity Impact Assessment is required at this stage as this report proposes no changes to services. Any DIA that is required during review of topics included within the work programme will be identified at the appropriate stage

#### Risk Management

- 5.5 No risk management issues have been identified at this stage. Any risk management issues will be identified at the appropriate time when a topic is under review by the Scrutiny Committee and if it makes any recommendations

### **6. Consultees**

- 6.1 The Board Director, Resources (Section 151 Officer) and Director of Law and Democratic Services (Monitoring Officer) are consulted in respect of all reports.

### **7. Background Papers**

- 7.1 None.

### **8. Appendices**

- 8.1 Children's Services Performance Report 3<sup>rd</sup> February 2016

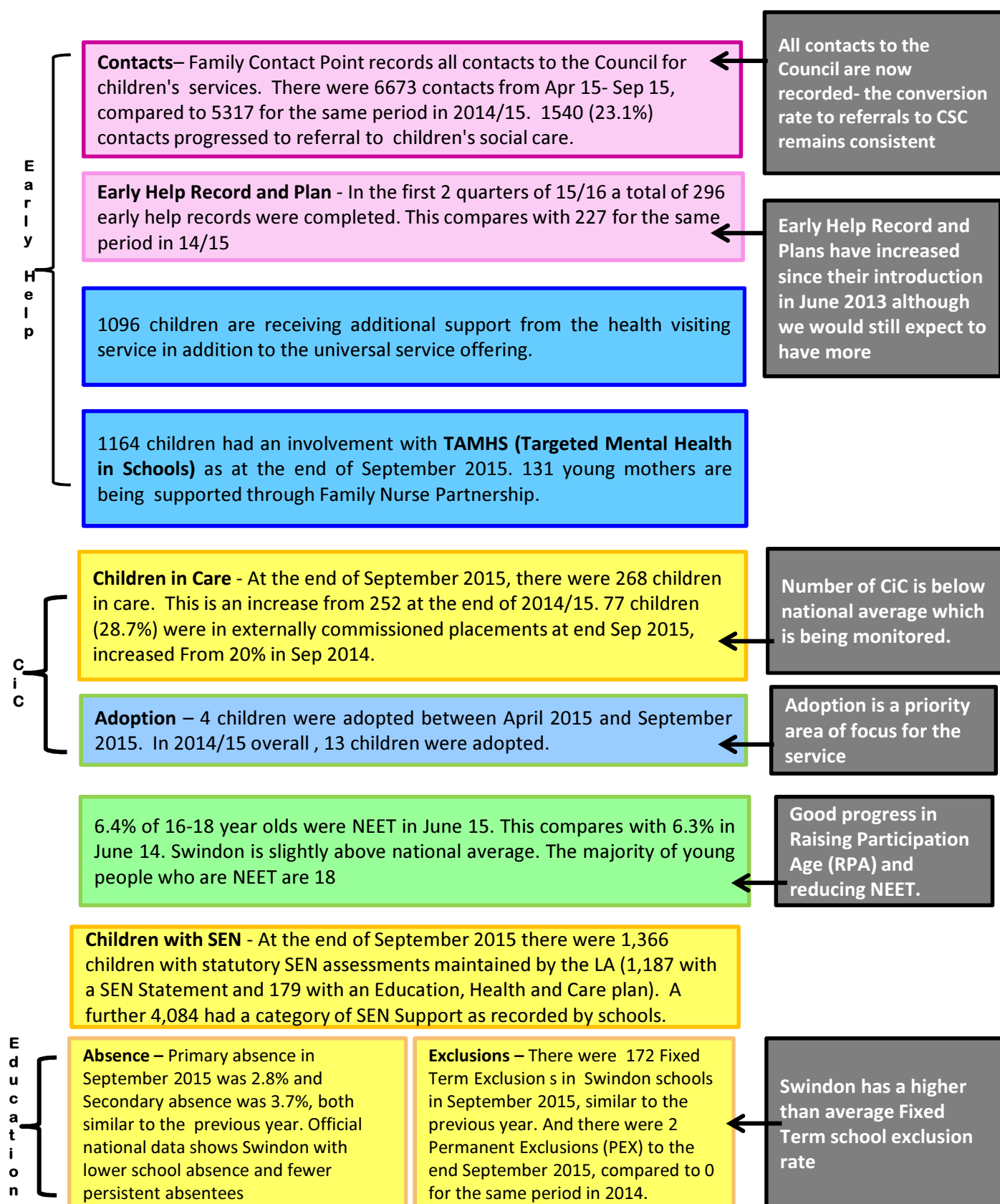


# Children's Services Performance Report

Children's Health, Social Care and  
Education Overview and Scrutiny  
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*Data position at the end of September 15*

## Headline Messages from Data position at end of September 2015





## Headline Messages from Social Care Safeguarding Data End of February 15 and end March 15 where data available

### REFERRALS

**Referrals** – There were 1540 referrals from Apr 2015 to Sep 2015 compared to 1374 for the same period in the previous year. Of the 2540 referrals, 20.8% were re-referrals . Most relate to domestic abuse notifications.

