

Cabinet Member Question and Answer Session

Scrutiny Committee

Date: 21st March 2016

Author:	Cabinet Member for Children's Services; Interim Director of Children's Services
Wards:	All
Locality Affected:	All
Parishes Affected:	All

1. Purpose and Reasons

- 1.1 This report sets out success, challenges, and future direction of the portfolio for the Cabinet Member for Children's Services.
- 1.2 A key purpose of the Scrutiny function is to hold the Cabinet to account and ensure that Council priorities and performance are being delivered. The Scrutiny Committee partly fulfils this requirement through the use of question and answer sessions with the Cabinet Member for Children's Services.
- 1.3 The purpose of the Question and Answer session is to ensure that the Cabinet Member provides the Scrutiny Committee with performance information relative to their portfolio responsibilities. It also requires the Cabinet Member to provide budget information for their portfolio responsibilities and provides an opportunity for the Scrutiny Committee to ask questions on the portfolio responsibilities.

2. Recommendations

Scrutiny Committee is recommended to:

- 2.1 Take note of the report by the Cabinet Member for Children's Services, to put appropriate questions to the Cabinet Member for Children's Services and to decide if any further action is required.

3. Detail

- 3.1 The Cabinet Member for Children's Services is Councillor Fionuala Foley. The Leader of the Council has assigned the following responsibilities to the Cabinet Member:
 - 3.1.1 Children and Family Services including Early Help, Youth Offending Team, Young Person Substance Misuse team, Targeted Mental Health, Education Welfare, Educational Psychology, Youth Engagement, Services for Disabled Children
 - 3.1.2 Children's Social Work Services
 - 3.1.3 Community Health Services including Health Visitors, School Nurses and Family Nurse Partnership, Paediatric Therapy Services, Speech and Language and Portage

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- 3.1.4 Local Safeguarding Children's Board (LSCB)
- 3.1.5 Corporate Parenting Board
- 3.1.6 Multi Agency Safeguarding Hub (MASH)
- 3.1.7 Education Services including, Provision for Early Years, LA Maintained Schools, Provision for children with Special Educational Needs and Disabilities, Education Other Than At School, Tuition Service, Championing Excellence and Promoting High Standards
- 3.1.8 Education Strategy Board
- 3.1.9 Schools' Forum
- 3.1.10 Children's Voluntary Sector Contracts
- 3.1.11 Public Health – Children
- 3.1.12 Reducing Domestic Violence
- 3.1.13 Fostering and Adoption services
- 3.1.14 Music Services
- 3.1.15 Plas Pencelli Outdoor Education Centre
- 3.1.16 Troubled Families
- 3.1.17 Governor Support services
- 3.1.18 Members of the Committee are encouraged to contact the Committee Officer or the Cabinet Member if they would like any assistance in preparing for this meeting.

What have you done well?

Reducing Child Sexual Exploitation (CSE) Council-Wide Working Group

- 3.2 The Council has had a reducing CSE Working Group since January 2015, which is chaired by John Gilbert. There is a delivery plan in place that links closely with the Local Safeguarding Children Board (LCSB) action plan. The majority of actions in the delivery plan have been achieved within timescales. Actions from the Council Reducing CSE Working Group include, letters been sent to every taxi driver, hotel and licence premises. We recently had positive meetings with Thamesdown Transport and Stage Coach and it has been agreed that they will facilitate a letter can be sent to every bus driver. The message in all the letters is if you "see something say something". Linked to this, Swindon Council now has a new website "Say Something Swindon" at <http://www.swindon.gov.uk/cse> . A

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presentation on CSE was made to the Children's Health, Social Care and Education Overview and Scrutiny Committee on 6th January 2016. There is a national CSE awareness day on the 18th March 2016, Swindon Council and colleagues from the LSCB are working together to plan for the day.

- 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 Funding and agreements are in place for a co-located CSE team, Opal 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.

