

# **Cabinet Member Question and Answer Session**

## **Cabinet Member for Children's Services & School Attainment**

### **Scrutiny Committee**

**Date: 19<sup>th</sup> March 2018**

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Author:	Cabinet Member for Children's Services and School Attainment; Corporate Director - Children's Services (DCS)
Wards:	All
Parishes Affected:	All

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#### **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**

The Committee is recommended to:

- 2.1 Take note of the report by the Cabinet Member for Children's Services and School Attainment, 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 and School Attainment, 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 and the Troubled Families programme
  - 3.1.2 Children's Social Work Services including the Multi Agency Safeguarding Hub (MASH), fostering and adoption services and the Corporate Parenting Board, Opal Team (Child sexual exploitation service)

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- 3.1.3 Community Health Services including Health Visitors, School Nurses and Family Nurse Partnership, Paediatric Therapy Services, Speech and Language and Portage and Public Health services for children.
- 3.1.4 Local Safeguarding Children's Board (LSCB)
- 3.1.5 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. This includes the Education Strategy Board; Schools' Forum, the Music Service, Plas Pencelli Outdoor Education Centre, Governor Support services and Traded services to schools
- 3.2 The Cabinet Member for Children's Services is also responsible for delivering some aspects of Priority Two (Pledges 15 and 17), and Priority Four (Pledges 28 and 29) of Swindon's vision for 2016-2020.
- 3.3 Priority Two focuses on offering education opportunities that lead to the right skills and right jobs in the right places. The two pledges we are committed to in delivering this priority include:
  - 3.3.1 In addition to the two new free secondary schools, build one secondary and 12 primary schools to meet the needs of our increasing population
  - 3.3.2 Improve educational attainment, in particular at ages 16-19 so we are above the average in England within five years.
- 3.4 Priority 4 focuses on helping people to help themselves while always protecting our most vulnerable children and adults. The two pledges we are committed to in delivering this priority include:
  - 3.4.1 Increase the number of foster carers in Swindon so that every 'child looked after' who should be, is placed in their home borough and
  - 3.4.2 Work with all of the 1270 families in Swindon who are in most need of support by 2020 in phase 2 of the Troubled Families Programme.
- 3.5 If Members require further information on specific portfolio areas not covered in this report, please see contact below.

Current Priority Issue: Children's Social Care.
- 3.6 Children's Social Care continues to face significant pressure from increased demand and the challenges of securing permanent, experienced and suitably qualified staff. There has been a significant increase in the number of children in

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care, the number of children in need and the number of children subject to child protection procedures. Swindon's position is set within a national context of increased demand for Children's Social Care Services. This is impacting on caseload levels, management oversight and accountability, consistency in practice and spend. The increase in service demand has been at a faster rate than the budgeted growth, and in the current financial year, the budget for children's social care is anticipated to overspend by £3.9m.

- 3.7 In the past 6 months, the service has appointed a new Corporate Director – Children's Services (DCS). The DCS has undertaken a detailed review of the service since taking up his post to assess the progress Children's Social Care in Swindon has made on the improvement journey since the Ofsted inspection in 2014. The review has identified, areas of improvement, and highlighted there is more to do. To support the ongoing improvement journey, the Council has agreed additional investment of £7.5m over the next 2 years. This will enable the service to deal with the current pressures and put arrangements in place for the service to be financially sustainable in the longer term. We aim to deliver 'One Children's Service which is Consistently Good Every Day.
- 3.8 Our recent self-assessment identified a number of challenges which we are currently addressing to sustain improvement and ensure our service is consistently safe, effective and efficient, across all areas. These include:
- 3.8.1 Strengthening Frontline management and improving supervision, management oversight and support for teams.
  - 3.8.2 Reducing caseloads as this is a barrier to effective practice improvement. The Cabinet approved a caseload of 15-18 cases per social worker which we are not able to achieve. The average caseloads currently are about 24 children per social worker within the long term teams and 28 children per social worker within the Assessment and Child Protection Team.
  - 3.8.3 Reducing social work turnover (currently at 6%) because too many changes in social worker can negatively impact on outcomes for children.
  - 3.8.4 Re-modelling Early Help so it is more effective in preventing children from needing statutory services or care allowing for earlier intervention to impact earlier in a child's life.
  - 3.8.5 Improving the consistency of social work practice and recording. A strong driver for this to ensure that the quality of practice is consistent with appropriate management over-sight.
  - 3.8.6 Reducing the number of children becoming looked after as this impacts on outcomes for children. The number of children in care has increased by a

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third from 252 in March 14 to 336 at the end of November 17. Swindon is now above the national and statistical neighbour average.