The demand on the 'front door' of social care remains very high. The national picture is variable.

### ASSESSMENTS

#### Statutory Assessments

From April 2015 to September 2015, a total of 1833 statutory (social care) assessments had been completed in an average of 36 days. The national average is 25 days. The number open at any one time in Assessment & Child Protection team remains too high.

Swindon transferred to a single statutory assessment at the beginning of March 2014.

There were 41 **child protection enquiries** (also known as **section 47 investigations**) finished in Sep 2015. The percentage of enquiries going to Child Protection Conference within 15 working days has increased from 69.5% between April 2014 and March 2015 to 72.3% between April 2015 and September 2015.

### CHILD PROTECTION

**Child Protection Plans** - 214 children were on a child protection plan at the end of September 2015. The number has stayed in line with 213 in March 2015. The number of children on a child protection plan is above the national and statistical neighbour average. 100% had their **reviews** completed on time as at the end of September compared to 93.4% in 2014/15. This is based on those children on a plan at the end of September 15.

Specific performance improvements were implemented to improve the timeliness of Initial Child Protection conferences as well as managing the increases occurring. Number of children on plans is above national and statistical neighbour average

The rate of children starting a **child protection plan** for a second or subsequent time has increased to 17.5% between April and September 15, up from 13.1% in September 14. Conference Chairs are monitoring this to explore any possible themes. Performance is also reviewed monthly by Senior managers.

Children on subsequent plans increased and is now slightly above the national average. There are fewer children remaining on a plan for 2 years compared with previous year.

At the end of September 2015, 0.8% (1 child) of children ceasing a protection plan had been on a **plan for 2 years or more** compared to 1.5% in 2014/15.

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## Early Help Services

### Performance Assessment

**Early Help Record (EHR)** A total of 296 EHRs were completed between April and September 2015. This compares to 227 for the same period in 2014/15.

The CAF was replaced by the Early Help Record and Plan in November 2013. Ofsted recognised the strength of Early Help in Swindon and the access that families have to early help before entering statutory services. Partner agencies may need to consider if their staff are appropriately starting EHRs as the proportion of those undertaken in comparison to statutory social care assessments is disproportionate (although this is not particular to Swindon and is a national issue).

**Early Help Plan (Plan) and Early Help Review (Review)** The Early Help Record will always lead to a plan being created for the child. The plan may be delivered in a number of ways depending on its complexity.

The number of early help plans has increased as the process becomes more firmly embedded. 254 early help plans were completed between April and September 2015 compared with 149 for the same period in the previous year.

It is important to review the early help plan to see if outcomes for children are being improved and identify any further help that is needed. 520 reviews were completed between April and September 15 which was on average 87 per month. This compares with 295 for April – September 14 (average 49 per month). There can be a delay in input of Early Help Records, Plans and Reviews due to schools sending in periodically.

### Strengths

- ✓ Council Early Help services are seen as a strength
- ✓ Increasing number of plans receiving a review giving confidence in the process being embedded into practice

### Challenges/Risks

- We need to increase the number of Early Help Record and Plans that are created and children supported to prevent escalation of cases to children's social care.

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## Safeguarding at the social care front door – contacts, referrals and assessments

### Performance Assessment

**Contacts** Family Contact Point records all contacts for children's services in their wider sense (ie includes Early Help) as well as contacts that become referrals to Children's Social Care. There were 6673 contacts to Family Contact Point between April and September 2015, compared to 5317 for the same period in 14/15. There were 1402 contacts in September 2015, compared to 1036 in August.

**Referrals and Re-Referrals** 1540 referrals were received in Children's Social Care between April and September 15, compared to 1374 for the same period in the previous year. In September alone there were 305 referrals compared to 167 in August. Swindon's referral rate in the first 6 month period is now higher than national and statistical neighbour averages based on the cumulative rate of referrals between April and September 15. (Swindon 316.9 per 10,000 under 18 compared with 263.5 statistical neighbour and 274.2 national average). The high referral rate in June (304), July (333), and September account for this. It is possible that by the end of year Swindon will be back in line with national and statistical neighbour average if no further fluctuations occur.

Of the 1540 referrals from April to September 15, 20.8% (320) are **re-referrals**. This is a 1%ppt increase from 19.8% for the same period in the previous year. There has been lower trend during 15/16 to date and the September position places Swindon below the national average of 24% (14/15).

