

To all Members of the

CHILDREN AND YOUNG PEOPLE OVERVIEW AND SCRUTINY PANEL

AGENDA

Notice is given that a Meeting of the above Panel
is to be held as follows:

VENUE: Council Chamber, Civic Office, Waterdale, Doncaster, DN1 3BU
DATE: Tuesday, 27th September, 2016
TIME: 10.00 am

Members of the public are welcome to attend

Items for Discussion:

1. Apologies for absence
2. To consider the extent, if any, to which the public and press are to be excluded from the meeting.
3. Declarations of Interest, if any.
4. Minutes of the Children and Young People Overview and Scrutiny meeting held on 11th July, 2016. *(Pages 1 - 8)*
5. Public Statements
(A period not exceeding 20 minutes for statements from up to 5 members of the public on matters within the Panel's remit, proposing action(s) which may be considered or contribute towards the future development of the Panel's work programme).
- A. Items where the Public and Press may not be excluded**
6. Performance Challenge of the Doncaster Children's Services Trust.
(Pages 9 - 30)

Jo Miller
Chief Executive

If you require any information on how to get to the meeting by Public Transport, please contact
(01709) 515151 – Calls at the local rate

Issued on: Monday, 19 September 2016

Scrutiny Officer: Caroline Martin
for this meeting: Senior Governance Officer

7. Doncaster Children's Services Trust Update - Overview of outcomes from recent external evaluation:-
 - LGA Peer Review
 - Ofsted Monitoring Visit. *(Pages 31 - 58)*
8. Overview of outcomes from recent external evaluation:- Review of Early Help - DfE Achieving for Children. *(Pages 59 - 72)*
9. Inspections Framework Special Educational Needs and/or disabilities SEND. *(Pages 73 - 78)*
10. Doncaster Education Attainment Summary 2016. *(Pages 79 - 100)*
11. Overview and Scrutiny Children and Young People's Panel Work Plan Report 2016/17. *(Pages 101 - 108)*

MEMBERSHIP OF THE CHILDREN AND YOUNG PEOPLE OVERVIEW AND SCRUTINY PANEL

Chair - Councillor Neil Gethin
Vice-Chair - Councillor Nigel Ball

Councillors Nick Allen, Jessie Credland, James Hart, Mark Houlbrook, Sue McGuinness, Andrea Robinson and Sue Wilkinson.

Invitees:

Education Co-optees*

John Hoare
Bernadette Nesbit

*Education Co-optees are invited to attend the meeting and vote on any Education functions which are the responsibility of the Authority's Executive. They may also participate in but not vote on other issues relating to Children and Young People.

Agenda Item 4.

DONCASTER METROPOLITAN BOROUGH COUNCIL

CHILDREN AND YOUNG PEOPLE OVERVIEW AND SCRUTINY PANEL

MONDAY, 11TH JULY, 2016

A MEETING of the CHILDREN AND YOUNG PEOPLE OVERVIEW AND SCRUTINY PANEL was held at the COUNCIL CHAMBER - CIVIC OFFICE, DONCASTER on MONDAY, 11TH JULY, 2016 at 10.30 AM

PRESENT:

Chair - Councillor Neil Gethin

Councillors Sue Wilkinson, James Hart, Jessie Credland, Andrea Robinson, Nick Allen and Mark Houlbrook

Co-optees – John Hoare and Bernadette Nesbit (Diocese of Hallam Roman Catholic Church)

ALSO IN ATTENDANCE:

Jo Moxon, Assistant Director Education

Leanne Hornsby, Head of Transformation and Business Support

Paul Thorpe, Head of Service Performance Improvement

Jacqui Wilson, Director Performance Quality and Innovation, Doncaster Children's Trust

James Thomas, Head of Performance and Business Intelligence, Doncaster Children's Trust

APOLOGIES:

Apologies for absence were received from Councillors Sue McGuinness and

		<u>ACTION</u>
1.	<u>APOLOGIES FOR ABSENCE</u> Apologies for absence were received from Councillor Sue McGuinness.	
2.	<u>TO CONSIDER THE EXTENT, IF ANY, TO WHICH THE PUBLIC AND PRESS ARE TO BE EXCLUDED FROM THE MEETING.</u>	
3.	<u>DECLARATIONS OF INTEREST, IF ANY.</u>	
	There were no declarations of interest.	

4.	<u>MINUTES OF THE MEETING HELD ON 29TH FEBRUARY, 2016</u>	
	<u>RESOLVED</u> that:- the minutes of the meeting held on 29 th February, 2016 be signed and agreed as a correct record.	
5.	<u>PUBLIC STATEMENTS</u>	
	There were no public statements.	
6.	<u>EDUCATION EXCELLENCE EVERYWHERE - THE EDUCATION WHITE PAPER 2016: A SUMMARY</u>	
	<p>The Panel considered a summary of the Education White Paper 2016 - Education Excellence Everywhere published by the DFE in March 2016. The Panel noted the wide range of proposals for changes across the Education landscape and implications for the Council and Borough's schools.</p> <p>Members noted the three key threads running through the paper in an increasingly school-led system:</p> <ol style="list-style-type: none"> 1. Concept of competition whereby the most successful MATs (multi-academy trusts) grow in size and the less successful are taken over by other MATs; 2. An ever-increasing level of autonomy delegated to schools, including the accreditation of teachers; and 3. The ever-increasing influence of regional school commissioners. <p>Regional Schools Commissioner (RSC) – covers 17 local authorities for the East Midlands, Yorkshire and Humber area. Concern was expressed by Members with regard to the RSC's influence and discussed a number of areas.</p> <p>It was noted that the RSC would be responsible for holding schools to account and held the same powers as those held by the local authority. Examples of the powers include, where a school is failing or causing concern the RSC can issue warning notices or put in place an interim Executive Board or partnership with another school. It was highlighted that where there was a dispute when resolving issues, the RSC has powers to overrule the Local Authority.</p> <p>It the Local Authority has concerns about any school then information can be forwarded to the RSC for consideration and action if required. It was noted that the RSC may not be aware of what was happening in schools, but Local Authorities do have an awareness and any issues of concern were gratefully received by the RSC.</p>	

It seemed that Local Authorities could have an advocacy position but it must be borne in mind that this benefits the children in Doncaster's schools and the approach maintained in Doncaster and relationship with the RSC was effective and working in practice.

The RSC held regular meetings with the Local Authority with open dialogue but ensuring that Doncaster's schools were a priority for the Council with their intervention being welcomed with underachieving Academies.

It was noted that Local Authorities would still hold responsibility for Special Educational Needs, ensuring their voice was heard.

All Schools moving to Acadamisation – All schools were consulted in January, 2016 to outlining future options for our schools. Each school has declared its intentions, with some wishing to stay with the Local Authority and others identifying that they wish to join other organisations. It was noted that the schools had been very open thinking about their futures either with or without sponsors and wished to work through the issues to ensure the correct decision was made for the school.

Local Authority becoming a MAT – It was noted that a successful local authority could become a MAT sponsor. Currently it was not clear what "a successful local authority" would be classed as but if Doncaster was to be in this position it would need to look at whether being a MAT would be advantageous to Doncaster's schools.

Members stressed that schools could become divorced from the Local Authority and in turn their communities, particularly if Parent Governors were removed. Therefore, a strong Governance role to ensure that these relationships were not lost was required.

Teaching School Alliance – The organisation had been working with the Local Authority for some time and was a very valuable partnership that had been developed. The alliance has been very successful, covering all phases of education.

It was noted that the role of a Headteacher would change dramatically in the coming years with the requirement to grow into Executive roles, to lead more than teach and they would be required to oversee administration, legal and finance of much larger organisations. Some Headteachers were not yet in a position to undertake such leadership therefore training and development of system leaders was essential and Local Authorities are preparing for this requirement. If there are Headteachers that the Local Authority recognise as being capable as undertaking such a role they would be targeted for training to ensure local continuation.

Members stressed that the Teaching Alliance was increasingly

	<p>important and pleased to note the support provided by the Council, including the passport funding to help with succession planning ensuring more good teachers were accredited ensuring schools were constantly developing. Past Scrutiny reviews had shown that more support for Headteachers and newly qualified teachers was required and noted that in the last 5 years there had been 40% new Headteachers with some new to the Borough. Support for new Headteachers was provided through Central Government funding but they are also provided with a first year mentor and training course that was Doncaster based. Partners in learning also assist new Headteachers with Governance support.</p> <p>It was noted that Doncaster had three national accredited Headteachers who were available to support other schools and it was the Council’s intention to ensure the number continued to expand.</p> <p>Equalities – It was noted that education outcomes for children and young people in Doncaster would continue to be supported equally whether they be white working class boys or from minority ethnic groups, which was supported by the White Paper.</p> <p>Interface between Headteachers and the Children’s Trust –It was acknowledged that Headteachers were very active in highlighting issues of concern to the Authority or partner organisations and the Panel was assured that there were many local collaboratives where the Children’s Trust were partners, for example, the Children’s Safeguarding Board where information could be shared. It was noted however, that the relationship between schools and the Children’s Trust needed to grow bearing in mind the lack of resource now available in local authorities. There were improvements being made but further work was required.</p> <p>Recruitment and Retention – Recruitment and retention of high quality teaching staff was proving to be more difficult and early fall out from the profession was causing concern. It was stressed that Doncaster would have to try new methods of attraction, like other local authorities.</p> <p>RESOLVED: That the report be received and discussion noted.</p>	
7.	<p><u>QUARTERLY PERFORMANCE & PROGRESS AGAINST OFSTED ACTION PLAN - TRUST UPDATE REPORT.</u></p>	
	<p>To accompany the report, the Head of Performance and Business Intelligence from Doncaster Childrens Trust provided a detailed outline of the Contract performance monitoring arrangements and the Panel addressed areas detailed below.</p> <p>Case File Audits – It was explained that the Childrens Trust held concerns with regard to this therefore so undertook additional work</p>	

addressing quality of case work, how much is the child's voice was heard ensuring a positive difference was being made to the child's life. Members noted that the Trust had struggled with the long standing culture of lack of compliance with regard to recording all details on case work files but were now working with the Auditors to address the situation. A high bar had been set and it had been found that the quality of work was improving with the last 50 cases improving significantly. The LGA had stated that all children were safe without exception.

Following concern expressed by Members it was acknowledge that it was imperative for all files to be updated with correct information and capture key events in a child's life, particularly if the case worker was away from work for a long period, to ensure as much detail is available about a child, otherwise the latest position could revert to square one. It was noted that if a member of staff was absent from work, the case files became the responsibility of the team manager to ensure they were supported correctly.