- 3.8.7 Ensuring we have sufficient care placements available in Swindon so we are less reliant on Independent Foster Placements out of Borough. The number of children in independent foster placements has increased to 116 at the end of November 2017. The number of unaccompanied asylum seeking children has also increased from 5 in March 2014, to 21 at the end of January 2018.
- 3.8.8 Ensuring specialist and focussed interventions have a good impact for the more vulnerable groups (Child Sexual Exploitation, Criminal Exploitation and Children Missing from Care, Placement and education as well as children being Electively Home Educated).
- 3.8.9 Addressing the quality of case recording and ICT system challenges.
- 3.9 A new strategic plan has been developed, which focuses on ensuring high standards of practice are consistently delivered across the service going forward. The key elements of our ongoing improvement journey are described below. Progress and impact will be closely monitored and regularly reported to Children's Health, Social Care and Education Overview Scrutiny and the Council's Corporate Management Team.
- 3.9.1 **Improving practice and delivering a consistent service** - The service has identified the priorities to drive good quality social care and the senior management team has a clear performance management structure that is being embedded into the day to day running of the service. This ensures managers across all levels implement consistent management oversight of the work within their span of control and are held accountable for delivering practice outcomes. The service is also in the process of tendering a new ICS solution which is less labour intensive and easier to navigate to enable social workers to have more time for direct work with children and families.
- 3.9.2 **Demand Management** - We are focussing on improving our early help offer through managing demand better coming into the multi-agency safeguarding hub (MASH). We want to provide the right level of service at the right time, and at the lowest, least intrusive level appropriate to the presenting need. We aim to minimise 'unnecessary' demand for social work interventions. We are also making sure we have the correct levels of staff and management to support the robust management of children's case work to improve practice and ensure interventions are timely and appropriate.
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3.9.3 **Manageable caseloads** - In 2016/17, following further increases in demand, an additional investment of £650k was secured by the Council to reduce caseloads to 15-18 children per social worker depending on the type of work required. This will bring additional team resilience for annual leave, sickness and cover arrangements, and bring more stability and pro-active practice for the children and young people they are working with.

3.9.4 **Maintain a Stable Workforce** – We recognise successful permanent recruitment coupled with a strengthened practice management model and structure is key to driving greater individual ownership, responsibility and accountability. This will provide better staffing stability and effective leadership at a practice level. We have been successful in recruiting newly qualified social workers but less successful at recruiting permanent experienced staff. This can impact on the skill level to deal with complex cases that need skill and experience. We are planning to undertake an international recruitment exercise for experienced social workers from those countries with similar practices to us and with a successful history of recruitment. We are also appointing a dedicated post within Children's Services to pro-actively focus on recruitment and retention activity.

#### What have you done well?

##### Primary School Attainment

3.10 Primary outcomes have improved significantly this year with outcomes at Key Stage 2 at the expected level being the most improved in the country. Phonics outcomes are now at the national average and a letter has been received from Nick Gibb, Minister of State for School Standards congratulating Swindon on having one of the highest rates of improvement in the country (see Appendix 1). Pupils are now assessed as being at the expected level or having a high score/working at greater depth. The assessments are tested by exam, in all subjects bar writing which is teacher assessed. The focus for primary schools this year, as agreed with head teachers and the Swindon Challenge Board, is improving outcomes at the higher standard/greater depth whilst continuing the improvement at the expected level across all subjects.

3.11 90% of primary schools in Swindon are currently judged by Ofsted to be good or better which is in line with the national average. For inspections of early years settings, 98% of settings are good or better which is higher than the national average (93%).

##### School Admissions

3.12 We continue to see good performance for School Admissions with 92% of secondary school parents receiving their first school preference and 98% of

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parents receiving one of their three top secondary school preferences. 91.4% of primary school parents received their first preference school and 98% received one of their three primary school preferences. There has been a large number of in-year school transfers this year with over 2500 being processed between September 2017 and February 2018 which is a concern for schools, however, we have introduced a new co-ordinated admissions system which has improved the allocation process and significantly reduced applicant waiting time and complaints.

#### Nursery Provision and Take up of eligible funded early education

- 3.13 Funded early education for two-year-olds is predominantly aimed for those families who are economically disadvantaged. It provides an opportunity for children to socialise, play, learn and develop in preparation for school. Research has shown this enhances communication skills and improves academic outcomes. Swindon is committed to providing children with the best possible start in life under its Priority 4, and in spring and summer 2017 our uptake reached 95%. We have maintained this level of performance. With the introduction of Universal Credit, we are required to report the number which is currently 667 children.
- 3.14 In response to Ofsted, SBC has also successfully increased the number of primary schools opening nursery classes (known as maintained nursery classes). There are 27 primary schools delivering early years education across Swindon (compared to 17 schools three years ago) with more in the pipeline for 2018/19. Ten of these schools have maintained nursery classes for 2 year olds which includes 2 year old funded places for the most disadvantaged children. Thirty per cent of 2, 3 and 4 year old children are now accessing all or part of their funded place through a maintained nursery class with a qualified teacher; the presence of which has been proven to positively impact on outcomes for children, particularly disadvantaged children.
- 3.15 To ensure the hard-to-reach eligible families benefit from the early years education offer in Swindon, we have refreshed our marketing and communication documents. We have also commissioned a video which to feature local families with children already benefitting from the funding, explaining the offer for others who may be less aware of its importance. The intention is to translate the video into Konkani, the second most frequently language spoken in Swindon after English

#### Butterflies Family Centre

- 3.16 Following the closure of the Children's Centres, Butterflies was commissioned as a Family Centre to provide targeted support to families within SN25, as well as



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providing outreach services to Highworth and Stratton. It latterly supported West Swindon families following the closure of their local centre.