**Statutory Assessments** From April 15 to September 15, a total of 1833 assessments were completed taking an average of 36 working days. The average length of time taken nationally last year was 28 working days.

**Number of children in need (section 17 social care)** The number of children in need (this does not include children subject to a child protection plan or children in care) was 1309 at the end of September 2015, down from 1379 at the end of April 2015. This is above the national (1140) and statistical neighbour (943) average. Some of these cases will be those open to assessment in Child protection, but whose needs could be met by tier 2 universal services.

### Strengths and Challenges

**Strengths** The service is managing a significant risk in referrals and assessment being undertaken due to the sheer volume.

The re-referral rate has reduced and is now below the national average suggesting outcomes for children following receipt of service is being sustained.

**Challenges.** The average duration of assessment has increased to 36 days and is now above the average.

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## Safeguarding Referral and Assessment to Social Care

### Performance Assessment

#### **Workforce information for Children's Social Care:**

Overall caseloads compare reasonably with the national picture. Caseloads in the Assessment and Child Protection Team (ACP) have reduced since Quarter one but this is the team where caseloads are higher than the service would wish. Caseloads in ACP team now average around 30 – 35 (same since last report), children, per social worker, averaging elsewhere across the service between 25 – 30 (Increase from 23-25 reported in March 15) per social worker. Throughout the year the Council has increased resource in response to increased demand and service pressure, in September 2014 agreeing to 7 extra establishment social workers.

The new configuration of teams, disbanding the Children in Care Team as well as the Court Team, has seen the creation of four community teams, with one Team Manager and two Assistant managers, 9 social workers and 2.2 social care workers, in each team, that were in place in early February 2015.

We continue with our recruitment drive for social workers and social work managers. Our overall vacancy percentage stands at 20%. We have successfully filled all team manager posts with permanent staff and have made significant progress in relation to Independent Reviewing Officer posts, but recruiting to Assistant Team Managers remains a challenge. Agency workers continue to be used to cover vacant posts within the service.

#### **Multi-Agency Risk Panel (MARF)**

Children's Social Care operate the MARF process. All the services highest risk cases may be reviewed there as well as any case that other partners are worried about high risk being referred for discussion. Most high risk CSE cases are reviewed at the Panel as well as cases where professional are concerned for other reasons – such as gang activity. To assure itself that the MARF is effective and having the desired outcomes, a review has been completed and was reported to the LSCB in June 2015.

### Strengths

- Good progress in recruiting social workers

### Challenges

- Continued challenges in recruiting social work managers

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## Child Protection Processes and Outcomes 1

### Performance Assessment

**Child Protection Enquires (also known as Section 47's) going to initial child protection conference within 15 working days** - 252 child protection enquires were completed from April 15 to September 2015. This compares to 284 in the same period in 2014/15. There were 41 enquires completed during September 2015.

144 out of the 252 child protection enquires completed went to **child protection conference**, compared to 172 out of 284 in the same period in 2014/15. The percentage of enquires that went to initial child protection conference within 15 working days was 72.3% between April and September 15. This is roughly in line with the national average of 74.7%. This performance is good given the context of an increase in the number of children on child protection plans.

**Children on Child Protection Plans** 214 children were on a child protection plan at end September 15. This is a relatively high number compared to the national average (208) and statistical neighbour average (203). During June and July in particular there was a fluctuation in the number of children starting plans with 32 and 35 respectively. The monthly average was 21 between April and September 15.

Between April and September 15, 100% of children on child protection plans had their **reviews** completed on time. This is an improvement from 93.4% in March 2015. The national average is 94% and the statistical neighbour average is 97.6%.

**The number of children having second or subsequent plans** was 17.5% between April 2015 and September 2015, an increase from 13.1% in September 14. This is above the national average (16.6%) and statistical neighbour (17.6%). This measure should be considered alongside a low duration, as a high % of second and subsequent plans and low duration could indicate that children's plans are being ceased prematurely, or that intervention outcomes are not sustainable. It is also important to note that a percentage of children will have subsequent plans due to family circumstances changing and for different reasons to their original plan.

**Duration of children on child protection plans** 0.8% (1) of children ceasing a child protection plan remained on a plan for two years or more between April and September 15, compared to 3.1% in the previous year. This is below the 2014/15 national average of 3.7% and below the statistical neighbour average of 3.6%.