Agency Rates – It was explained that there had been an active recruitment campaign and the need to remain competitive to attract the right people for positions but it was noted that the turnover rate was low and sickness was at its lowest ever. It was stressed that staff should not be overloaded with cases. It was also accepted that due to the nature of the work, there would always be a need to employ agency staff.

NEET Figures – It was confirmed that Job Centre Plus had not been commissioned to provide provision for young people in care, however, it was reported that partners had submitted a large bid to the "Innovation Programme for Children in Care" to equip them with the appropriate employment skills required. There was a real enthusiasm and engagement from partners and it was recognised that Doncaster was a good place for young people at the present time with £4m of investment over 3 years to strength the virtual school and holding providers to account.

It was stressed that if the bid was not successful, there were other targeted activities being undertaken through the Youth Service, including with youth crime prevention. The Panel required if details of training providers and the number of care leavers engaged in training be provided before the next meeting.

Suitable Accommodation – In response to Members expressing concern with regard to the percentage showing red of children in care aged 19 to 21 in suitable accommodation, it was explained that this relates to those young people that case workers were currently in contact with. The indicator was assessed for 13 weeks around the young persons 16th birthday. Some young people could be in the custody suite and this was questioned whether this was suitable accommodation, as the young person should not be in this position in

	<p>the first place.</p> <p><u>RESOLVED:</u> that the discussion be noted.</p>	
8.	<p><u>ACCOUNTABILITY ARRANGEMENTS FOR THE DONCASTER CHILDREN'S SERVICES TRUST</u></p>	
	<p>The Panel considered a report relating to its current arrangements for holding the Childrens Trust to account. Practice had developed whereby Members currently considered quarterly performance reports directly from the Trust, however, this does not fully meet the contractual expectations to effectively hold to account both the Council and the Trust. The Panel needs to be supported to hold the Council to account for its contract management of the Trust.</p> <p>It was noted that a number of monthly and quarterly meetings between the Trust and the Council are undertaken to assure continuous improvement including Finance and Performance.</p> <p>Members supported the need to move towards a more rounded approach which challenged both the Council and the Trust, but were keen to retain some of the important performance information measures when future reports are presented, for their consideration.</p> <p>Following discussion it was noted that the Trust is accountable to both the Council and the Secretary of State, and there needed to be a system where work was not duplicated and more focused. It was therefore supported that a split screen approach report in two phases be provided to future meetings. The first phase would hold the Council to account for its monitoring of the Trust against the service delivery contract and the second phase would provide an invite to the Trust to respond to the Council's report and the specific performance issues which the Council report had raised.</p> <p><u>RESOLVED:</u> that a 'split screen' approach report including key performance indicators for future meetings, be provided.</p>	
9.	<p><u>CHILDREN AND YOUNG PEOPLE OVERVIEW AND SCRUTINY PANEL - WORK PLAN UPDATE 2016/17</u></p>	
	<p>The Panel considered the work plan for the 2016/17 year and noted the Mayoral response to the review into children with disabilities during 2015/16.</p> <p>The Senior Governance Officer reminded Members of the Mental Health joint meeting with the Health and Adult Social Care Scrutiny Panel on 25th January, and to ensure that it was detailed in their diaries.</p> <p>The Chair outlined that he would be attending future Youth Council</p>	

	meetings and would report back to the Panel. <u>RESOLVED:</u> That the report be noted.	
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27th September, 2016

**To the Chair and Members of the
CHILDREN AND YOUNG PEOPLE'S OVERVIEW AND SCRUTINY PANEL**

Performance Challenge of the Doncaster Children's Services Trust

Relevant Cabinet Member(s)	Wards Affected	Key Decision
Councillor Nuala Fennelly Cabinet Member for Children, Young People and Schools	All	None

EXECUTIVE SUMMARY

1. This report provides a review and analysis of the performance challenge carried out by the Director of Learning and Opportunities of the Doncaster Children's Services Trust (the 'Trust') in Quarter 1 of 2016/17 arising from the challenge meetings held between both parties.

EXEMPT INFORMATION

2. Not exempt.

RECOMMENDATIONS

3. The Panel is asked to:
 - i) Note and evaluate the headline performance information and the resultant analysis;
 - ii) Question the Director of Learning, Opportunities and Skills as to the challenge which he has made of this performance and the implications this has, or may have, for the children and young people of Doncaster;
 - iii) Use the information in this report, the evidence of the Director of learning, Opportunities and Skills and the response of the Chief Executive of the Trust to the questions posed by the Scrutiny panel in order to draw conclusions as to the potential impact arising from performance by the Trust in its improvement journey;
 - iv) Make requests for follow up evidence in order to provide further assurance.

WHAT DOES THIS MEAN FOR THE CITIZENS OF DONCASTER?

4. The Overview and Scrutiny function has the potential to impact upon all of the Council's key objectives by holding decision makers to account, reviewing performance and developing policy. This is achieved through making robust recommendations, monitoring performance of Council and external partners and reviewing issues outside the remit of the Council that have an impact on the residents of the borough.

BACKGROUND AND CURRENT POSITION

5. The current arrangements for holding the Trust to account are set out in the service delivery contract between the Council and the Trust, which states:-

... 'The Council's Director for Children's Services (DCS) will report to the Council's scrutiny committee four times per annum each contract year in respect of the Trust's performance of its obligations under this agreement (including the provision of services).... Where required by the DCS the Trust's Chief Executive (or his nominee) shall attend such scrutiny committee to respond to any requests for additional information made by the scrutiny committee in respect of the Trust's performance of its obligations under this agreement (including the provision of the services)'

6. The Trust is contracted to deliver services as specified within the contract with the Council. The current arrangements by which the Trust is held to account are extensive and far reaching and were described in some detail in the report to the panel of 11th July, 2016 and in essence take place through monthly, quarterly and annual reviews at operational, middle and senior management and at senior non – executive / senior political levels of both organisations.
7. Following the approval of the report to the scrutiny panel of 11th July, 2016 the current arrangements for the scrutiny panel's monitoring of the Trust have been sharpened and revised to avoid duplication with the monitoring arrangements which are already in place and referenced above.
8. At the July meeting, the panel agreed that a 'split screen' approach be adopted – by this arrangement there is a two phased approach. In the first phase, the Council is held to account for its monitoring of the Trust against the service delivery contract. Specifically, this means that the Council submits a report (this report) for the panel to review and question the DCS or his representatives. The second stage of this split screen is that the Trust responds to the Council's report and the specific performance issues which this has raised. (Item on your agenda)
9. The overall aim of this refined approach is that:-
- The panel will achieve a much more rounded, but focused perspective, of Trust performance;
 - The obligations within the contract will be properly discharged;
 - The scrutiny panel will be able to 'add value' to the accountability process which will no longer not duplicate, or overlap, with existing accountability arrangements;
 - The panel will more clearly be able to identify areas of good performance and underperformance, the reasons for any under performance and request 'exception' or 'deep dive' reports, so as to become better appraised of the performance issues facing the Trust and thereby make recommendations to drive forward improvement.

PERFORMANCE CHALLENGE OF THE DONCASTER CHILDREN'S SERVICES TRUST

10. At the quarterly and monthly challenge meetings the Council holds the Trust to account for its performance during the relevant period. The review of that

performance highlights areas of good performance, as well as those which represent areas of concern, or potential concern.

There are 18 performance indicators which form part of the contractual measures within the service delivery contract.

There are a further suite of 46 'volumetric' measures which are not identified contractual measures, or measures of performance and which do not form part of the contractual assessment of the Trust, but which nonetheless provide important context.

1.1. The table below summarises the number of contract measures on target, within tolerance and outside tolerance as at the end of Quarter 1 2016/17.

	Quarter 1 2016/17			
	Outside tolerance	Inside tolerance	On or better than target	No target specified
Social Care Pathway	3		4	
Children in Care	2	1	2	
Youth Offending Services		1	1	
Workforce (one additional measure yet to report due to unavailability of national data)	1	1		1

The basket of performance measures is jointly reviewed by the Council and the Trust as part of the annual contract review in order to ensure currency and relevance against important stages within the child's journey and where it is known that there are current pressures within that system.

PERFORMANCE HIGHLIGHTS

11. The format of presentation of performance information consists of a summary of the Council's headline assessment of Trust performance by exception and is shown below in paragraphs 11.1 and 11.2 with indicators selected by the Council where there are areas of good and improving performance and areas of concern and potential concern, respectively.

The format adopted is similar to that of the Council's corporate report to the Overview and Scrutiny Management Committee and is shown at appendix 1 and appendix 2.

Each appendix consists of two elements:-

- An Infographic overview which provides an immediately accessible illustration of the areas of performance which are good (illustrated in green) and those which are of concern or potential concern (illustrated in red) and which cross reference by the index number to those itemised in the paragraph 11. and 11.2 and the tables in Appendix 1 and 2 respectively.
- Tables which depict how the challenge takes place for each selected performance measure in a two stage process and provides the content of that challenge which is summarised for the assistance of panel members.

The first appendix depicts performance indicators where the Council has identified that the Trust is performing above target and / or where performance has improved and the Trust's response.

The second appendix illustrates where the Council has identified specific performance indicators which are below target / outside tolerance, or expectations and as such are of concern, or potential concern, because of the impact or potential impact of below - target performance and the explanation provided by the Trust.

11.1 Areas of Good and Improving Performance – Headline conclusions drawn by the Council:

- **A1: Re-referrals in the last 12 months** - a tiny increase mainly as the Trust advises due to increases across all Agencies. No issue of premature 'stepping down' the Council was advised. Performance remains good and is at the national average and has consistently been so, since Q1 2015/16 compared with historical performance. Needs monitoring though to check impact of high demand levels.
- **A4: Child protection visits in timescale** - an important barometer for safeguarding. Though Ofsted noted some delay in the timing of these visits
- **A09: Child Subject CP Plan (second subsequent time)** - This measure is easily skewed by small cohorts. Performance though is good.
- **A06: Child Subject CP Plan (2yrs or more)** - The Trust has provided welcome reassurance to the Council that it is carefully monitoring these cases.
- **B9: Long term stability of placements** - The improved performance since the 2015 outturn is above target for the first time. Performance in the preceding 3 quarters has been at the national average and is now above the national average (68%) which represents a very good recovery.
- **B13: Care leavers in suitable accommodation** - A continued and welcome improvement in performance which is now above the national average.
- **F03: Youth offending custody rates** - Early indications are positive but as the Trust has said it is too early to draw significant conclusions at this stage.