- 3.17 Butterflies continues to offer high quality interventions. It provides a range of services including: one to one family support, groups for both parents and children, parenting courses; and more recently the delivery of a successful Managing Challenging Behaviours Course targeted for parents who have children who are on the Autistic Spectrum Disorder (ASD) pathway but not yet received a diagnosis. This course is focussed on helping to reduce the waiting time for an ASD diagnosis by ensuring families receive more timely and appropriate support when the presenting problem is behaviour related not ASD. Butterflies are achieving a 75% success with families reporting a positive change following their intervention. This is significantly better than the national average for Family Links courses which shows 56% improvement for families.
- 3.18 We are providing an additional £75k funding to Butterflies for 2018/19 to support Swindon's Early Help Offer and to extend their outreach work Swindon wide. The focus of this is to help children, young people and families build resilience and self-reliance and ensure the right help is given at the right time and the right place. Our intention is to undertake a commissioning exercise during 2018/19 to procure a 3 year contract to continue with the Family Centre model to support the earliest possible identification of a need and prevent escalation to more intrusive and costly statutory services.

#### Children's Community Health Services

- 3.19 The Care Quality Commission (CQC) inspected our children's community health services in March 2017 and their report was published in July 2017. The CQC categorises us as an independent health provider of Children's health services and under their current methodology, informed us that ratings are not published for this type of service. Our report, though, is very clear in that the inspectors saw many examples of good and outstanding practice and they had no concerns of note. The report is complimentary and judges our services to be safe, effective, caring, responsive, and well-led.
- 3.20 The CQC inspection team identified various examples of outstanding multi-disciplinary working between different professional teams and across the service. This was evident in communication, support and the sharing of information and best practice. Throughout the report, the inspectors identify detailed examples of exceptional service and practice and in particular, they highlighted the work of the children's complex care team and the specialist fluency service provided by speech and language therapy worthy of special mention. They made some developmental comments about some specific areas

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linked to capacity of some service areas, on call arrangements and a consent issue linked to external referrers. We have addressed all of these areas.

#### Services for Disabled Children

- 3.21 We continue to strive to provide responsive and flexible services for Disabled Children living in Swindon. The Disabled Children's Team is supporting 285 children and their families (as at February 2018). The Aiming High Short Break Service is currently supporting 439 children to access social and leisure activities whilst also providing parents and carers with the opportunity to take a break from their caring responsibilities. The paediatric therapy service (delivered by physiotherapists and occupational therapists) is delivering a range of therapy and care to 1011 children and young people who have complex on-going needs (as at December 2017). Increased demand and staff vacancies has impacted on waiting times and the service is currently seeing 57.5% of new referrals within 13 weeks against a target of 80%. Referrals are prioritised by risk and urgency and all urgent cases are seen within 8 weeks. Reducing the waiting time for occupational therapy is a key focus for the service and a new occupational therapist has been appointed to support assessment and treatment for the rising number of children and young people who have Autistic Spectrum Disorder (ASD). Of the 369 completed episodes of care in the service so far in 2017/18, 82% had a successful clinical outcome.
- 3.22 The paediatric speech and language therapy service is working with 2279 children and young people (as at December 2017). It provides a range of therapy and care to support babies with feeding and swallowing difficulties, children with communication, speech difficulties and delayed language development working with children, families and professional colleagues to support children to achieve their potential and to fully engage and participate in their family, school and community. Staff vacancies and rising demand have impacted on waiting times. On average, 44.5% of families are being offered an initial assessment within 13 weeks against a target of 80%. Reducing the overall waiting time is a key focus for the service and the teams ensures urgent cases are prioritised and waiting times are closely monitored.

There have been some significant improvements in performance in 2017/18 with the longest clinic waiting time reduced from 52 weeks in some areas of Swindon to 16 weeks as at January 2018. The service is continuing to make progress to achieve the 13 week target waiting time and is utilising part of the newly commissioned speech and language therapist time to increase capacity in the highest areas of demand and need in Swindon (Penhill, Pinehurst and West Swindon). A newly appointed specialist speech and language therapist is now in post and will prioritise reducing the waiting time to a maximum of 13 weeks.