### Strengths

- ✓ The timeliness of child protection conferences is positive
- ✓ 100% of reviews of child protection plans took place within timescales

### Challenges/Risks

- Partners need to work to reduce the number of children subject to Child Protection Plans
- Understanding of the reasons for a relatively high number of children receiving second/subsequent plans needs to be developed to inform any practice changes required

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## Permanency Children in Care and Adoption Performance Assessment

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**Number of children in care** 268 children were in care at the end of September 2015, this compares with 252 at the end of 2014/15. Swindon is below the national average (291 children in care when scaled to the Swindon population). 77 children in care (28.7%) were in externally commissioned placements at the end of September 2015. This compares with 25% (63 children) in 2014/15. A major reason for the increase has been in relation to a number of unaccompanied asylum seeking children coming into the Swindon area. 13.1% of children in care were placed more than 20 miles away from their home address as at the end of September, down from 16.7% at the end of March 2015 and is in line with the national average of 14%. This measure is a corporate priority with a target to reduce to 7% by 2019.

84.3% of looked after children were in family placements at the end of September 2015. This is a slight decrease from 84.9% in March 2015 and is in line with the national average of 85%.

**Placement Stability.** Short term placement stability is measured based on the those children having 3 or more placements during the reporting period as a percentage of the number of children in care at the end of September 2015. 2.2% of children in care had 3 or more placements. The percentage increases through the year as children move placement and is likely to be in the region of 11 to 15% for the full year. The national average for 14/15 was 10%. Swindon has more adolescent young people in care than the average and we know this age group tends to have a higher number of placement moves. Long term stability of placements for children in care for 2.5 years or more has improved to 67.7% from 66.1% at the end of March 15. Performance is in line with the national average (67%).

**Adoption** - 4 children were adopted between April 2015 and September 2015. In 2014/15 a total of 13 children were adopted. A further 6 children also became subject to special guardianships between April and September 15.

**Timeliness of Adoption** – The average number of days between coming into care and being placed for adoption is high, at 836 days compared to 636 nationally based on the September 15 position. Performance has improved since the end of 2014/15 when 850 days was recorded. We know this figure is also higher due to the complexity of the children that were found placements.

### Strengths

- The numbers of children needing placement outside of Swindon remains low. We have been able to adopt some children with particular/special needs this year to date despite making the timeliness figure for adoption higher.
- Placement stability for long and short term is showing improvement
- The number of special guardianships shows these are being used a good alternative to adoption where in the child's best interests.

### Challenges/Risks

- The rate of children adopted is receiving attention to ensure the levels are appropriate.

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## Children, Families and Community Health Quality Assurance Framework

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Children, Families & Community Health have recently reviewed its **Quality Assurance Framework** and introduced a new quarterly performance board to oversee the introduction of new social work quality standards. It has also developed some Key Quality Indicators (KPIs), to sit with its Performance indicators to start providing improved information on how good the services are rather than simply how many or how much of an activity it conducts.

**Section 20 Audit-** this was commissioned in response to an acknowledgment of a high number of children accommodated in Swindon under S.20 in comparison to other Local Authorities a year ago, and this was a re-check. The review focused on children who are subject to S.20 accommodation, whom were under the age of 14 and had been accommodated for over 4 months. There were 20 children identified. The figures for Swindon in late 2013 illustrated that there were 44% of children looked after under S.20 versus a statistical neighbour of 30% and a national figure of 27%. Swindon's statistical neighbour with a 'good' Ofsted judgment is 16%. At 21/07/15 there were a total of 130 children looked after on a section 20 out of 267 (48.7%) children and young people. This review concluded that the use of S.20 in incidents of children's entry into care appeared appropriate and proportionate. It is, however, the long term use of S.20 which was identified as problematic in terms of securing legal permanence for those children who require long term care arrangements outside of their birth family. This will be tracked and scrutinised through the Placement Panel.

**Independent Case Audits-** We had an independent auditor who every quarter audits a sample of six cases of those he graded 2 good and 3 requiring improvement and 1 inadequate using the Ofsted threshold for good. The actions for each case were identified and will be reviewed in Q3.

**Routine Monthly Case Audits** - Social Care managers reviewed 12 children's cases looking at planning; supervision and management oversight; child's voice and impact of intervention. The case holding social worker was also interviewed as part of the audit. This audit work will be progressed and embedded over the following months. 6 required improvement; 3 were inadequate and 3 were good. Actions for each case were identified and senior managers are responsible for monitoring the improvements needed.

### Strengths

- A new Quality Assurance Framework will strengthen the services confidence in its assessment of the quality of the service

### Challenges/Risks

- To embed the new Quality Assurance Framework.

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## Exclusions

### Performance Assessment

#### **Fixed term exclusions (FTEs)**

In Swindon, during the month of September 2015, there were 172 FTEs from Swindon schools, with 20 exclusions for primary-aged pupils and with 152 exclusions for secondary-aged pupils. This is a similar overall figure to the same period of the previous year when there were 179 FTEs, with 12 coming from primary-aged pupils and 167 from secondary-aged pupils. However, a modest drop in FTEs was recorded for pupils attending mainstream secondary schools.