Troubled Families

- 3.5 Due to the success of this programme in Swindon, we were invited by the Department for Communities and Local Government (DCLG) to be an Early Starter local authority and began the roll out of phase two of the programme in January 2015. In phase one, SBC had a target of working with 370 families and outcomes were met for 96% of cases (354). 57.1% (202) families continued to sustain their outcomes and did not meet any phase two criteria.
- 3.6 Phase two of the Troubled Families Programme retains the current programme's focus on families with multiple high cost problems and continues to include families affected by poor school attendance, youth crime, anti-social behaviour and unemployment. However, it also reaches out to families with a broader range of problems, including those affected by domestic violence and abuse, with younger children who need help, where crime and anti-social behaviour problems may become intergenerational and with a range of physical and mental health problems.
- 3.7 We have identified 227 families (81% of target for 2015/16) and are actively working with 208 families (74%). Due to the extended criteria and information sharing agreements across partner agencies we are confident that we will be able to identify the target number of families.

Family Nurse Partnership

- 3.8 The value of fully integrated, co-located health, education and social care services for children in Swindon cannot be over-stated. The Family Nurse Partnership, (FNP) has been established for 6 years. 330 clients have been enrolled on the Programme, and the FNP is currently working with 137 families. 60 first time mothers were enrolled in 2014/15, Of these, 50% were under 18 at conception and all were under 20. The Swindon FNP is having a significant impact on protecting children and improving outcomes for children in the safeguarding arena. The therapeutic relationship between family and nurse

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provides the foundation for acquiring information and knowledge to inform assessment of risks and protective factors within families. The nurses are able to identify and act on concerns early. The team has strong links with social care, other partners and the named nurse for child protection which promotes a culture of information sharing and opportunities for discussing concerns, seeking advice and sharing good practice.

- 3.9 All young parents completing the programme are asked for their views and participate actively in the development and celebration of the programme. The outcomes of FNP Swindon have been very positive, with the majority of families, on exit, only requiring universal services. We can provide evidence of:
- 3.9.1 A reduction in smoking, cross-generational changes in attitudes about smoking around children, often leading to smoke free homes and indications suggest reduction in A&E attendance for accidents,
 - 3.9.2 An increase in immunisation uptake and use of contraception,
 - 3.9.3 Emerging improved developmental milestones (language acquisition, cognitive and social emotional skills) compared to a non-FNP group with a similar profile. This will have a significant impact on the child's school readiness but further evaluation needs to be done post FNP to evaluate this,
 - 3.9.4 Increased uptake of 2 year nursery education funding for the majority of families,
 - 3.9.5 Parents returning to education, training or finding work,
 - 3.9.6 Improved relationships and more awareness of unhealthy relationships for the parents. This is also seen in improved engagement with services, and
 - 3.9.7 Improvement in the responsiveness to their children

Key Stage 1 and Key Stage 2 results

Key Stage 1

- 3.10 Phonics tests are taken by pupils at the end of Year 1. Results improved by 2% over 2014 with 75% reaching the required standard which is 2% below the national average. The pupils who do not pass at the end of Year 1 retake the test in Year 2 and by this time they have caught up with the national average. By the end of Year 2, 91% of pupils reach the required standard against a national average of 90%. Girls attain higher results than boys, with the difference being similar to the national average. Children on free school meals attain lower than other children but again the difference is similar to the national average. In 6 schools, pupils attained less than 60% in the tests and these schools are being

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targeted for support by the Commissioner for Education (primary) working with the Borough's teaching schools.

- 3.11 Pupils are assessed at the end of Key Stage 1 (end of Year 2) in reading, writing and mathematics. Attainment has risen in all subject areas since 2014 and is significantly above average overall and for writing. Again, girls attain more highly than boys and pupils on free school meals attain lower than other pupils. Both gaps are similar to the national average. Level 3 is the higher level of attainment in these assessments and pupils overall were at the national average at this level. In other words, Swindon has a similar proportion of higher attainers to the national average.