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- 3.23 The Children's Complex and Continuing Care team provides support and care to a cohort of 41 children and young people. The team works in partnership with families and carers to help children and young people maximise their independence and quality of life by remaining at home, and having the opportunity to participate fully in education and social events.
- 3.24 The Swindon Portage and Special Tots service offers effective early intervention for pre-school children. It delivers a range of services including home teaching on a weekly basis during term time for 14 children who have a significant delay across more than 2 areas of development; inclusion into school for 2 children with the Portage teacher providing support to school staff; advice and information for parents around benefits and services; and a Special Tots pre-school group for 32 children with Special educational needs/disabilities. As above, demand is impacting on the service with 9 children waiting for portage support and 32 children awaiting special tots support. We are responding to this so that we can build capacity within Swindon's universal services to support children and families with additional needs so specialist provision can be targeted for those with more complex needs. Swindon Portage and Butterflies Family Centre also deliver the Early Bird and Early Bird Plus (EB+) programmes. These programmes provide strategies, skills and information for parents who have a child with autism. These courses are evaluated and feedback from parents is positive.

#### Public health services for children

- 3.25 The Public Health ring fenced grant funds over £3.8m of children's Public Health including Health Visiting, School Nursing, Family Nurse Partnership and Baby Steps to ensure the best start in life for Swindon's children and young people.
- 3.26 The Family Nurse Partnership, (FNP) has been established in the UK for 10 years and commenced in Swindon 8 years ago. Swindon FNP is commissioned by Public Health to deliver the programme to all young women under 18 with first babies at conception, care leavers under 25 having first babies, 18 and 19 year olds with vulnerabilities identified at notification and any woman under 20 years old having a first baby who has decided following consultation with the midwife that she would really benefit from FNP. Between January and December 2017, the local team worked with 180 families and delivered 2014 visits. They recruited 53 new families onto the FNP programme during the year with only 2 families declining to engage with the programme.
- 3.27 The Swindon FNP is having a significant impact on protecting children with evidence of both improving outcomes for children in the safeguarding arena and in their development especially communication. The foundation for the work is a strong relationship between the Nurses and the families they work with

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evidenced by high challenge and high support. The nurses are able to identify and act on concerns early. The team has strong links with all of the partners both within SBC and external agencies. This ensures a culture of information sharing and opportunities for discussing concerns, seeking advice and sharing good practice.

- 3.28 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 support from universal Health Visiting (HV) services. Positive outcomes for children have been evidenced by good Ages and Stages developmental assessment scores in all domains at 2 years old. Good outcomes for parents include take up of employment and education, positive changes in smoking behaviours (which also frequently impacts on extended families), and early detection and intervention of child maltreatment.
- 3.29 In Swindon, we have a breastfeeding strategy and an action plan, involving a range of partners, which aims to increase breastfeeding and improve advice given to all parents on all infant feeding, including developing a loving and caring relationship between parents and their child. We are implementing a number of initiatives to improve the prevalence of breastfeeding including the UNICEF Baby Friendly Initiative for which Swindon has achieved full accreditation; the "Breast Mates" network of breastfeeding peer support groups; Breastfeeding Welcome signs displayed in 31 venues across Swindon including coffee shops, GP practices, the Great Western hospital (all departments), Early Year's venues and churches. Over the last 5 years, there was a small but significant improvement in the number of babies being breast feed at 6 - 8 weeks.
- 3.30 Swindon continues to meet the World Health Organisation (WHO) targets for childhood immunisations at the target coverage level of 95% and performs better compared to the England average for Dtap/IPV/Hib at 2 years, MMR at 5 years, the Hib/Men C booster coverage at 5 years, and HPV for females aged 12 – 13 (where Swindon continues to be one of the highest in England at 94.9% compared to the England average of 87.0%). The latest data for childhood flu immunisation for the 2017/18 season shows that coverage is higher than the previous year with 48.1% of 2 year olds and 50.4% of 3 year olds being vaccinated in the GP programme which exceeds the national target of 40%. Provisional data until the end of November 2017 shows Swindon is also performing better than the regional average for flu immunisation for primary school children (reception to Year 4).
- 3.31 Swindon's Healthy Schools (HS) programme continues to focus on improving health, raising pupil achievement, improving social inclusion and encouraging closer working between health and education. It is a voluntary scheme with a

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three-tier award system (Bronze, Silver and Gold) so schools can demonstrate progress and develop ongoing strategies to improve health and wellbeing of the young people. Currently 75% of Swindon schools (61) have either achieved HS bronze award or are in the process of achieving it. Last year we awarded our first Gold HS status and 5 HS silver status. This academic year we have another 3 schools working towards Silver and one towards Gold.

- 3.32 After a successful pilot with three primary schools, we launched the Mental Health award. Numerous schools have enquired about completing this award and five schools are already working towards it. Our latest development has been the Swindon Healthy Early Years Programme (SHEYP), which we are piloting with 4 of our early years centres. We plan to launch this to all early years centres by June 2018.
- 3.33 This year we again commissioned ASH Wales to deliver smoking prevalence workshops to all secondary schools, (9 out of 12 schools have been engaged). We have amended the healthy eating section of the healthy schools audit to support schools in becoming sugar smart schools. We awarded three schools with this certificate last year. Working in partnership with WASP, we developed the Swindon Physical Activity Framework, which is also now available to all schools.