Latest available official figures by the Department for Education, for the year 2013/14, show that FTE as percentage of school population for Swindon was 4.9%, compared to 3.5% for England and for the South West.

#### **How many children have been Permanent Excluded (PEX) from school?**

2 children were permanently excluded from Swindon schools during September 2015, whereas none were excluded in the same period of the previous year. Both pupils were secondary-aged.

4 pupils had their Permanent Exclusion withdrawn during September 2015, compared to 5 in the same period of the previous year. All pupils were secondary-aged.

Latest available official figures by the Department for Education, for the year 2013/14, show that PEX as percentage of school population for Swindon was 0.05%, compared to 0.06% for England and 0.07% for the South West.

## Strengths

- Collaboration between all secondary schools and SBC to manage provision for pupils at risk of or in receipt of permanent exclusion

## Challenges/Risks

- Latest official figures for fixed term exclusions show Swindon among the local authorities in England with highest FTE rates (22 out of 151)
- Children with characteristics of vulnerability are significantly overrepresented among those that are excluded from school.



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## Attendance, NEET, Participation in Learning and Youth Unemployment

### Performance Assessment

**Primary School Attendance** Primary absence was 2.8% in September 2015, the same as in the same period of the previous year. For reference, absence in Primary schools in Swindon in 2014/15 was 3.9% while the national and regional averages were 4.0%.

**Secondary School Attendance** Secondary absence was 3.7% in September 2015, the same as in the same period of the previous year. For reference, absence in Secondary schools in Swindon in 2014/15 was 5.1% while the national and regional averages were 5.2% and 5.4%, respectively.

**Persistent Absenteeism (less than 85% attendance)** 995 (3.6%) pupils were deemed as persistent absentees in 2014/15, slightly lower than in the previous year and also lower than the national and regional averages of 3.9% and 3.8%.

### NEET, Participation in Learning (June 2015) and Youth Unemployment – September 2015

September is a month with significant proportions of young people in unknown post-16 activities, and so Participation figures are not accurate. Therefore it is best to look at June 2015 to compare ourselves against the previous year and national averages.

The proportion of 16-18 year-olds in Unknown activities in Swindon in June 2015 was 7.6% (590 young people), slightly higher than the national and regional averages of 7.3% and 7.1%.

The proportion of 16-18 year-olds that were NEET in Swindon in June 2015 was 6.4% (476 young people), similar to last year's figures of 6.3%, but higher than the national and regional averages of 4.9% and 5.1%. Most young people NEET are aged 18.

The percentage of 16 & 17 year olds 'In Learning' in June 2015 was 89.4%, this is similar to the national average of 89.5% however lower than last year's figure of 90.1%.

The number of 18-24 year-olds that are unemployed but that are actively looking for work was 510 young people as at September 2015, representing 3% of this age group. This is lower than in the same period of the previous year, when more young people (660) were out of work. Comparatively, this is a similar rate to the national average of 2.9% but is higher than the regional rate of 1.8%.

### Strengths

- Latest official figures show Swindon with slightly less school absences and less persistent absentees
- Swindon has fewer young people in Unknown post-16 activities
- Fewer young people aged 18-24 out of work.

### Challenges/Risks

- NEET figures for 18 year olds are above national and regional averages

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## Youth Offending

### Performance Assessment

#### Reducing the number of Young People committing offences for the first time – First Time Entrants (FTE)

##### April to September 2015 (Q1 & Q2 data)

The locally set target is to maintain low numbers of first time entrants (FTEs) into the justice system. Whenever possible, low level offending is dealt with without taking young people to court, especially if the young person has not been in trouble before. In the community the Police encourage reparation by the offender direct to those affected by their offending, (paying or repairing damage or a genuine apology etc. as part of a Community Resolution). In total there have been 61 **Community Resolutions**. In 2014/15 there were 186, so this is a reducing trend to watch.

Where offences are not suitable for a community resolution young people may be suitable for a **Cautions**. An example would be where there is no victim or the circumstances are more complicated and need a formal process. Cautions are given at the police station and can involve an assessment by the YOT and can involve Conditions being agreed to make good the harm done or completing basic interventions such as improving school attendance. In total there were 61 Cautions and 15 Conditional Cautions. In 2014/15 there were 106 Cautions and 16 Conditional Cautions.

Based on the previous year's outturn the target is to have less than 44 **first time entrants** into the justice system per quarter. Against this figure there were 75 First Time Entrants (subject to data cleaning) by the end of Q2, which shows a continuing trend for the reduction in FTEs. These trends are in line with what is happening nationally, where there is a significant reduction in youth offending.