Key Stage 2

- 3.12 Pupils are assessed at the end of their primary education (Key Stage 2) in Year 6 in reading, writing, mathematics and GPS (grammar, punctuation and spelling). Attainment is overall in line with the national average with reading being significantly above the national average. Girls attain higher than boys at level 4+ (expected standard) with the gap being wider than the national average but this is because girls perform significantly higher than the national average in mathematics and writing. Disadvantaged pupils attain lower than other pupils with the gap being similar to the national average. The higher levels of attainment in these tests are level 5 and level 6 and Swindon has a similar proportion of higher attainers to the national average.
- 3.13 The progress that pupils make between Year 2 and Year 6 (expected progress) has improved in all subjects in 2015 and is line with the national average overall. Writing is above the national average putting the local authority in the top quartile against other local authorities. About a third of Swindon pupils make more than expected progress in their subjects, which is in line with the national average. Disadvantaged pupils made slightly less progress than their disadvantaged peers nationally and this has been the case for the past three years.
- 3.14 Looked after children are a focus nationally and in the South West because of their low overall achievement compared to other children. In Swindon, 12 looked after children were assessed at the end of Year 6 and their attainment as a group is well below other pupils. However, when compared to looked after children nationally, in Swindon these pupils attained higher than the national average with 75% achieving the expected level against a national average of 53%. These pupils also made stronger progress than their peers nationally.
- 3.15 Pupils with special educational needs attained below the national average for all pupils at the end of Year 6 as might be expected. When compared to special educational needs pupils nationally, their attainment is in line with the national average and those with statements or Education, Health and Care Plans (EHC) attain higher the national average. In terms of progress, pupils with special

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educational needs made more progress than their peers nationally but if they had an EHC, they made slightly less progress. Information on these pupils needs to be treated with some caution, however, as there is no nationally moderated system in place for special needs. This means that a pupil in one local authority could be defined as special needs, whilst in another local authority they would not.

What would you do differently?

Education Strategy Board

- 3.16 The Education Strategy Board (ESB) was set up in Swindon in July 2015. The Board is chaired by Sir David Carter, the Regional Schools Commissioner. The ESB had been planned and agreed for some months, and schools engaged in the process, but the decision was taken to wait to establish the formal operation of the Board until the Regional Schools Commissioner took up his post in September. This was felt to be more in the context of aligning with the accountabilities of the Regional Schools Commissioner for Academies.
- 3.17 The Education Strategy Board has enabled the Local Authority, in partnership with the Regional Schools Commissioner, to work more actively and intensively with schools and academies. The Local Authority is now more actively engaged with schools and academies where there are concerns about standards, where it is identified that improvement is required in a specific subject or at a specific Key Stage, and importantly to facilitate collaboration between schools to share best practice and to improve standards.

Volume of contacts and referrals to council services and earlier engagement of LSCB to review the Threshold Criteria

- 3.18 There remains an increase in the number of contacts received in Family Contact Point (MASH). Between April and December 2015, 10,257 were received. This is an increase from 8,085 for April to December 2014. Between April and December 2015, 2,300 referrals were received into Social Care, which is also an increase from the 1,991 referrals received between April and December 2014.
- 3.19 The LSCB Threshold Criteria is complicated and may be contributing to a number of children entering as a contact to Family Contact Point (MASH) or as a referral to Children's Social Care teams at an inappropriate threshold. There is a question around whether we could have addressed the volume of contacts and referrals to council services earlier if we had earlier engagement with the LSCB in reviewing the Threshold Criteria.

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What are the challenges facing the portfolio:

Recruitment to some management posts in Children's Social Care, recruitment of Health Visitors, recruitment of Foster Carers

Social Work recruitment

- 3.20 Throughout 2015 the Council has increased resource in response to increased demand and service pressure, in September 2014 agreeing to 7 extra establishment social workers.
- 3.21 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.