#### Seeking to reduce Child Exploitation

- 3.34 Our focus to reduce Child Sexual Exploitation (CSE) has broadened this year to cover all Child Exploitation (CE) and the Council's CSE strategy is being refreshed to reflect this wider scope. The remit of the specialist team (Opal) has been extended to support children and young people who are at risk of harm as a result of a range of factors, including sexual exploitation, criminal exploitation and those missing from home or care. A police officer has recently joined Opal to deal with criminal exploitation and Opal now have a worker available from Youth Offending Team (YOT) one day a week to support parents. Recruitment is underway to appoint a Missing Children Co-ordinator to the Opal Team.
- 3.35 There is strong collaborative working between SBC and the Police. Intelligence is routinely shared on individual children, perpetrators and venues of concern. Information is mapped and visually displayed for all children in Swindon who are being Criminally Exploited and Missing.
- 3.36 The Council's 'Child Exploitation Delivery Group', chaired by the Corporate Director - Children's Services (DCS), monitors progress against the detailed action plan to support the implementation of the Council's CE strategy. Any issues of potential concern or risk are escalated to the Council's Corporate Management Team (CMT). A communication strategy and campaign 'Report it

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don't ignore it', is in development to raise awareness and encourage reporting of CE concerns. CSE training is mandatory for all SBC staff and councillors and uptake is routinely monitored. There is also a rolling training programme for multi-agency staff on CSE and learning disability, working with parents, CSE Boys and LGBT children. Targeted sessions have also been arranged for Foster Carers, Young People Supportive Housing, and support staff in schools (dinner staff, reception staff). Online safety courses have been delivered to the schools safeguarding leads.

#### Care Leavers

- 3.37 We are making good progress in implementing the new duties for Care Leavers under the Children and Social Work Act 2017. We are co-producing the Care Leaver 'Local Offer' with service users and the Care Leaver Forum is proving to be a valuable resource for gaining the views of our care leaver to inform and develop future provision. We are re-shaping the Leaving Care Team to improve the support we provide for young people aged 16 years to 25 years. Some of the Council's additional investment will fund additional staff for the Care Leavers Team to deliver a wrap-around service for care leavers which will be operational 365 days, 24/7. SBC has also recently approved the recommendation for care leavers aged 18-21 years to be exempt from paying Council Tax, and for this exemption to be extended to care leavers aged 21-25 years if they are in difficulty.
- 3.38 The Leaving Care Service is working as part of the Supported Employment task group to help improve our understanding of the needs of individuals leaving care, provide a better knowledge base for accessing information, and increase the uptake of apprenticeships and employment by care leavers.
- 3.39 It is pleasing that we are allocating Personal Assistants to care leavers within the agreed timescales with performance currently at 100%. The number of care leavers in education, employment or training (EET) has remained consistently remained above the National Average (48%) for the past 12 months with the latest position as at December 2017 being 64.46%. Swindon has recently joined the National Care Leavers Benchmarking Forum to share best practice to drive further improvements in the year ahead.

#### Young Carers

- 3.40 A new contract with Swindon Carers Centre (SCC) commenced on 1<sup>st</sup> January 2018. Swindon Carers Centre (SCC) provides support to young carers aged 5 – 17 years and young adult carers aged 18-24. SCC supports young carers to experience emotional and physical wellbeing and have opportunities to learn and socialise. SCC has supported 25 young carers with individual grants worth over

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£5000 to access activities and equipment. The Young Carer Award (funded by the Big Lottery Fund), and a joint venture between SCC and Swindon schools/colleges, has delivered tangible benefits. Sixty four of the 82 schools and colleges in Swindon participated in the award and all schools reported a positive impact for young carers including improved achievement and better attendance and punctuality. Young carers also reported schools and colleges were more responsive to their needs.

- 3.41 SCC has also been contracted to support young adult carers (aged 18-24) to access education, employment or training (EET). A successful bid from the Carers Trust is funding additional small group activities to engage Young Adult Carers. The Nationwide Building Society and SCC are working in partnership on a skill share project. This consists of online workshops covering topics such as access to employment, training, life skills, finance and budgeting, interview skills, CV writing and work ethics. SCC have also secured a grant from St James's Place Foundation for a Carer Support Practitioner post to further develop the young adult carer offer. The focus is on building stronger partnerships with universal and community services to signpost unidentified young carers to the opportunities offered by SCC.

What would you do differently?