**Re-offending** data is produced by the Ministry of Justice (MoJ) using police and Youth Justice Board (YJB) data and is based on a rolling cohort identified 24 months previously. Year on year Swindon YOT re-offending rate has been broadly in line or better than the national average which is currently 35%. During this period, however, the local rate rose to a high of 43.2%. Data suggests this is due to a small number of persistent offenders from Oct12-Sep13 re offending, but as they 'roll through' the cohort timeframe it is expected to return to normal rates. Re-offending rates are predicted to rise across the country due to the reducing cohort of young people entering the justice system. In March 2015 the YOT was subject of a **full joint inspection** which ascertained that there were no practice or procedural issues of concern that were contributing to this rise at the time or in place currently. The final inspection report was published on 10<sup>th</sup> June.

### Strengths

- FTE's rates in Swindon are reducing despite a national trend which suggests a slow down in this regard. Offending rates also remain low. The RJ Scrutiny Group (Pan Wilts/Swindon; membership includes the PCC, Senior Police Officer and Yot Managers) recently scrutinised the Swindon YCC's and confirmed the good work undertaken with this cohort of Swindon young people by the Yot.

### Challenges

- To ensure re-offending rates are monitored to ensure we fully understand the issues and impact of small numbers of offenders. To continue to scrutinise the Pre Court disposals and cautioning process to ensure the right response is delivered to the right person and at the right time.

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## Child Health

### Performance Assessment

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#### Breastfeeding

In Q2 the prevalence of breastfeeding at 6 weeks was 44.1% (out of 672 Health Visitor contacts), decreasing from 50.5% (of 688) in Q1. The drop in coverage, however, was not so pronounced – 95.2% in Q2 compared to 96.8% in Q1.

#### Obesity

The prevalence of obesity for both Reception and Year 6 children in the 2014/15 academic year was higher in Swindon than in the whole of England: 9.2% of 2,584 Reception were classed as obese (decreasing from 9.5% the previous year) compared to 9.1% of 610,636 pupils across the country. In Year 6 the prevalence was 19.5% of 2,166 children (a 2% increase from 2013/14) compared to 19.1% of 531,223 nationally.

The combined proportion of overweight and obese children in Reception was lower in Swindon than in the whole of England – 20.5% compared to 21.9% – and decreased significantly from the previous year's figure of 24.2%. The prevalence in Year 6, however, was higher than the national figure (34.3% as opposed to 33.2%) and increased from 33.0% in 2013/14.

#### Immunisations

Uptake of primary vaccinations at 12 and 24 months has decreased since Q1 (from 96.2% to 95.5% and 98.0% to 97.1%, respectively) and uptake of both primary and booster MMR vaccinations at 5 years decreased also (from 97.6% to 96.2% and 94.1% to 92.0%). However, all 13 measures were higher than the national figures as well as those for the Bath, Gloucestershire, Swindon and Wiltshire Area Team.

### Strengths

- Despite the decreases seen in Q2, immunisation uptake remains a strong point and is helped by the thorough data auditing processes within the Child Health and the robust lines of communication with GP practices.

### Challenges

- Breastfeeding coverage has declined in the last quarter but a new audit of Health Visiting data has been introduced by the Performance and Data Intelligence team which will hopefully provide the Health Visitors with the information they need in order to improve the service.

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## Work Programme 2015/16

### Children's Health, Social Care and Education

#### Overview & Scrutiny Committee

Date: 3<sup>rd</sup> February 2016

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Author:	Director of Law & Democratic Services
Wards:	All Wards
Locality Affected:	All Localities
Parishes Affected:	All Parish Areas

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#### 1. Purpose and Reasons

- 1.1 Each Overview and Scrutiny Committee is requested to have a work programme that details the activities that it will be undertaking during the Municipal Year.
- 1.2 The work programme details the various topics and issues that each Committee intends to look into during the coming year, with the aim of producing evidence based recommendations intended to provide service improvements for Cabinet and external agencies/bodies to consider.
- 1.3 Under the Council's Constitution, Overview and Scrutiny Committees are required to agree a work programme at the start of the Municipal Year outlining their priorities and likely outcomes of considering these issues.

The work programme is developed taking into account:

- Corporate priorities and objectives, including the Cabinet Forward Plan.
  - Partnership strategic priorities and objectives.
  - The interests and concerns of Members, Council officers, members of the public and other stakeholders such as community and voluntary groups and local businesses.
- 1.4 Committees are encouraged to review the work programme on a regular basis to ensure it remains relevant and to prioritise the workload of the Committee.
  - 1.5 Members are reminded that the work programme must also take into account:
    - The workload of the Committee and of individual members.
    - The capacity of officers to support a review.
    - The resource implications of carrying out a review.
    - The timescales for a review.
    - The most appropriate method of carrying out a review e.g. Committee meeting, Task Group, Member Champion review.
  - 1.6 The Local Government and Public Involvement in Health Act 2007 have presented the Children's Health, Social Care and Education Overview and Scrutiny Committee with a role, remit and powers regarding local health matters.