Health Visitor Recruitment

- 3.22 In October 2015, the commissioning of Health Visitors moved nationally from NHS England to Public Health in Local Authorities and we have worked well locally to ensure the transition has gone smoothly. Currently in Swindon we have 47 whole time equivalent (WTE) Health Visitors in our establishment. We continue to support the training of student Health Visitors to ensure that the workforce locally is sustained going forward.

Foster Carer recruitment

- 3.23 In August 2015, the Fostering Service established a pilot Recruitment and Assessment team to focus solely on recruiting local foster carers in a more timely and streamlined manner. Since that time there has been a significant increase in the number of enquiries from prospective foster carers. Following initial visits and assessments, six foster carers have been newly approved.
- 3.24 There are a number of ongoing exciting marketing and recruitment activities taking place that will continue to raise the awareness of fostering as well as attracting more interest and applications from prospective foster carers. The target is to Increase the number of in-house foster placements by 40 (24 foster carers) by the end of 2016. More information can be found at <http://www.fosteringadoptionwindon.org.uk/>

Placement sufficiency and commissioning

- 3.25 Swindon has a responsibility, through the Sufficiency Duty, to secure a sufficient range of stable and effective placements for its children in its care. A needs analysis of children and young people in care has been completed, which informs the Sufficiency Strategy. The complexity of changing legislation and market

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forces means that it is difficult to predict accurately where there may be shortfalls of changes to demands for placements for children in care in the future. This is a national challenge.

3.26 The Sufficiency Strategic Plan outlines the specific activities that Swindon Borough Council will take over the next three years to ensure that Swindon Borough Council is able to provide children with safe and stable placements. This will ensure:

3.26.1 A range of services to reduce the need and prevent children needing to come into care, providing more targeted, effective and timely early help services to safely prevent children from coming into care.

3.26.2 The supply of quality placements for children in care through both internal and external providers. There will need to be an increased focus on improving market management of placements and securing better value for money in relation to quality, price and outcomes, with ongoing reviews of the commissioning arrangements with independent fostering providers and residential providers, especially with regard to adolescent provision and housing options.

3.26.3 An increase of local in-house fostering families.

3.26.4 A range of placement types which have access to universal, targeted and specialist services.

3.26.5 More stability of placements resulting in better health, education and social outcomes.

3.26.6 Increase of children in being in permanent placements.

3.26.7 Targets/impact measures have been set against these activities, which will be reported to the Corporate Parenting Board.

Fixed term exclusions and Permanent exclusions

Fixed term exclusions (FTEs)

3.27 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.

3.28 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

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4.9%, compared to 3.5% for England and for the South West. This puts Swindon among the local authorities in England with the highest FTE rates (22 out of 151).

Permanent Exclusions (PEX)

- 3.29 Two 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.
- 3.30 Four pupils had their Permanent Exclusion withdrawn during September 2015, compared to five in the same period of the previous year. All pupils were secondary-aged.
- 3.31 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.
- 3.32 There is good collaboration between all secondary schools and Swindon Borough Council to manage provision for pupils at risk or in receipt of permanent exclusion. Children with characteristics of vulnerability are significantly over-represented among those that are excluded from school.

Key Stage 4

- 3.33 Outcomes at the end of year 11 in GCSE examinations were below the national average in 2014/15. 53% of pupils gained 5 A*-C GCSEs with English and mathematics against the national average of 56%. This indicator is based on pupils' first attempt at passing a subject exam. The outcome is very similar to last year and the previous four years with the gap to the national average being consistent. English GCSE A*-C pass rates fell from 69% to 65% with the national average at 68% (69% in 2014). Mathematics GCSE A*-C pass rates rose from 65% to 66% while the national average stayed the same at 68%.

CSE practice - Finding ways to work with and engage with young people who do not see themselves as victims of CSE.

- 3.34 It is acknowledged that CSE can affect children from all walks of life and all sectors of society. However, there are certain vulnerabilities that can make a young person more susceptible to exploitation. These children often have attachment difficulties or have experienced trauma either before or as a result of the exploitation.
- 3.35 Children who are victims of sexual exploitation find it difficult to disclose what is happening to them. The sophisticated grooming and priming processes executed by abusing adults makes disclosure difficult. Children that are victims of sexual exploitation can display disruptive and difficult behaviour and due to the grooming process fail to recognise they are being exploited.