#### Early Help

- 3.42 The Council is committed to the principle that Early Help can improve outcomes for children, young people and families. When effective support is offered early, it can prevent problems from escalating. It is important that children and their families benefit from the best quality help at the earliest opportunity. Without Early Help, difficulties can escalate, family circumstances deteriorate and children may be more at risk of suffering harm. Equally, it reduces demand for services and interventions, which are more costly for Children's Services and other public services to provide.
- 3.43 Early Help includes both interventions early in life (with young children, including prenatal interventions) and interventions early in the development of a problem (with children or young people of any age). It covers universal interventions which are offered to everyone to prevent problems developing, as well as targeted interventions which are offered to particular children, young people and families with existing risk factors, vulnerabilities or acknowledged additional needs. If we get the delivery and support right at the 'universal' stage, the demand for more targeted and specialist support should reduce. This will provide more cost effective solutions as well as better outcomes for children, young people and families.



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- 3.44 Following the work of the LSCB Early Help Task Group in 2016/17, it became evident that Swindon's Early Help Offer needed to be better coordinated across the partnership to deliver the step change required to improve outcomes for the Swindon population. This led to the development of Swindon's Early Help Strategy 2017-2022 which was approved by the Health and Wellbeing Board in July 2017, and adopted by Swindon Borough Council's Cabinet and the CCG Governing Body. The LSCB guide to assessing need and support ('The Right Help at the Right Time') has also been refreshed to support the Early Help agenda. Swindon's Early Help Strategy describes how, over the next five years, agencies will work together to help children, young people and families build resilience and self-reliance, and, where additional support is needed, ensure the right help is given at the right time to prevent problems escalating. The strategy recognises the contribution and importance of the wider partnerships as well as local communities in ensuring the safety and wellbeing of families, children and young people.
- 3.45 A multi-agency Children's Strategic Group (chaired by Swindon's Director of Children's Services) has been established to provide leadership and oversight to ensure the best possible offer of effective early help is available for children and families living in Swindon. The LSCB Early Help Sub-Group will manage the implementation of the Strategy and the delivery of the new Early Help Model which will be launched in April 2018. Work is underway to progress the six priorities identified within Swindon's Early Help Strategy:
- 3.45.1 For the Council to work closely with key partners (e.g. schools, health, voluntary and community services, housing and adult services) to ensure that the best possible offer of early help is available for people living in Swindon.
- 3.45.2 To ensure early help support across the partnership is aligned to the Early Help principles and approaches described in the strategy and that early help is part of the core business for improving the life chances of children.
- 3.45.3 To use robust needs assessments to understand the nature and extent of the needs of local communities to effectively plan and commission Early Help services, and address any identified gaps in provision.
- 3.45.4 Provide clarity around the responsibilities of local agencies to help families early, and improve the quality and consistency of using Early Help Records and Plans (EHR&Ps) across the partnership to assess needs and plan support to improve children's lives.

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3.45.5 To effectively monitor the impact of Early Help through a Swindon-wide Early Help Performance Framework to identify key issues, local gaps, impact and success.

3.45.6 To establish a multi-agency Early Help working group to be accountable for overseeing the development and implementation of a robust action plan to support the delivery of the Early Help Strategy and Local Offer.

What are the challenges facing the portfolio:

#### Market Management Children Looked After (CLA) Placements

- 3.46 The increasing challenges and complexities of our CLA mean that we need foster carers, residential placements and over 16 placements which are robust and able to deal with the most challenging of children. 10% of CLA have more than three breakdowns in a year. The changing landscape for Children Looked After requires a flexible and multi-faceted approach from the Authority with step up and step down in care being a key feature.
- 3.47 Over this year we have reviewed all of our commissioning and contracting arrangements for our Children Looked After (CLA) and have refreshed our 'Sufficiency Strategy 2018-2021' to reflect our different approach for managing the changing profile of these children and the complexity of their needs. This includes increasing the capacity of in borough provision, and modifying the approach for care with the view to providing appropriate care over their time. The ultimate aim of the care is to reunify them with the family or transition to adults who do not require the help of the Authority identify how we can improve the market management of placements and secure better value in relation to quality, price and outcomes. The focus will always be quality of practice, listening to children's experiences and securing permanent options at the earliest opportunity.
- 3.48 We are constantly working on ensuring our foster carers are of the appropriate calibre. Our Fostering Improvement Board, chaired by the Director of Children's Services, oversees the implementation of our fostering strategy and fostering improvement plan to ensure the service is consistently meeting the required national standards. We are looking over the next five years to increase our in house fostering capability. We seek to support our in house carers and provide support in a variety of methods. The feedback from the children, their carers, the Foster Care Association resulted in the purchase of a new caravan sited at Cotswold Hoburn. This is now available for all our in house carers to use. We use collaborative frameworks to access the carers managed by Independent Fostering Authorities (IFA's) – however we have reached saturation of Swindon

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based foster carers from the IFAs, but we have increased our activity with providers to increase in borough / local capacity.