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Further information on the subject of this report can be obtained from Contact Rita Glen-Gallo, 01793 463411, [rglen-gallo@swindon.gov.uk](mailto:rglen-gallo@swindon.gov.uk)

# Work Programme 2015/16

## Children's Health, Social Care and Education

### Overview & Scrutiny Committee

Date: 3<sup>rd</sup> February 2016

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- 1.7 The Children's Health, Social Care and Education Overview and Scrutiny Committee is encouraged to be mindful of its role and remit when considering a work programme for the 2015/16 Municipal Year.

### 2. Recommendations

The Committee is recommended to:

- 2.1 Review the updated work programme to ensure that it remains relevant.
- 2.2 Discuss any issues arising from information circulated outside of the Committee meeting.

### 3. Detail

- 3.1 It is important that Overview and Scrutiny adds value to the work of the Council and the Borough and produces tangible outcomes for local people that result in real service improvements. Selecting the right topics is crucial to ensure that Overview and Scrutiny will be effective.
- 3.2 The work programme will be reviewed at every Committee meeting or as the Committee sees fit to ensure that it remains relevant and that Members and Officers have sufficient capacity to effectively achieve its objectives.
- 3.3 The work programme will be reviewed at every Committee meeting or as the Committee sees fit to ensure that it remains relevant and that Members and Officers have sufficient capacity to effectively achieve its objectives.
- 3.4 The Work Programme is attached at Appendix 1.

### 4. Alternative Options

- 4.1 The Committee can choose not to have a detailed work programme, although it is recommended that it is best practice to do so.

### 5. Implications, Diversity Impact Assessment and Risk Management

Financial and Procurement Implications

- 5.1 There are no financial or procurement implications arising as a result of this report. Any expenditure arising as a result of an item on the Committee's work programme will be met by the Overview and Scrutiny Support budget, subject to the approval of the Committee.

# Work Programme 2015/16

## Children's Health, Social Care and Education

### Overview & Scrutiny Committee

Date: 3<sup>rd</sup> February 2016

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#### Legal and Human Rights Implications

- 5.2 Section 21 of the Local Government Act requires every local authority to establish an overview and scrutiny function to hold the Executive to account, undertake policy development and review, monitor and improve performance.

#### All Other Implications (including Staff, Sustainability, Health, Rural, Crime and Disorder)

- 5.3 There are no other direct implications arising as a result of this report. Any further implications will be identified when a topic is reviewed by the Committee.

#### Links to One Swindon, Plans and Policies

- 5.4 The remit of the Committee includes the review, scrutiny and development of policy recommendations and the monitoring performance of corporate priorities.

#### Diversity Impact Assessment

- 5.5 No Diversity Impact Assessment (DIA) is required at this stage. Any DIA that is required during review of topics included within the work programme will be identified at the appropriate stage.

#### Risk Management

- 5.6 No risk management issues have been identified at this stage. Any risk management issues will be identified at the appropriate time when a topic is under review by the Committee and if it makes any recommendations.

### **6. Consultees**

- 6.1 The Director of Finance (Section 151 Officer) and Director of Law and Democratic Services (Monitoring Officer) are consulted in respect of all reports.

### **7. Background Papers**

- 7.1 None

### **8. Appendices**

Appendix 1 – Work Programme for 2015/16.

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## **Children's Health, Social Care and Education** **Work Programme 2015-2016**

### **Terms of Reference of the Committee**

To fulfil all the functions of an overview and scrutiny committee as they relate to: –

- The review, scrutiny, and development of policy recommendations.
- The management of performance.
- The monitoring of progress towards delivering relevant strategies and corporate priorities.
- The formulation of advice for the Cabinet, Council and other partners and stakeholders.

To have specific responsibility for (but not limited to) the scrutiny of:–

- The performance of services for children towards agreed local and national Performance Indicators.
- The quality of provision and effectiveness of Local Authority strategies to raise standards of education within Swindon.
- Specialist social services and integrated social services for children and young people in Swindon.
- The delivery of services to children and young people in Swindon generally.

In addition, as these relate to Children and Young People:

- The performance of services seeking to deliver healthy communities towards agreed local and national performance indicators.
- Health, health commissioning and service delivery.
- Public Health, Health promotion and the work of the Health and Wellbeing Board.
- Health Integration and collaborative working and commissioning with Health agencies and providers and General Practitioners.