11.2 Areas of concern / potential concern – headline conclusions drawn by the Council:

- **A2: Timeliness of single assessments** - Assessment timeliness is indicative of demand pressures / caseloads. The Trust has to balance efficiency of its process with assurance as to safety and is mindful of this. The Council has received assurance that the Trust is addressing this issue but the Council is maintaining a monitoring brief and whilst performance still remains above national average, the Council will nonetheless continue to challenge this performance, should it fail to show sustained improvement.
- **A3: Case file audits** - Welcome improvement in cases now classified as 'good.' Inadequate cases have remained stubborn to shift. However, in July 2016 a welcome breakthrough occurred, 'Inadequate' cases reduced to 10% and there were increases in % of good and outstanding audits. The caution is that these are only one month's figures. The Council will continue to monitor.
- **A8: Children in need open & current plan** - The Council accepts that the Trust is trying to ensure the correct classification of files. This is a very important indicator and the Council will retain a 'monitoring brief' to be assured that quality of recording remains the issue and that no CIN are improperly omitted from plans

- **B13: Care leavers in EET** - This is an important indicator in meeting Ofsted improvement requirements and for the Council in its role as Corporate parent. Performance is being tracked by both the Trust and the Council to meet with improvement plan requirements. Nationally, care leavers struggle to achieve compared with the general cohort and therefore need greater support mechanisms into further education training and employment. This measure will continue to be monitored.
- **C14: Frontline FTE posts covered by agency staff** - Agency staff add to the cost base of the operation and may not be good for employment stability and continuity thereby introducing an element of risk. There will always be a need for a number of Agency staff but numbers need to be relatively low which they were until Q1 – acknowledging the impact of the competitive market, this is a measure which the Council is keeping under observation.
- **E1: Contacts in Social Care** - A high figure is not necessarily indicative of poor performance and if children need to be referred to social care then that is good performance. The problem here is that a significant number of the referrals are known to be inappropriate. However, a proportion of the increase over recent months is attributable to (commendably) more accurate recording. High demand pressures are unhealthy for the work of social work teams and in ‘clogging up’ the machinery. Contacts below threshold and those which could have gone to the early Help hub are deemed inappropriate. The LGA peer review highlighted this concern, but recognised that these are whole systems issues, not exclusively in the gift of the Trust, which means partners, have to be challenged to apply thresholds consistently. The Council has requested the report of the business analyst’s investigation.
- **E20-22: Up to date assessments** - The Trust response is valid but performance does need to improve. Trust to feedback on RDash action. Acknowledged problem with dental checks which is not unique to Doncaster but there needs to be earlier tracking. Management of PEPs is the responsibility of the Council’s Virtual head in which the social worker employed by the Trust plays a part. There is a disconnect between paper and electronic systems - an ICT solution has been identified. An ICT Portal which will address the systemic weakness is being created which will be trialled in December 2016 and implemented in January 2017 and which should address in large part the problem of return rates, timeliness and quality.

12. IMPACT ON COUNCIL’S KEY OBJECTIVES

Outcomes	Implications
<p>All people in Doncaster benefit from a thriving and resilient economy:</p> <ul style="list-style-type: none"> • Mayoral priority – creating jobs and Housing • Mayoral priority: Be a strong voice for our veterans • Mayoral priority: protecting Doncaster’s vital services 	<p>The Council and the Trust as major partners in the Children and Families Partnership Board share the Children’s plan outcome that all children should achieve their potential – in removing barriers and developing good quality service delivery children will be able to access the benefits of a thriving economy and will themselves be participants in creating and sustaining the strength of the economy.</p>
<p>People live safe, healthy, active and independent lives:</p> <ul style="list-style-type: none"> • Mayoral priority: Safeguarding our communities • Mayoral priority: Bringing down the cost of living 	<p>Ensuring children and young people are free and feel from harm are key ambitions of both the Council and the Trust.</p>

<p>People in Doncaster benefit from a high quality built and natural environment:</p> <ul style="list-style-type: none"> • Mayoral priority: creating jobs and Housing • Mayoral priority: Safeguarding our communities • Mayoral priority: bringing down the cost of living 	<p>Delivering against the service delivery contract between the Council and the Trust has clear implications for safeguarding communities, in reducing risk and exposure of risk to children; improved early help and thus better outcomes for families.</p>
<p>Working with our partners we will provide strong leadership and governance</p>	<p>Ofsted, in its inspection report commented favourably on the relationship and governance arrangements between the Council and the Trust, recognising that formal arrangements for monitoring and challenge exceed the requirements set out in the contract between the two organisations.</p>

RISKS AND ASSUMPTIONS

13. Adoption of the split screen approach should further reduce the risk of underperformance leading to a material detriment for children young people and families in the Borough.

LEGAL IMPLICATIONS

14. Adoption of the split screen approach enables the Council and the Trust to discharge their respective obligations under the terms of the service delivery contract between the two parties.

Adoption of the split screen enables the scrutiny panel to more effectively meet its remit to consider matters in the public interest.

FINANCIAL IMPLICATIONS

15. There are no financial implications directly arising from this report.

EQUALITY IMPLICATIONS

16. There are no equality implications directly arising from this report.

CONSULTATION

17. The Chief Executive of the Trust has been consulted on the content of this report.

ATTACHMENTS

18. 'Infographic' depiction and summary record of performance challenge of highlighted performance indicators – Appendices 1 and 2
Doncaster Children's Services Trust – Quarter 1 report – Appendix 3

BACKGROUND PAPERS

Service delivery contract between Doncaster Council and Doncaster Children's Services Trust

Report to the Director of Learning, Opportunities and Skills to the Children and Young People's Scrutiny Panel – 11th July, 2016

CONTACT OFFICER AND REPORT AUTHOR

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Damian Allen
Director, Learning Opportunities and Skills (DCS)

Areas of Good and Improving Performance

AREAS PERFORMING WELL

A1 Repeat Referrals into Social Care within 12 months



A4 Child Protection Visits within Timescale



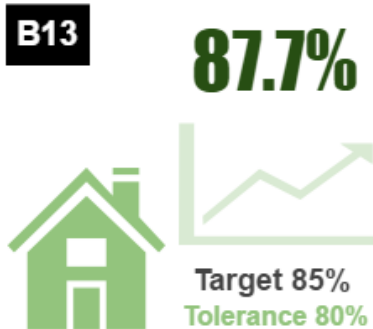
A06 Children on a Child Protection Plan 2 Years or More



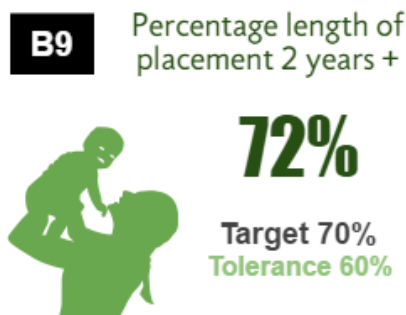
A09 Children Become Subject of Child Protection Plan For the Second or Subsequent Time



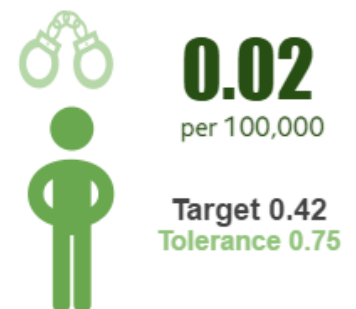
B13 Care Leavers (19–21 yrs) in Suitable Accommodation



B9 Long Term Stability: Children in Care



F03 Youth Offending: Custody Rates




Measure	DMBC Comment	Trust Response
<p>A1 Re-referrals in the last 12 months</p> <p>Q1 = 24% July 2016 24%</p> <p>Target: 24% Tolerance: 28%</p>	<p>An important PI to demonstrate robustness of process. There can be genuine requirements for a re-referral and the Trust stated that it was analysing this information, but we need to be assured as to impact of demand pressures and that there has been no premature 'stepping down'.</p> <p><i>How is increased demand impacting on this PI?</i></p> <p><i>Any issues with premature de-planning?</i></p>	<p>Re-referrals have been better than target for the last five quarters, showing sustained performance in this area. There has been a slight increase in the re-referral rate in May and June, however, this remains within target range. The increased referral rate coincides with an increase in overall referrals to the Trust with 490 recorded in June compared to 350 in March. Additional management of the Front Door has been put in place to manage demand and work with partners to reduce referrals for social care. The reorganisation of MASH so that it processes all referrals will also mean a multi-agency approach to triage which should impact on overall referral rate.</p> <p><i>Need to improve the interface between social care and the de-escalation to Early Help. At least 50% referrals go to NFA, need to look further into this. Need to manage our partners better with regards to referrals to social care – so they can triage themselves.</i></p>
<p>A4 Child Protection Visits in Timescale, Child seen by Social Worker</p> <p>Q1 = 87% July = 87% Target: 80% Tolerance: 75%</p>	<p>New measure – developed from Ofsted inspection performance within range but needs careful monitoring. Important measure for signs of safety and continuity of care. Need to link with CIN and CiC visits for rounded view.</p>	<p>Remains above target due to daily monitoring and a focused effort by team managers to keep on top of key casework timescales. The most recent month's data has shown an improving picture. Visits for CIC and CIN are also monitored in a similar way.</p>
<p>A09 Children Subject CP Plan Second or Subsequent Time within a 2 year period</p> <p>Q1 = 8% July = 0% Target: 16% Tolerance: 20%</p>	<p>This measure has been redefined within the contract from the national PI (second or subsequent time ever) to a local measure which is more sensitive and more reflective of its fundamental objective. Performance at Q4 and Q1 is better than target. Sibling groups can inflate this figure. Analysis needs to be satisfied that children are not being 'de-planned' prematurely. There may otherwise be valid reasons for becoming subject to a CPP but less so within a short period.</p>	<p>Performance remains above target. The number of children subject to a CPP shows some variability month by month but overall in this quarter is within target. Of the 8 counted in June, 6 of them were from a 2 sibling groups of 3 children.</p>
<p>A06 Children on CP Plan for 2 Years or More</p> <p>Q1 = 2.1% July = 2.1% Target: 3% Tolerance: 5%</p>	<p>An important measure of sterility (drift and delay) in the system where children may not be receiving proper oversight. However, there can be valid reason why a child remains on a plan</p>	<p>Remains below target with a stable trend. The re-assessment of all cases open for greater than 6 months is providing some immediate scrutiny and management oversight to current casework and addressing any previous issues of drift and delay</p>