- 3.49 The increase in numbers of CLA is not only a Swindon issue, but a national shift in demand. This has resulted in a shortage of supply for all provisions, which is one of the main drivers for Swindon establishing their own provisions. However, the aim is to seek the very best market providers to develop, maintain and improve these provisions. A tender for seeking these quality providers is due to go to the market in March 2018. This will then enable us to seek holistic and complete solutions from these providers ensuring they are effective and compliant. The 'Staying Put' Policy put in place is working well and adds to placement stability for care leavers.

#### School Placement Planning

- 3.50 Between 2017–2026, the 10 to 15 years age group is projected to increase by 2,300, and 16-17 year old age group by 1,000. The New Eastern Villages development will also bring 8,000 to 10,000 homes to the East of Swindon. As a result, Swindon has reviewed its Pupil Product Ratio, and since March 2014, the Council committed to seek Free School applications for new provision. There has been an active campaign to engage academy sponsors and as a result Swindon has a fifth of all the Free Schools in programme for the South West region. This programme will ultimately provide approximately £78m of new provision for the Borough through external investment into Swindon. A number of new schools are being progressed and seven new schools have already been approved with the first one opening in September 2018. (Great Western Academy -North Swindon).
- 3.51 However, the need for additional schools is presenting a financial challenge for the Council as the cost of new school provision and third party funding is no longer an option. SBC will need to undertake borrowing to fund the capital cost of the schools. All long term borrowing will have an impact on the general fund revenue budget in the form of interest charges and Minimum Revenue Provision (MRP). MRP is the requirement to set aside funding to repay the capital element of the loan, currently each £1m of borrowing results in a revenue cost of £80k per annum. Based on the estimated costs provided above and additional £120m of borrowing would result in an annual revenue budget of £9.6m. The medium term resource plan presented to Council in February 2017 set out a projected funding gap of just over £30m for the period to March 2020 (Council Minute 87, 2016/17 refers). The Council's Swindon Programme will help fund this significant financial challenge.

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#### Secondary School Attainment

- 3.52 The Swindon Challenge Board, funded by SBC, continues to bring partners together to support a range of initiatives to raise standards in education across both primary and secondary schools. For example, all secondary schools have received funding to become members of the national secondary school improvement organisation PIXL (Partners in excellence). The Challenge Board is also supporting the development of the "Swindon: A Learning Town" project based on an idea from Bristol which is a UNESCO Learning City. One of the key aims of the Learning Town idea is to engage the whole community in raising the profile of education in Swindon in order to raise aspirations. This may include a series of borough wide events for example focusing on reading, science and technology or mathematics. This will also link in with the Swindon National Literacy Trust Hub being sponsored by WH Smiths.
- 3.53 We continue to have concerns about secondary education outcomes although there has been an improvement in the number of schools judged good or outstanding. The headline data used for measuring secondary school performance is published in the DfE publication "Secondary Accountability Measures" (November 2017). These include Attainment 8 and Progress 8 which measure performance in the best 8 subjects a pupil takes at GCSE with double weightings available for English and mathematics. In addition, there are measures for the proportion of pupils who enter the English Baccalaureate (EBACC - English, mathematics, science, a humanities subject and a foreign language) and who achieve passes in all these subjects. The final headline measure is for pupil destinations into education and employment.
- 3.54 Swindon's Attainment 8 outcome was 42.9 against a national average of 46.4 which ranked Swindon at 137 (out of 152) local authorities. Progress 8 outcomes were at minus 0.26 (against a target of 0) which ranked Swindon at 136<sup>th</sup> against other local authorities. The proportion of pupils taking the EBACC nationally dropped from 40% to 38% last year and in Swindon only 30% of pupils took the range of academic qualifications. Only 13% of Swindon pupils achieved the EBACC (with a strong pass in English and mathematics) against 21% nationally. These figures are clearly a cause for concern and improving secondary outcomes is a major focus for the Swindon Challenge initiative. In terms of Ofsted inspection gradings, 78% of secondary schools are now graded as good or better which is just below the national average.
- 3.55 Post 16 education is provided by six VI Forms and two FE colleges. There has also been an overall decline in A-level performance although all providers of post 16 education are graded by Ofsted as good or outstanding including Swindon's two FE colleges. The average points score per A-level entry (APS) is 25.65 against a national average of 31.13 which ranks Swindon at 146<sup>th</sup> in the country
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against other local authorities. Only 36% of young people move on to higher education (one of the lowest proportions in the country) against a national average of 51%. Many pupils with higher grades at GCSE attend other colleges outside Swindon such as Cirencester VI Form College (two thirds of pupils at this college are from Swindon).

#### School Exclusions

- 3.56 There was a considerable increase in the number of exclusions in both primary and particularly in the secondary phase in 2016/17 although there has been a sign of a reduction in incidents in the first two terms of 2017/18. The number of permanent exclusions (PEX) has given a particular cause for concern at secondary level putting a considerable strain on services to support young people excluded from school. Because of this and also because of changes to the organisation and funding of EOTAS, an Alternative Provision Working Group has been set up to review borough practice and protocols and to improve practice in agreement with schools.