In accordance with Section 7 of the Health and Social Care Act 2001 (as amended), the Children's Health, Social Care and Education Overview and Scrutiny Committee will undertake scrutiny of local health service providers jointly with the Adult's Health, Social Care and Housing Overview and Scrutiny Committee.

### **Review of the Work Programme**

The work programme will be reviewed at every meeting of the Children's Health, Social Care and Education Overview & Scrutiny Committee to ensure that it remains relevant, to ensure that Members and Officers have sufficient capacity to deliver the work programme and to include any additional items on the work programme, if appropriate.

### **Contact details**

Committee Officer: Rita Glen-Gallo  
Email: rglen-gallo@swindon.gov.uk  
Tel: 01793 463611

<b>22<sup>nd</sup> July 2015</b>		
<b>Item</b>	<b>Objectives</b>	<b>Witnesses</b>
Co-optees Appointment	To confirm the appointment of Co-optees to the Committee.	Chair
Performance Report	To provide a detailed report on the Children's Services performance, informing the Committee of the latest indicators across Children's Services.	Victoria Guillaume
Work Programme discussion	To set the work programme for the forthcoming municipal year and agree Task Groups and Membership on to those groups.	All

<b>2<sup>nd</sup> September 2015 – Theme of Meeting - Health</b>		
<b>Item</b>	<b>Objectives</b>	<b>Witnesses</b>
Youth Forum and Youth Parliament	To receive a report from the Members of the Youth Forum and Youth Parliament on their work programmes and achievements for the year and to give the Committee an opportunity to identify any issues raised that Overview and Scrutiny can assist with.  To update the Committee regarding "Mind the Gap".	Claire Smith
Health Issues	To update the Committee on work being undertaken by Child and Adolescent Mental Health Services (CAMHS), School Nursing, Targeted Mental Health Service (TaMHS), Avon and Wiltshire Mental Health Partnership (AWP).	Joy Kennard / Victoria Guillaume
Performance update reports	To receive performance reports as required by the Committee from Commissioners and Providers.	Great Western Hospital (GWH) Clinical Commissioning Group (CCG) NHS England Healthwatch

<b>2<sup>nd</sup> December 2015 – Theme of Meeting – Education</b>		
<b>Item</b>	<b>Objectives</b>	<b>Witnesses</b>
Education / School Standards	To provide the Committee with the latest school standards figures in order that the Committee can effectively scrutinise the performance of schools within the Borough.	Peter Nathan
Education Strategy Board	To update the Committee relating to work being undertaken by the Board.	Peter Nathan
Ofsted Local Authority School Improvement Report Update	To update the Committee on work being undertaken relating to the school improvement arrangements.	Peter Nathan

<b>2<sup>nd</sup> December 2015 – Theme of Meeting – Education</b>		
SEND Reform	To update the Committee on work being undertaken following the SEND Reforms that became law on 1 <sup>st</sup> September 2014.	Peter Nathan

<b>3<sup>rd</sup> February 2016 – Theme of Meeting – Safeguarding / Child Protection</b>		
<b>Item</b>	<b>Objectives</b>	<b>Witnesses</b>
Youth Parliament Update		Claire Smith
Safeguarding	To receive a report updating the Committee on work being undertaken regarding Child Sexual Exploitation, Female Genital Mutilation, Honour Based Violence, Domestic Violence and the Multi-Agency Safeguarding Hub.	Victoria Guillaume
Youth Offending Team	To update the Committee on work being undertaken by the Youth Offending Team	Matt Bywater
Performance Report	To provide a detailed report on the Children's Services performance, informing the Committee of the latest indicators across Children's Services.	Victoria Guillaume

<b>13<sup>th</sup> April 2016 – Theme of Meeting – School Place Planning</b>		
<b>Item</b>	<b>Objectives</b>	<b>Witnesses</b>
School Admissions Process	To inform the Committee on the School Admissions Process.	Rebecca Mathis
Care Leavers	To receive an update relating work being undertaken by the Care Leavers Team	Valerie Williams
Performance Report	To provide a detailed report on the Children's Services performance, informing the Committee of the latest indicators across Children's Services.	Great Western Hospital (GWH) Clinical Commissioning Group (CCG) NHS England Healthwatch Avon & Wiltshire Mental Health Partnership (AWP) SEQOL
The SEND Task Group Update	To receive an update on task group work.	Lyn Frith

## TASK GROUPS

<b>Item</b>	<b>Objectives</b>
SEND reforms	The SEND Task Group will review the implementation of the Special Education and Disability (SEND) Reforms relating to the Children and Families Act 2014 with specific focus on their implementation in the Borough of Swindon.

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