<p>B9 Long Term Stability of CiC: Placements 2 Years or More</p> <p>Q1 = 72% July = 74% Target: 70% Tolerance: 60%</p>	<p>Another important indicator of stability, which is essential for this vulnerable cohort. The trust is closely monitoring. Placement policy is an important feature of stability need to review across the range for best results in care and financial terms. Placement and Sufficiency strategy is awaited and is an important strategic document for this measure and other CiC measures. 2015 annual outturn performance (56%) was bottom quartile nationally and bottom in regional rankings.</p>	<p>Continues to take an upward trajectory and has now been above target level for three months in a row. The Trust's longer term ambition to rely less upon out of Borough placements will bring some long term placements to a close, providing it is in the child's best interests. To assist this teams are reviewing placements on a case by case basis.</p>
<p>B13 Care Leavers in Suitable Accommodation (aged 19 – 21)</p> <p>Q1 = 87.7% July = 85% Target: 85% Tolerance: 80%</p>	<p>Pleasing quarterly reported figure. Best practice suggests that custody and 'sofa surfing' should be excluded from this figure. At last annual outturn (2015) Doncaster performance (83%) was middle ranking nationally, but relatively low in the region, but noting lack of a commonly agreed definition.</p>	<p>Performance has gradually improved over a number of months to reach above target in this quarter. Improvements in practice and recording have contributed to the positive trajectory. The term "suitable" relies on local interpretation (for example some LA's will determine Custody as suitable whilst we do not), making comparison challenging. At the end of Quarter 1, 4 young people were recorded as being in custody which will have contributed to this figure</p>
<p>F03 Youth Offending Service Custody Rates</p> <p>Q1 = 0.02 per 100,00 July = 0.07 per 100,000</p> <p>Target: 0.42 Tolerance: 0.75</p>	<p>This is a new measure established in Q4 which is susceptible to small cohorts from what is a large national cohort.</p>	<p>Data now available from the YJMIS system, which is the national youth justice database. We will need several months of data to moderate this measure. Monthly data shows the measure is above target. There is a lag in data for quarterly performance</p>

Areas of concern / potential Concern

AREAS FOR IMPROVEMENT

A2 **Timeliness Single Assessments**




Increased Case loads

88%

Target 92%
Tolerance 90%


A3 **Case File Audits - Requires Improvement or Better**



82% Target 95%
Tolerance 90%

21% Inadequate 17% Good
62% Improvement 0% Outstanding

A8 **Children in Need with Open and Current Plan**



87%

Target 95%
Tolerance 90%

B13 **Care Leavers in Employment, Education & Training**



39.3%

Target 45%
Tolerance 40%

Ofsted Improvement Plan Action

C14 **Agency Staff: FTE Posts**



15%

Target 8%
Tolerance 12%

E1 **Contacts into Social Care**

Demand Pressures



1843

546 at Transfer

E20-22 **Children in Care: With Up-to-date Assessments**



Health Assessments

Dental Checks



Personal Education Plans

Measure & performance	DMBC Comment	DCST Response
<p>A2 Timeliness of Single Assessments</p> <p>Q 1 = 88% July = 88%</p> <p>Target: 92% Tolerance:90%</p>	<p>Performance has shown a slight downward trend, below tolerance for the Q4 and Q1. There continues to be a number of assessments open and overdue the 45 days threshold.</p> <p>The 2015 Doncaster annual outturn was good - 91.7% (upper quartile). National average = 81.5%.</p> <p>Noted that the no of contacts proceeding to referrals is increasing in absolute and proportionate (conversion) terms which is good news.</p> <p><i>What measures are being put in place to reduce variability?</i></p> <p><i>Is this reflective of workload pressures on teams given high demands?</i></p> <p><i>Increase in Children in Need?</i></p> <p><i>Where is the decision made to proceed to NFA?</i></p>	<p>This measure has been out of tolerance for the last two quarters. This is due in part to an additional expectation that all cases open greater than 6 months are reassessed using a single assessment form, thus increasing demand and workload. Most recent data shows an improving picture with an end of June figure of 91%. An additional 5% are within 50 days. This figure is well above the national average. The increase in overall referrals will also be impacting on completion rates.</p> <p><i>Timeliness reports are shared between teams on a weekly basis and target work is happening to improve performance.</i></p> <p><i>Daily challenge meetings take place.</i></p> <p><i>ACPC, geographical hotspots eg South. Looking to move resources to try to meet need. Systematically need to improve the process to make it quicker. Temporary caseworkers have been brought-in on an interim basis to manage caseloads.</i></p> <p><i>Have moved from Red to Amber. Performance remains above national average.</i></p> <p><i>Workers are using full 45 days to complete so focus is with reducing time taken to declare cases 'no further action' to free up capacity to address more complex cases. Ambitious targets set at the annual review. Caseloads have increased – currently looking at those going to No Further Action. Looking at moving resources to meet.. .Issue of threshold application is being challenged. And addressing 'no further action'</i></p> <p><i>Currently undertaking a deep dive, how we process assessments are we missing opportunities to step down. There is work to be done to bring caseloads down through better management of those that are ready to close.</i></p> <p><i>Doncaster is a high referral locality and has been risk adverse. Have better intelligence and performance</i></p>

		<p><i>management in place so able to challenge better. 97% of referrals led to assessment. Daily threshold challenge meeting to review decisions made and test whether should have been passed to field or dealt with at front door. Have 24hrs to respond to a referral, if suggested NFA looking at how many were within 10 days etc, intelligence not available yet to see if made a difference.</i></p>
<p>A3 Case File Audits rated as Requires Improvement or better</p> <p>Q1 = 82% July = 90%</p> <p>Target: 95% Tolerance:90%</p>	<p>The Trust has set a commendably high threshold which the LGA review recognised and which is reflected to some extent in the performance. What was also recognised is that there is a need to address quality of files, but improving recording remains the issue. The sample size is small which means some variability can be expected.</p> <p><i>Is this about quality of practice, but about case-recording?</i></p> <p><i>What do we know about these 'inadequate' cases?</i></p>	<p>Performance remains volatile for this measure, due to the relatively low casefile sample (50 cases). Whilst recent months have shown an improvement in the percentage graded good. Performance was 87% for the final month of the quarter. Analysis of "inadequate" casefiles is now showing that compliance is improving, so the Trust can now move to addressing issues of quality.</p> <p><i>Headline figures show improvement. There has been a shift in those graded inadequate to Requires Improvement and an increase in Good and Outstanding.</i></p> <p><i>Nature of inadequate used to be about compliance, now analysing, so rather than failing due to timeliness it is about the quality of the case recording and practice improvement.</i></p>
<p>A8 Children in Need with Open & Current Plan</p> <p>Q1 & July 2016 = 87%</p> <p>Target: 95% Tolerance:90%</p>	<p>This is a new measure established after concerns identified in the Ofsted inspection - there is an overall expectation that all CIN should have a plan. Performance needs to improve. The Trust is suggesting that this is a recording and categorisation issue with cleansing of files and that performance will improve when cases have been properly classified - a number are draft plans which are not counted until the Trust is satisfied that these can be counted as proper plans, there are also a number which have not been closed correctly.</p> <p><i>How is work progressing to close plans properly and finalise draft plans?</i></p> <p><i>Is performance reflective of increased numbers of CIN?</i></p>	<p>This is a new measure, and the target is set as a new expectation to staff. Caseworkers have been tasked with reassessing all cases open for 6 months or longer, which will in turn trigger revisions or new plans. A number of cases will have an open draft plan that will not be counted until it is made final, including these drafts the figure is 91%. A dip sample audit of open cases has shown that there are a number of open referrals that are ready for closure but the final steps have not been taken, so the case remains open. Further work, as part of a detailed analysis of caseloads, is planned for Quarter 2 which should address this issue.</p> <p><i>Reassessing a lot of cases, therefore large number currently in draft with the expectation that this will need to be rewritten. Cases closed with NFA will be the focus to be finalised.</i></p> <p><i>99% of those without a plan are for appropriate reasons. HOS writes a</i></p>

		<p><i>monthly SEF and dip samples those without and reasons why – the vast majority are due to step changes.</i></p> <p><i>Important to review in order to reflect true picture – procedural issue.</i></p>
<p>B13 Care Leavers in Employment, Education and Training (age 19-21)</p> <p>Q1 = 39.3% July 2016 = 35%</p> <p>Target: 45% Tolerance:40%</p>	<p>This indicator is acknowledged to be a challenging one which is reflected in performance figures across the region. To be compliant 'Meaningful contact' must be maintained which can be a challenge. A recognised need to progress employment opportunities and qualifications locally and Ofsted improvement action is to strengthen pathways for vulnerable children. However, annual outturn performance (2015) was 42% which was in the lowest national and regional quartiles</p> <p><i>How are initiatives progressing?</i></p>	<p>Performance is moving in an improved trajectory as recording of practice has become embedded in teams. Further work to align data with CCIS teams will further improve the recording across disparate systems</p> <p><i>Working with Head of Service to set short-term strategies to address and uplift performance. One programme 'is Keys to my future' to support the transition from being in care to adult entry into employment – designed to bridge the gap. Setting up pathways to and a SLA to support care leavers. A subsequent report will set out the plan of action.</i></p>
<p>C14 FTE posts covered by Agency Staff</p> <p>Q1 = 15% July = 15%</p> <p>Target: 8% Tolerance: 12%</p>	<p>Performance has deteriorated and this has been raised with the Trust. Pressures from competing providers in a competitive market are driving this trend as well as rising levels of demand. Turnover and sickness levels however, remain good.</p> <p><i>Noted that this is a highly competitive local market – what other recruitment initiatives are being trialled to mitigate the increased reliance on Agency Staff?</i></p>	<p>A number of interviews have taken place and conversions from agency staff to appoint permanent Social Workers that will improve performance in this area. Over the last quarter agency staff has reduced by 9 FTE despite there being a need to meet increased demand and the need for agency staff to pick this up. We are recruiting some additional temp resource to meet current increased demand.</p> <p><i>Analysis undertaken comparing against other LA's. Looking at funding pay deals for conversion of agency to permanent status. Recognise could target better e.g. LA's that are paying below Doncaster. Creating a Recruitment Strategy comparing the difference between level of responsibility and grade. Need to celebrate and promote the benefits of working in Doncaster.</i></p>
<p>E1 Number of contacts into social care (volumetric measure)</p> <p>Q1 average =1843 July = 1665</p>	<p>Contacts have recently stabilised albeit at a high level (almost 3x national average) Reasons are well rehearsed. Over 40% are understood to be requests for Information Advice & Guidance; Inappropriate referrals which should have gone to early help now total around 1%</p> <p><i>What is the latest position to address 'risk adverse' contacts – where Agencies refer to social care inappropriately?</i></p>	<p><i>Challenge is Police protocol – any domestic call-out incidence where there is a child involved will result in</i></p>