#### Special Educational Needs and Disability (SEND)

- 3.57 The percentage of children with a statement or Education Health and Care plan (EHCP) remain higher than the average for our comparator group and England overall. Positive steps have led to significant improvements in reducing the time that children and young people and parents have to wait for their statutory assessment to be completed. An average of 93.3% of EHC plans have been issued within 20 weeks excluding exception cases compared to 69.4% last year. It is also pleasing that we have low numbers of pupils with SEND in out of Borough placements. Swindon is continuing to struggle to meet the demand for referrals and diagnosis for autistic spectrum disorders (ASD) and waiting times remain high. The Managing Challenging Behaviours Courses provided by Butterflies is supporting the reduction in waiting times (see paragraph 3.17).
- 3.58 There have been no permanent exclusions in special schools for a number of years. The number of FTEs last year was 152 (306 in 2015/16) involving 51 pupils (75 in 2015/16). The main reason for the reduction came from the impact of the work carried out at St Luke's School in the partnership with Beckmead School.
- 3.59 80% of children with SEND attend good or outstanding schools. However, overall the attainment of pupils with SEND continues to be much lower than their non-SEND peers, and improving pupil progress for SEN pupils is an important concern to be addressed by schools. It is pleasing that in 2016/17, the pupils with SEN reaching expected attainment standard in writing at KS2 doubled to 28% compared to 14% in the previous year (2015/16).



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- 3.60 Outcomes for children with learning difficulties on reaching adulthood remain a concern. Swindon has fewer people in paid employment and settled accommodation (living in their own home or with their family) compared to both our comparator group and the England average. The multi-agency Transitions Programme, which is now in phase 2, is continuing to make good progress in supporting improved outcomes. We are further developing Planning Live, a strength based approach to help young people in transition (potential users of Adult Social Care and Care Leavers) to work with professionals and people who support them to achieve their personal aspirations. In addition, Adult Social Care and Children's Social Care are working together to develop early joint commissioning of placements for young people in transition. A strategy for Supported Employment is being developed, which will set out how the Council aims to increase the number of Swindon's vulnerable residents (particularly people with special educational needs/disabilities and care leavers) who gain and retain paid employment in the open market or another meaningful employment related activity. The Strategy is being drafted by end March for consultation.
- 3.61 It is encouraging that we have now established a new Parent Carer Group to represent the important views of parents/carers who have children with SEND. This partnership will support and enable opportunities for joint working and co-production. Feedback from a local survey to gather the views of users of our Special Educational Needs and Disability Information, Advice and Support Service (SENDIASS) was very positive with 74% reporting their satisfaction was at the highest grade, and 89% rated satisfaction at the top two grades. The multi-agency management committee has prioritised to increase the use of technology (website and Charity Log) to further improve the service.

#### Troubled Families (TF)

- 3.62 The Government's Troubled Family Scheme launched in 2012 is now in phase 2. It aims to transform the way that the local authority and its partners work with families with complex and debilitating needs to ensure more effective, early intervention and better, sustainable, outcomes. There are two funding streams in TF programme: one linked to the identification of families; and secondly a system of payment by results for the claims we make once we have the evidence of successful delivery of the TF outcomes. Although the DCLG Swindon 'Spot Check' (which audited a sample of TF claims) confirmed our claims were valid, Swindon remains amongst the lowest in the South West for percentage of claims made. We are developing a TF service transformation plan for DCLG to provide assurance that the partnership has a robust recovery plan in place to address this under-performance. The focus is on:

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- 3.62.1 Adopting a more systematic approach so the principles and practice of TF working are fully embedded across the partnership engaging education, social care, early help and other “universal plus” services.
- 3.62.2 Improving systems and data collection to support practice and simplify the process for gathering evidence for TF outcomes.
- 3.62.3 Putting capacity in place to achieve our 5 year TF target.
- 3.62.4 Progressing the claims for the families we have successfully worked with to improve outcomes.
- 3.63 It is encouraging that since February 2018, Swindon's TF taskforce has identified 30 new claims each week. However, we recognise there is more work to do to fully embed TF across the partnership to deliver the required improvement.

#### Priorities for 2018/19

- 3.64 Whilst the care of our children looked after, safeguarding and child protection remains at the heart of what we do, the following are priorities also worth particular mention:
  - 3.64.1 The Children's Social Care Capacity and Demand Improvement programme (Priority 4) including more effective use of Early Help (Promises 27 and 28)
  - 3.64.2 Improving ICT systems to support efficient case recording and evidence practice (Priority 4)
  - 3.64.3 Foster Carer Recruitment and Retention to meet local demand (Promise 28)
  - 3.64.4 Swindon Challenge to improve educational attainment (Promise 17),

#### **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.

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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.

#### 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 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 - Congratulatory Letter from Nick Gibb, Minister of State for School Standards.
- 8.2 Appendix 2 – Glossary.