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- 3.36 The difficult behaviours are often a cry for help, they may be taking drugs to block out the pain of what is happening to them or acting out in the hope that an adult will notice and take action to protect.
- 3.37 The issue for practitioners is the child may not understand or believe this is happening. Their way of coping is to deny when asked if it is happening. The alternative is to admit the abuse and shame that brings. It will mean the loss of her older "boyfriend" that she believes she loves. The person who has noticed her, made her feel special. This presents practitioners with many challenges in providing the support that children need to escape exploitation. The biggest challenge is to not to just focus on what is happening for the child but to try to identify the child's needs that are not being met (as the perpetrators of sexually exploitation are likely to be meeting those unmet needs) and use this to help provide appropriate interventions and resources.
- 3.38 Change will take time for those children who have been sexually exploited. Central to this is for the child to build a trusting and supporting relationship with a practitioner and for support to be given to the child's family.

Early Help Record and Plans versus number of statutory assessments

- 3.39 Many referrals into social care do not have any Early Help Assessment / Record or Plan. Only 10% of Social Care referrals in Q1 and Q2 2015/16 had an Early Help Record. The number of EHRP (296 in the first 2 quarters of 2015/16) is disproportionate to the number of children that services are delivered to in line with the Early Help threshold in comparison to the number of referrals (2,300) into Social Care.
- 3.40 The review of the Threshold Criteria will help to address this imbalance.

Special Educational Needs and Disability (SEND)

- 3.41 There has been an overall increase in the number of new requests for assessment from 226 in 2013/14 to 239 in 2014/15 and an overall increase in the number of children with Education, Health and Care Plans (EHCP) and statements in the school population from 1,207 in January 2015 to 1,223 in December 2015. This represents 3.8% of the population compared to 2.8% nationally, regionally and amongst statistical neighbours.
- 3.42 Between September and December 2015 only 16% EHC plans were issued within 20 weeks excluding exception cases. This compares to 64% across England in January 2015. Delays are due to gathering information from health and social care and other professionals within 6 weeks of the local authority request alongside unfilled vacancies within the SEN assessment team. The high number of requests received prior to the school summer holidays was also a contributory factor.

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- 3.43 Attendance rates for children with SEN are improving but remain a cause for concern. In 2014/15 children with an ECHP or statement had a rate of 13% persistent absence compared to 2% of children without SEN. In both cases this has reduced by 1% since 13/14. Overall absence for children with SEN has increased from 5.9% in 13/14 to 6.5% 14/15.
- 3.44 Exclusion rates for children with SEN are improving but remain a cause for concern. The exclusion rate in 14/15 was 11% for children with an EHCP or statement compared to 1% for children without SEN. Whilst this figure remains high it represents a 1% reduction since 2013/14.

Priorities for 2016/17

- 3.45 Whilst Safeguarding and Child Protection remains at the heart of what we do, the following are priorities worth particular mention:
- 3.45.1 Workforce Stability and Recruitment
 - 3.45.2 Education Strategy Board
 - 3.45.3 Foster Carer Recruitment and Retention
 - 3.45.4 Increase the effective use of the Early Help Record and Plan

4. Alternative Options

- 4.1 The Committee can choose not to operate a Cabinet Portfolio Question and Answer session system.

5. Implications, Diversity Impact Assessment and Risk Management

Financial and Procurement Implications

- 5.1 There are no direct financial or procurement implications arising from 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.

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.

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

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

Diversity Impact Assessment

- 5.4 No Diversity Impact Assessment (DIA) 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 **Appendix One** - Details about the activities undertaken over the course of the year for the Cabinet Member's portfolio are attached at Appendix One.
- 8.2 **Appendix Two** - Glossary