	<p><i>What is the Analyst doing?</i></p> <p><i>In terms of QPM strongly recommend this evidence of analysis is shared. Assurance, how demand is managed, evidence on MASH arrangements, the pathway and processes, system of demand management, report to answer the questions and evidence and provide assurance.</i></p>	<p><i>a referral to social care and the Trust are duty bound to respond to the referral. New front door arrangements are in place.</i></p> <p><i>The Trust has engaged a Business analyst who is looking undertaking analysis of pathways and procedures, working closely with Head of service for the social care front door - -routes in, phone calls, how to organise triage. An Action Plan will be developed as a result.</i></p>
<p>E20-22</p> <p>(Volumetric measures)</p> <p>Children in Care with up to date:</p> <p>health assessment Q1 =85%</p> <p>dental checks Q1 =74%</p> <p>Up to date Personal Education Plans Q1 =65%</p>	<p>Performance remains challenging</p> <p><i>Figures remain challenging and disappointing. What progress is being made to improve these figures and processes?</i></p> <p><i>Dental checks – there is an acknowledged problem with older children registering with dentists;</i></p> <p><i>PEPs Most recent figures – August 2016 show return to established performance (82%) this measure is affected by seasonal factors and practitioners diverted to meet priority tasks prior to the monitoring visit. 2015 average was 90%.</i></p>	<p><i>Heath assessments:- Challenge has been the ability to access timely paediatric support to refer quickly. Children placed Out of area a challenge as have less influence and control. GPs not sufficiently qualified to undertake assessments to alleviate the pressure. There is need to tighten the referral process, refer to RDASH, challenge to ensure completed quickly.</i></p> <p><i>Dental Check: be forward thinking about registering children with a dentist to ensure no delays</i></p> <p><i>PEP: is on liquid logic and needs to be completed by social worker there is a recognised problem with completion by three parties – social worker; teacher and virtual head which can introduce delay and affect quality need to find solution where virtual head can drive forward .compilation of inputs from there sources:-</i></p>

QUARTERLY PERFORMANCE REPORT – Quarter 1 2016/17

Reporting Period 1st April – 30th June 2016

1. PURPOSE OF THE REPORT

1.2. To provide an overview of Doncaster Children's Services Trust's performance and financial position for Quarter 1, 2016/17

2. SUMMARY POSITION

2.1. The contract indicator set was revised during the fourth quarter of 2015/16, as agreed through the first annual contract review.

2.2. The table below summarises the number of contract measures on target, within tolerance and outside tolerance as at the end of Quarter 1 2016/17.

Quarter 1 2016/17				
	Outside tolerance	Inside tolerance	On or better than target	No target specified
Social Care Pathway	3		4	
Children in Care	2	1	2	
Youth Offending Services		1	1	
Workforce	1	1		1
Finance	1			2

2.3. This is the second quarterly report containing the revised indicator set, and therefore allows for 6 monthly trend analysis for the majority of the performance indicator set. At the end of the quarter 5 operational, 1 workforce and 1 finance measure lay outside contract tolerance. However, it should be noted that of these 5 operational measures, one was in tolerance for the final month of the quarter and a further 2 are showing an improving trend towards the target level. These are discussed in more detail within the report.

2.4. There are currently two "hard to shift" measures – those which have been outside tolerance for 2 or more consecutive quarters. They are:

Monthly case file audits rated as "requires improvement or better."

Forecast Operational Expenditure.

2.5. Measures at or better than Target as at end of Quarter 1 2016/17

A1 – percentage of re-referrals in last 12 months

New - Percentage of child protection visits in timescale where child was seen by their social worker

A5 - Percentage of children becoming the subject of Child Protection Plan for a second or subsequent time.

New – Percentage of children in child protection plan for 2 years or more

B8 – Long term placement stability of looked after children

New – Care leavers aged 19-21 in suitable accommodation

NEW – Youth Offending Services – Custody Rate

2.6. **Measures within Contract Tolerance as at end of Quarter 1 2016/17**

B10 – Stability of Placement of Looked After Children – percentage of children with 3 or more moves in 12 months

NEW – Youth Offending Services - Cohort in EET

NEW – Frontline staff receiving supervisions in timescale

2.7. **Measures outside Contract Tolerance as at end of Quarter 1 2016/17**

A2 – timeliness of single assessment

A3 - Monthly case file audits rated as “requires improvement” or better.

New – Percentage of children in need with an open and current plan

B8 – Average length of care proceedings

New – Percentage of Care Leavers (aged 19-21) in Employment, Education or Training

C14 - Percentage of frontline FTE posts covered by Agency Staff

D17c – Forecast Operational Expenditure

2.8. **Measures with no target currently set**

New – Youth Offending Services – reoffending rate after 12 months

New – Staff turnover

2.9. Further detail on each measure, along with trends and narrative can be found in appendix A

3. **OPERATIONAL MEASURES AND CONTEXT**

3.1. In addition to the contract performance measures, 37 operational volumetric measures are also provided. These are supplied within appendix A. A summary of the key themes emerging from this dataset is listed below

- **Contacts:** continue to rise with nearly 2000 contacts recorded on LiquidLogic in June 2016, which will not include contacts direct to the Early Help Hub. Two thirds of contacts lead to no further action with advice or information given, but still need to be recorded, with a decision against them. This is an obvious distraction from the core work that is being channelled through this route.
- **Referral** rates: Approximately a quarter of contacts lead to referrals, which have seen a 52% rise in the last quarter. Ninety five percent of referrals lead to

an assessment of the child, of which 30-50% lead to no further action. This is leading to increased demand on front line social workers to complete assessments. Additional management resource has been directed to the Front Door to introduce a greater challenge with partners on application of thresholds as well as increase management grip of Front Door arrangements. Activity is being monitored on a weekly basis, to identify short and mid-term impact of changes at the Front Door.

- **Early Help:** On average there are 300 – 400 early help contacts received per month. Fewer cases are being stepped down from the Response and referral team, which indicates that pathways for Early Help and Social Care support are beginning to clear. Approximately 50% of enquiries lead to either a new Early Help Assessment or an update to an existing TAC. One quarter lead to no further action, and one fifth leads to a single agency response. This suggests further work is required around thresholds with referring agencies.
- **Children in Need:** currently stands at 2790, including children on a child protection plan and children in care, this is an increase of 13% since the last quarter. This has an obvious impact on total caseloads and demands on Team Managers to supervise and authorise casework.
- The number of children on a **child protection plan** has increased in the quarter by 9% (38 more children), following a decreasing trend. Largest increases have been seen in Central and South locality areas,
- The number of **children in care** has remained fairly static around the 495-505 mark.
- **Caseloads** for staff have increased as a result of the increase in referrals. Additional temporary resource has been secured within the ACPS teams to manage caseloads, and locality teams have been tasked with looking a redistribution of cases between teams. A dip-sample of work held by staff with the highest caseloads has demonstrated that there are a number of cases that are ready to be closed or stepped down but are being held up. Further directed work will be undertaken to attempt to progress cases stuck at this point and therefore to reflect true caseload.

4. KEY EXCEPTIONS AND IMPROVEMENTS

- 4.1. Ten operational measures currently remain within tolerance or are performing at or above target level, and seven were outside tolerance in quarter one. However, two of the outlying measures were newly installed within the previous quarter and are subject to a “settling in” period whilst new recording and reporting mechanisms were implemented. Outlying measures are detailed below:

A3 - Monthly case file audits rated as “requires improvement” or better.

New – Percentage of children in need with an open and current plan

B8 – Average length of care proceedings

New – Percentage of Care Leavers (aged 19-21) in Employment, Education or Training

C14 - Percentage of frontline FTE posts covered by Agency Staff

D17c – Forecast Operational Expenditure

4.2. **Timeliness of Single Assessments.** Although the short term trend is improving, the proportion of assessments completed in the 45 day timescale is currently outside tolerance by two percentage points. Performance for June 2016 was 91% putting the Trust within contract range. Current performance would still place the Trust above national (82%) and regional (81%) performance. Weekly tracking and performance management of assessments is beginning to show a positive impact, although the increase in referral rate is impacting on overall caseloads and therefore timeliness. Analysis of recent assessment data, supported by the recent LGA review, has indicated that the Trust needs to do further work to ensure a higher proportion of assessments are completed and signed off early within the 45 day window, to provide additional “space” for more complex referrals. Visits associated with assessments need to be more clearly reported. Although the current performance framework covers both of these areas for improvement, the performance team will develop the reporting suite to enable locality teams to track single assessments on a weekly basis.

Of those overdue assessments, more than three quarters (76%) were completed within 51 days rather than the 45 day deadline.

4.3. **Percentage of monthly case file audits rated as ‘requires improvement’ or better.** The proportion of cases that are judged to be “requiring improvement to be good” or better remains below the contract target figure at 82% for the quarter, compared to a target figure of 90%. However, performance improved during the quarter, and was at 87% in June 2016. In addition, the proportion of cases rated “good” has increased from 7% in quarter 4 2015/16 to 18% in the latest quarter.

The recent LGA peer review of services delivered by the Trust, included an external audit of 21 cases which confirmed that our grading thresholds were proportionate and in a small number of cases also demonstrated that grades are uplifted once remedial actions identified during audit are completed. Further case sampling was undertaken by Ofsted during their monitoring visit in August, and provided further assurance of threshold application, improving quality, and no children identified as being left at risk of significant harm.

Both LGA and Ofsted’s conclusion from their audit activity was that the challenge for the Trust now is to ensure the consistency of case file quality.

Findings from audit are now reported monthly through the revised QA framework, including outcomes from additional thematic audits. Procedures for completion and sign off of actions identified through audit have been strengthened, and this is demonstrated to uplift case file quality. Audit findings are demonstrating that quality is improving, with a focus now moving from compliance to overall quality of impact and child’s lived experience. Voice of the child is more apparent and clear to see. The opinion is that cases graded as “requiring improvement to be

good” are now moving from “just over the grading boundary” to “secure” or even “just below good.” As the audit tool and process is refined, consideration will be given to how we grade cases beyond the 4-category Ofsted level, to give a more granular view.

For the last two months, the audit process has started to identify cases that meet the criteria for “outstanding”, and in August no cases were identified as “inadequate.” This continues the improving trend of case file quality.

4.4. The Proportion of Children in Need with an open and current Plan: A caseworkers have been tasked with reassessing all cases open for 6 months or longer, this should lead to revisions or new plans, escalation and de-escalation (step down). 87% of cases open for 6 months or longer had an identified updated plan on LiquidLogic during the quarter. Including plans in draft form the percentage increases to 91%. In writing this report, an audit of 20 open cases with no plan in June was undertaken, with the following themes

- When reviewed, case had been closed or are at closure stage.
- Some related to plans for children transferring out of the Borough
- Some had a draft in place
- Some related to children with pre-birth plans
- Some were still in assessment
- Recording issues had been resolved with others

This demonstrates that, where plans do not exist, there is a reason. Similar dip-samples have been completed by Heads of Service when writing their monthly self evaluation forms with the same findings. A task to expedite closures is underway.

4.5. Average length of care proceedings rose from 28 weeks in the last quarter of 2015/16 to 33 weeks in the first quarter of 2016/17. This is against a long term trend of reducing length. However, it must be noted that the latest quarter’s performance is based on 13 cases in total, and therefore one protracted proceeding is able to skew performance outside tolerance.

4.6. 19-21 year old Care Leavers in Education, Employment and Training (EET). Work has been done by the 18 Plus and Performance Services to better track case work relating to care leavers, in particular recording of contact. This has improved the “In Touch” measure and therefore the EET and Suitable Accommodation performance figure. Performance for the EET measure was 1 percentage point outside tolerance in June 2016, and showing an improving trend.

In recognition of the EET performance of care leavers in Doncaster the HOS of Targeted Youth Support is implementing a new improvement framework to address engagement in EET for this most dis-advantaged group.

On 25.07.16 The HOS will chair a Care Leavers ETE improvement forum which will be attended by the Team Manager of 18 Plus, The Advanced Practitioner of 18 Plus, the Education Coordinator at YOS and three IAG workers currently

deployed within Targeted Youth Support services. The focus of the forum will be to create a new short, medium and long term strategy for addressing the historically low EET rate amongst care leavers in Doncaster.

The Short term strategy will be focussed on a targeted group of the 30 care leavers who have either been NEET longest, or who have the greatest levels of unmet need in this area. IDP's for each of these young people will be comprehensively reviewed and intervention targeted at securing suitable provision. The medium term strategy will be focused on increasing opportunities across Doncaster, securing pathways to apprenticeships for care leavers and increasing the offer available to care leavers.

The long term strategy will incorporate and develop both of the above, but will also have a focus on preventing attrition rates from provision once secured. This has historically been a significant issue for Doncaster's care leaving population. In addition the 18 Plus team will create a number of social enterprise companies, owned and operated by care leavers in Doncaster.

It is expected that the strategy will have a significant impact on the NEET rate for care leavers a 10% increase in young people in suitable ETE is expected by the end of the financial year. Such an increase will place Doncaster EET performance in line with national averages.

- 4.7. Percentage of **frontline staff posts covered by agency staff** has shown an increase in the quarter. This is due, in part, to meet the increased casework through increased referrals, and are over and above the establishment figure for the Trust

5. CONCLUSIONS

- 5.1. This report reflects performance against the revised contract indicator set for the second quarter since annual contract review. Although some of the initial challenges in recording and reporting have been resolved to ensure stability of measurement, further work needs to be done to improve recording of casework to ensure indicators are as accurate as possible.
- 5.2. The majority of measures are within tolerance or at/above target. Short and mid-term strategies are in place to improve the EET status of our care leaver cohorts.
- 5.3. There is an early and emerging trend of improving case file quality. Although it is early information, this may be an indication of the impact of post Ofsted activity, including the Practice Improvement Programme. Anecdotal evidence from locality operational teams supports this hypothesis, as they are reporting an improving picture in casework post inspection.

Report prepared by James Thomas, DCST

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27th September, 2016

**To the Chair and Members of the
CHILDREN AND YOUNG PEOPLE’S OVERVIEW AND SCRUTINY PANEL**

Doncaster Children’s Services Trust - Overview of outcomes from recent external evaluation:-

**LGA Peer Review
Ofsted Monitoring visit**

Relevant Cabinet Member(s)	Wards Affected	Key Decision
Councillor Nuala Fennelly Cabinet Member for Children, Young People and Schools	All	None

EXECUTIVE SUMMARY

- 1 During the last quarter the Doncaster Children Services Trust has been subject to two external scrutiny exercises, namely:
 - The Local Government Association (LGA) in July carried out a review into how the Trust is keeping children safe and its progress made following its Ofsted inspection last October; and
 - Ofsted, who conducted a monitoring visit in August over 2 days.

Both reports reflect confidence in the improvement and progress made to improve services for children and young people in need of help and protection in Doncaster. Most importantly, no evidence was found of children being left at risk of significant harm.

EXEMPT INFORMATION

2. Not exempt.

RECOMMENDATIONS

3. The panel is requested to note the findings of the reports and to acknowledge the improvement to services for children, young people and their families.

WHAT DOES THIS MEAN FOR THE CITIZENS OF DONCASTER?

4. The Findings and recommendations of both reports provide assurance to the citizens of Doncaster that services to children and young people are improving and that families can have confidence in the social care services they receive.

BACKGROUND AND CURRENT POSITION

5. A full copy of both reports are available via hyperlinks at paragraph 13 and both reports clearly set out the scope and methodology for the visits.
6. Both reports reflect a positive tone, that there is confidence that continuous improvement could be secured by the Trust. The reports also identify and positively reflect on the 'enablers' to the progress made so far: strong leadership, effective performance and quality assurance frameworks and a changing culture.

LGA Peer Review:

Some of the strengths identified by the LGA report are as follows:

- Evidence of a culture change with the service being delivered more effectively and a quality assurance framework that shows areas of strength and weakness. This in turns support the Trust in identifying areas of focus.
- The Trust's focus on getting the basics rights and taking opportunities to innovate.
- The Trust is serious about listening to children.

The report helpfully confirms the areas that the Trust and the Council are aware of in relation to further improvement, some of which includes:

- The focus on further improvements across the partnership to manage the level of demand into social care and for enhanced data around child sexual exploitation.
- Further understanding across the borough is needed as to when to access social services support.

Ofsted Monitoring Visit:

The 'significant progress' made to improve services for children and young people in need of help and protection in Doncaster has been praised by Ofsted and no children were deemed to be at risk of significant harm. The quality of provision is also better and 'prompt and appropriate action is taken to address safeguarding concerns', this is evident in the quality of assessments and ensuring that children are seen alone and their views heard.

Inspectors praised the "comprehensive and detailed action plan" which is leading to "coordinated improvements across the service". It also states that the Trust understands the importance of performance and the areas of improvement.

The letter also acknowledges the progress evident in Early Help.

Both reports clearly acknowledge that staff morale is high and they appreciate the resulting stability of a strong senior officer.

In relation to areas for improvement, Ofsted confirmed what we already knew which provides the Council with assurances that the Trust knows itself and knows where to focus their efforts next.

Overall the Council is pleased with the evident improvement and is encouraged by the pace set by the Trust.

7. IMPACT ON COUNCIL'S KEY OBJECTIVES

	Outcomes	Implications
	<p>All people in Doncaster benefit from a thriving and resilient economy:</p> <ul style="list-style-type: none"> • Mayoral priority – creating jobs and Housing • Mayoral priority: Be a strong voice for our veterans • Mayoral priority: protecting Doncaster's vital services 	<p>The Council and the Trust as major partners in the Children and Families Partnership Board share the Children's plan outcome that all children should achieve their potential – in removing barriers and developing good quality service delivery children will be able to access the benefits of a thriving economy and will themselves be participants in creating and sustaining the strength of the economy.</p>
	<p>People live safe, healthy, active and independent lives:</p> <ul style="list-style-type: none"> • Mayoral priority: Safeguarding our communities • Mayoral priority: Bringing down the cost of living 	<p>Ensuring children and young people are free and feel from harm are key ambitions of both the Council and the Trust.</p>
	<p>People in Doncaster benefit from a high quality built and natural environment:</p> <ul style="list-style-type: none"> • Mayoral priority: creating jobs and Housing • Mayoral priority: Safeguarding our communities • Mayoral priority: bringing down the cost of living 	<p>Delivering against the service delivery contract between the Council and the Trust has clear implications for safeguarding communities, in reducing risk and exposure of risk to children; improved early help and thus better outcomes for families.</p>
	<p>Working with our partners we will provide strong leadership and governance</p>	<p>Ofsted, in its inspection report commented favourably on the relationship and governance arrangements between the Council and the Trust, recognising that formal arrangements for monitoring and challenge exceed the requirements set out in the contract between the two organisations.</p>

RISKS AND ASSUMPTIONS

8. Although significant progress has been made, neither the Trust nor the Council can become complacent in their endeavour to further improve services and reach an Ofsted judgement of 'Good' by summer of next year.

LEGAL IMPLICATIONS

9. If the Trust continues on the current improvement trajectory the Council is confident that the Trust is well placed to achieve an Ofsted rating of 'Good' in line with expected timescales within the Contract.

FINANCIAL IMPLICATIONS

10. There are no financial implications directly arising from this report.

EQUALITY IMPLICATIONS

11. There are no equality implications directly arising from this report.

CONSULTATION

12. The Chief Executive of the Trust has been consulted on the content of this report.

ATTACHMENTS

13. LGA Safeguarding Children Peer review
<http://www.doncasterchildrenstrust.co.uk/content/downloads/DCST-Final-Report-250816.pdf>

Ofsted monitoring visit – letter from HMI
https://reports.ofsted.gov.uk/sites/default/files/documents/local_authority_reports/doncaster/055_Monitoring%20visit%20of%20LA%20children%27s%20services%20as%20pdf.pdf

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Background Papers

15. None

Damian Allen
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Safeguarding Children Peer Review

Doncaster Children's Services Trust

11 – 15 July 2016

Feedback Report

Introduction and Overview of Trust Arrangements

Doncaster Children's Services Trust opened its doors to the public in October 2014. It has been created to pioneer an innovative approach to delivering social care services to the most vulnerable children, young people and families in the borough.

The first of its kind in the country, the Trust came into existence as a result of a long history of concerns about performance locally, culminating in the 2012 Ofsted inspections which followed a series of seven serious case reviews. The subsequent report prepared by Professor Julian Le Grand in May 2013 recommended that an alternative delivery model should be sought.

The initial view was that a third party provider (The Trust) should be developed which had no link with the council. However, in discussion it was agreed that whilst the Trust is accountable to the Secretary of State via its Trust Board Chair, the Council should act as the local commissioner with the responsibility for the contract management. This recognised that the Trust and the Council have a wider relationship as providers of services within a whole system partnership and that the statutory functions of the Director of Children's Services (DCS) and Lead Member were retained within the council.

The Direction and associated contract requires that the following outcomes should be achieved:

- 'Requires improvement' or better by April 2016 (contract)
- Good or better by October 2017 (Direction)
- Outstanding by October 2019 (Direction)

Whilst the Trust was established through existing legislation allowing for intervention arrangements, the Government's policy for a growth of alternative models of delivery (including Trusts) will be formalised within the Children and Social Work Bill which is currently progressing through Parliament. The Bill allows the Government to exempt local authorities from legal duties under certain pieces of social care legislation including some sections of the Children Act 1989 and the Children Act 2004. The freedoms can be applied for up to six years. The government says the change will allow councils to test out new ways of working in a bid to achieve better outcomes or achieve the same outcomes "more efficiently". Ministers want to give local authorities "academy-style freedoms" to allow them to innovate and the Department for Education is working with several councils to identify what they need.

The Trust has a Board of Directors and a suite of sub-committees through which the governance of the Trust is conducted. The Trust is chaired by Colin Hilton CBE. The Trust Board has overall responsibility for overseeing how the Trust is run and providing advice on its future direction and strategy.

There are 13 members on the board including a Chair, who is appointed by the Secretary of State, Chief Executive Officer, Expert Non-Executive Directors, and staff and partner Non-Executive Directors. Reporting to the Board are six committees.

The contract sets out arrangements for quarterly performance monitoring (QPM) meetings which are supported by a suite of performance indicators, and an annual review meeting. In addition, the DCS is required to report six-monthly to the Scrutiny Committee on the performance of the Trust. A series of informal meetings underpin these arrangements, for example monthly 'finance to finance' meetings, meetings between the Chief Executive and the DCS, Trust Directors and Assistant Directors in the Council and meetings with the Lead Member. The Trust Chair meets regularly with the Chief Executive of the Council, and these meetings also involve the DCS and the Trust Chief Executive.

Benefits of a Trust model

Being a smaller organisation which focuses entirely on social work and family support has given the Trust a very strong brand identity. Staff have recently begun to speak of a 'sense of family' within the Trust. There is a common purpose, without the distractions, nor the competing priorities beyond social care which are found within a larger multi-operations organisation such as a Local Authority.

1. Executive Summary

This safeguarding peer review took place some 20 months into the life of the Doncaster Children's Services Trust (DCST). The review focused on measuring progress, since the Single Inspection Framework (SIF) inspection by Ofsted took place in October 2014.

Being the first independent children's trust of this type has brought challenges and opportunities, not previously experienced in the sector. This has required continual dialogue and negotiations between the Trust and Doncaster council. Whilst inevitable tensions are acknowledged, it is clear that leaders in both organisations have a shared passion and commitment and are working together to achieve better outcomes for children and their families in the borough.

Leadership and governance is strong, demonstrating self-awareness and understanding of progress made and improvements still needed.

There is a clear vision and focus on Trust priorities, supported by some strategies that are clear to many people we spoke with. Staff appear to know what is expected of them and have confidence in the leadership and senior managers as a result of visibility, approachability and support they receive.

The Partnership Accountability Board (PAB) brings together chief executives across the partnership to jointly address key cross cutting issues. This is a partnership strength, but the continued interim status of the Children and Young People's Plan and completion of the JSNA mean that some commissioning priorities are unclear and shared outcomes more difficult to achieve. It also limits potential for joint commissioning which is currently under-developed.

One of the major challenges to the success of the Trust is that we are not convinced of the shared ownership or shared investment from key partners to provide Early Help. The Trust and the Council have led work to bring significant reform to the early Help arrangements, but wider ownership and engagement by partners is key to further improvement. Whilst this is said to be a shared priority, there remains some confusion about how this is happening. The Trust continues to face unsustainable demands on Children's Social Care at the front door as a result and this is having an impact on caseloads and capacity. Given that around 50% of this pressure is of work that does not meet the agreed threshold, the Trust needs to be robust in its management of this demand. We feel confident about the robust challenge of the LSCB Chair and support his approach to achieve urgent clarification about this issue from the partnership.

There is evidence of cultural change that is supporting movement towards more effective practice and service delivery. This is being managed through clear communication of standards and adoption of the Signs of Safety model which is being embraced at many levels. Case file audits demonstrated evidence to indicate continued improvement. The Trust recognises however, there is still some way to go in achieving consistent practice and case recording in assessment, planning and review. The adoption of robust audit systems is supporting the drive to improve.

Alongside the focus on getting the basics right, the Trust is demonstrating ambition. It has grasped opportunities to innovate and we saw examples of four programmes that are transforming local approaches. Growing Futures is particularly well received by partners for its whole family approach and many people shared examples with us of the impact this is starting to have in reducing the prevalence of domestic abuse.

We saw many examples of engagement with children at all levels. Some are creative, others simply demonstrate that the Trust is serious about listening to children and engaging them

effectively. Young people talked about building “trust in the Trust”, which is helped by increased stability of managers and practitioners. Participation work we saw meant that young people were feeling increasingly valued. The voice of the child appears to be having an influence on service delivery, from individual work to strategic planning.

The recent move to a single and integrated front door for Early Help and safeguarding will need to be robustly managed to achieve clarity and consistency in the application of thresholds and demand management.

There is an acknowledged difficulty in achieving a successful whole family approach, in relation to key areas, without the full engagement of the whole of Adult services provision beyond Stronger Families. Partners did express some confusion about the role of Stronger Families and this needs to be addressed to ensure that the offer is fully understood.

Despite training across agencies, confidence about risk levels, collection and sharing of CSE data is limited. Information and analysis from the local police is critical to inform a local profile and support practitioners in all agencies, to be alert to vulnerability factors. We found limited evidence of this. Greater clarity of the pathways for intervention will assist practitioners and provide increased connectivity between key partners.

The Trust has made significant progress in developing a performance culture and we saw evidence of integration of QA activities and performance management arrangements to promote continuous improvement. The Trust could also see the benefits this will bring in workflow and demand management. The performance framework is being used increasingly and at all levels, with the comprehensive and timely data helping to tighten management grip on compliance and improved quality. This is a developing area and there remain some areas where managers need to have more timely access to data, such as court proceedings and where variability still exists in management oversight and direction, as evidenced in case files. This must be viewed in a context of general improvement.

Impact is now starting to emerge about the difference that improvements are having on children’s lives, but the context of previous long term failure means that outcomes inevitably take longer to evidence. Improved performance is apparent in terms of placement stability, adoption performance, accommodation and ETE for care leavers and improved ETE for YOS clients alongside reductions in custody and first time entrants.

Work across the partnership has improved and partners describe a positive difference in improved engagement and reduced need for escalation. Managers are training together across agencies and we saw evidence of the Principal Social Worker driving improvement both internally and externally by working with partners.

The agreed thresholds for services are not consistently applied, which results in the Trust using valuable time and resources on the wrong things. Partners need to work collaboratively if the progress already made is to continue and be embedded, which will also require shared investment.

The Trust has made strong senior officer appointments and staff we met appreciate the resulting stability. Those we met were optimistic and want to continue the upward trajectory both internally and across the partnership. The use of agency staff and turnover is reducing and staff told us that they are encouraged to contribute ideas and solutions to what appears to be developing as a learning organisation.

Financial sustainability in the current climate for public services is recognised as an important issue. The Trust is also aware that staff resilience and morale which has been hard won, is also important to maintain in the context of rising demand. This emphasises the importance of

achieving shared strategic direction with and supported by partners and we were unclear how demand is being predicted to inform future resourcing levels. Joint commissioning is as yet an untapped option, for example Children with Disabilities services.

Overall, the review found positive evidence of continued improvement. We felt all the right components are in place to make further progress to deliver effective services. You have a target to be 'Good' under Ofsted inspection judgement by October 2017 and you have already moved a long way in terms of practice improvement albeit from a very low base, however, there is no time for delay or complacency and you must ensure you maintain the current momentum. The Trust model can demonstrate agility and speed of decision making with effective delegation to the executive from the Board, all of which greatly assists with the pace of improvement.

2. Summary of the peer review approach

The peer team

Peer reviews are delivered by experienced officer and member peers. The make-up of the peer team reflected your requirements and the focus of the peer review and were selected on the basis of their relevant experience and expertise. The peers who delivered the peer review at Doncaster Trust were:

- Gail Hopper (Lead Peer) – Director of Children’s Services, Rochdale Council
- Caitlin Bisknell (Member Peer, Labour) – Deputy Cabinet Member Children & Young People, Derbyshire County Council
- Sarah Newman (Operational Peer) – Deputy Director for Children’s Services, Portsmouth City Council
- Kathy Marriott (Operational Peer) – Interim Area Director, Children’s Services, Isle of Wight Council
- Stephen Ashley (Police peer and LSCB Chair for LB of Hillingdon) - Associate
- Wendy Thorogood (Health Peer) - Consultant Nurse & Designated Lead for Safeguarding Children, Dorset Health Authority
- Penny Hajek (Associate Peer) – Independent consultant (Case Records review and Audit Validation elements)
- Pete Rentell (Review Manager) LGA Programme Manager

Scope and Focus

We agreed to send you a letter confirming our findings. As you know the LGA children’s safeguarding peer review focused on five key themes:

- Vision, strategy & leadership
- Effective practice, service delivery and voice of the child
- Outcomes, impact and performance management
- Working together (including LSCB and Health and Wellbeing Board)
- Capacity and managing resources

Within these key themes you asked the team to explore the following areas to assist in your on-going improvement plan:

- Effectiveness of safeguarding procedures through review of the “Child Protection Pathway”, from front door to de-escalation/escalation processes
- Experiences and outcomes of vulnerable children & young people, including the ability of the Trust to detect and respond to new/unrecognised needs

- Cross-cutting themes to be considered across these areas:

The effectiveness of Leadership and Management in securing and embedding improvements to services:

- How the Ofsted Action Plan is contributing to improving quality of services within the scope
- Performance Management arrangements
- Evidence of management grip on performance issues
- Evidence of reduced drift/delay in casework and action planning

This report sets out our findings on these areas including the areas of strengths identified and the areas for further consideration. It is important to stress again that this was not an inspection. The team of peers used their experience to reflect on the evidence you presented on safeguarding vulnerable children and young people. All the documentary evidence provided to us was used in our focus on assisting you in your on-going improvement.

You decided to take up the optional elements of a Case Records Review (Appendix 1) and Audit Validation exercise (Appendix 3) which were completed over three days prior to the main review. The report for the case records review evaluates the quality of casework, care planning and supervision and is appended to this letter along with the report following the audit validation exercise. In particular, the case records review, linked to your own multi-agency audit process, validated many of the peer teams findings in relation to frontline safeguarding practice as detailed in the 'Effective Practice, Service Delivery & Voice of the Child' theme in this letter. The evidence we obtained from these elements contributed to the team's overall findings, which also included evidence from interviews and focus groups with staff and partners. The peer team reviewed a total of 14 cases prior to and during the on-site review week which though a relatively small sample were reviewed in some depth (Appendix 2).

3. Main Findings

3.1. Vision, Strategy & Leadership

It was evident to the peer team that there is strong leadership in place at both the Trust and the Council. There were inevitable tensions between the Trust and Council given the relatively new organisational set up, however, when outward facing they presented a united front with a shared passion and commitment for doing the right things for children. This was also evidenced across elected members and council staff we met. The contract management arrangements between the Trust and the Council are maturing through the joint experience of delivering the country's first Children's Trust arrangements.

We saw a clear focus, strategic vision and direction to improve quality with shared priorities for meeting customer expectations. This is underpinned by robust governance arrangements in the Trust with accountability to a Board of highly experienced Non-Executive Directors.

Leadership is focussed on the future making good use of innovation opportunities to improve frontline practice whilst continually ensuring the basics are right with an acknowledgement that this was a journey they were only part way through. Examples include the Domestic Abuse Navigators in the Growing Futures work across the early help and statutory safeguarding pathways, which are perceived to be delivering better outcomes for children and reducing escalation of cases.

Through discussions with managers and practitioners in the Locality teams and the Multi-Agency Safeguarding Hub (MASH) it was evident that staff morale had improved over the past

18 months and they spoke of a changing culture within the Trust based on openness and trust alongside energy and a commitment to improve outcomes. Staff talked about managers and senior leaders being more visible, more approachable and better engaged in their practice and delivery. Examples included the Chief Executive's blog, summit meetings and Heads of Service working from locality bases.

The changing and positive culture since the Trust was established was also confirmed by key strategic partners, including Police, Health and Schools. Health reported consistently of the changing culture stating "they felt in safer hands" regarding the Trust with an inclusive and supporting approach to improvement. The hospital trust and community health trust reported that links which have been developed with the Principal Social Worker has reduced escalation.

Staff we met across the services were all clear about the priorities for improvement and where they were at in terms of the progress. Performance data and audits were being used across the workforce to share learning and improve practice with a focus on timeliness, quality and consistency along with the voice of the child. There was evidence that whilst issues for improvement continued to be highlighted, staff were being supported to make the required changes through the introduction of practice standards advisors working alongside the established advanced practitioners. This approach is achieving demonstrable improvements in the quality of case recording and assessments.

The role of the Performance Accountability Board (PAB) demonstrates commitment at the top of the key organisations involved to work on cross-cutting issues to achieve change and improvement.

Whilst locality partnership working is evident, the continued interim status of the Children and Young People's Plan limits the ability to achieve a fully shared vision across agencies. Some practitioners expressed some frustration that whilst progress in the Trust was clear the partnership approach needed to become more joined up to achieve better outcomes for children and families. As part of this the Joint Strategic Needs Assessment (JSNA) needs to be more focussed around the needs of the area.

Although improvements have been made to the Early Help pathway, through discussions with staff within the Trust and across some partner agencies it would appear that the early help offer and processes and the pathway were not clearly understood or embedded. Concerns were raised about inappropriate referrals to the front door, which could be dealt with at a lower level, step down process which appeared to include some duplication of assessments and the link with the Stronger Families agenda. Stronger Families deploys and funds staff across a wide range of services and projects, but there is no specific dedicated SF team to receive and act upon referrals which is a frustration for some practitioners. For example, some health staff informed us that they were not making any referrals to Stronger Families as when they tried there were no services to refer to, which suggests a lack of understanding about how the model works.

The peer team had a conversation with the representative from Achieving for Children to compare findings around early help and there was consensus that, whilst there were inconsistencies in the work and the offer was not yet completely clear, there was evidence of improvement and they had all the right components to create a robust pathway.

The Trust have identified this as an area for development and work is underway across the Doncaster Safeguarding Children's Board (DSCB) to further develop clarity on the early help framework. We fully support the request made by the DSCB chair to provide clarity about the Early Help Framework and reporting measures needs to be delivered as a priority.

Staff talked competently about edge of care work, however, it appeared that there was less focus on reunification in relation to a framework to support children returning to their families.

The performance data highlights that the MASH are receiving a significant number of contacts with no clear safeguarding concern. This is currently leading to increased referrals to children's

social care and a higher number of assessments being completed that lead to no further action. Staff we met in the MASH and across localities didn't think the thresholds for services were well understood by professionals working with children across the Borough. To ensure that demand for services is appropriately managed across the children's system there needs to be a better and shared understanding around thresholds and the pathways for services across the early help and statutory spectrum.

Demand in the system was not clearly understood by locality managers in terms of the number of assessments being completed in 10 days and stepped down and the majority were taking in excess of 30 days before a decision for no further action. This raises a concern over how quickly children were being seen. We also saw duplication of assessment work across teams as work isn't being stepped down directly, instead it goes via the early help hub and managers told us that a further early help assessment is completed to feed the early help system which operates separately from the statutory social care recording system. Whilst operating procedures do provide for cases to be stepped down directly to early help without a need for further assessment, it appeared that this was not happening. Resolving this issue, monitoring timeliness and activity levels would all assist with workflow and demand management in a context of increasing demand.

3.2. Effective Practice, Service Delivery and Voice of the Child

Most staff we met spoke positively about the 'signs of safety' training and about how they were using this approach in their work. In the locality teams the links being made across early help services through the support and guidance meetings were seen as very helpful and all agencies using one IT system to record early help assessments is an obvious strength. During the observation of a child protection conference the model was used openly with the family and all professionals present contributed and we found evidence that it is now supporting improved practice and a better understanding of risk across agencies. Practitioners clearly know their cases well, along with children and their families, and were able to talk competently about the work they are doing.

We saw evidence of young people contributing to service delivery at both individual and organisational levels. For example we heard about the young people who meet regularly with the chief executive, the groups being facilitated by senior managers, the youth clubs and independent visitors and advocate schemes. The importance of the voice of the child was evident and practitioners spoke about the various approaches they are using including the 'Three houses' and 'Magic wand'. Wider participation through the Consultation Café has identified priorities for children in care and is being progressed by the children in care council. Responsive interaction and intervention with care leavers through "Keys to my Future" is a positive example of practitioner creativity, supported by the Trust.

There is now a permanent senior management team in place and the workforce is becoming increasingly stable with less reliance on agency staff. Young people and partners told us that this stability was building "trust in the Trust". Standards and expectations of staff have been clearly communicated and understood and staff told us about their work being audited by others, often from separate teams, which is supporting improvement. Even agency staff reported that they felt part of the team and had been included in workforce development opportunities which makes it easier for the Trust to convert good agency staff into permanent positions.

We saw examples of individual supervision that evidenced use of reflection, embedding the 'signs of safety' model, and managers were able to talk about the work of practice standards advisors and advanced practitioners supporting more junior staff in a team to improve practice. Supervision is now becoming prioritised and taking place on a regular basis and incorporates relevant research to aid learning. Staff highlighted the increased emphasis on reflection with 'stop the clock' learning sessions becoming embedded across the locality teams providing

reflection and analysis across peer groups. Despite this positive approach there is still more work to be done to fully embed reflective supervision across teams.

The peer team saw evidence of the impact of the innovative whole family approach to domestic abuse through Growing Futures, which is impressive and is starting to show evidence of impact in reducing demand and improving the lives of children and families. There was also recognition of the need to build on the Growing Futures approach to deliver a comprehensive whole family approach. The launch of the 'Encouraging Potential Inspiring Change' (EPIC) team in May was considered good practice to target young people who are at risk of getting involved in crime or anti-social behaviour and serves to underpin a whole family approach. Family group conferences were reported as being a forum to stop escalation of cases and build upon family and community resilience as appropriate. There is an acknowledged difficulty in clarifying how the whole family approach will be achieved without full engagement of Adult Services.

There was positive feedback from practitioners about the partners' support and guidance meetings scheduled by the Trust in localities to support the offer of early help services. Pastoral support staff in schools stated that this meeting was an opportunity to share anxiety and practice so that the needs of children were better understood and staff in the wider community feel well supported to deliver early help work.

Frontline health staff spoke of improved oversight by social workers who were producing clear plans for children and families. They described less drift in cases and positive outcomes for children and health staff mentioned examples of effective child protection plans with an improved focus around joint ownership of early help and child protection.

Work with children who go missing from home and care is leading to a reduction in the number of episodes being reported.

The regular auditing activity in the Trust has confirmed the variability in practice in assessment, planning and review and this was evidenced within our own case review exercise. The aim to have a coherent pathway across statutory and early help services should assist with workflow and it will be important for the LSCB to be informed of progress so that demand activity and thresholds for services are owned across the whole system. The recent move to a single and integrated front door for early help and safeguarding will need to be monitored closely to ensure clarity and consistency in the application of thresholds.

Despite a lot of training across agencies the arrangements for CSE were not well understood between locality teams and specialist teams. Although the review did not find children left at risk of serious harm related to CSE, none of the teams had access to a current local profile detailing children at risk of CSE, their existing known networks, locations and hot spots being frequented and potential perpetrators of harm. Such a profile would normally be produced by the Police. There is limited confidence about grading, collection and sharing of CSE data and soft intelligence and local teams need to have more thorough information and detail and what it means for them.

It wasn't clear from discussions with staff who needed to complete a CSE risk assessment and how that was reviewed to inform the plan and who held case responsibility, i.e. is it the locality team or the specialist CSE team. We saw language in one assessment indicating a young person was making a choice about a relationship with an older male and in two other cases we considered that vulnerability factors to the risks of being exploited were not always sensitively considered.

The pathways for CSE referral and intervention must be well understood across the workforce and the partnership to ensure connectivity between agencies, locality teams and the specialist

team. Information and analysis collated by South Yorkshire Police is critical to inform the local profile and support practitioners in all agencies and the peer team found limited evidence of this, because the profile was very historical. Specifically there is a need to share this intelligence on a more regular and timely basis to inform the practice of all agencies. Despite the CSE specialist team being relatively newly established the peer team were impressed with the overall operation and current strengths of the unit and we believe it will take minimal effort to address the above issues in order to further strengthen the team.

Observation of the Children Missing Operational Group (CMOG) highlighted how the partnership were scrutinising and challenging the work by children's social care but it wasn't clear how partners are being expected to contribute to information sharing and disruption activity. As an example a looked after child had been discharged from a secure unit and placed in an out of authority residential unit known to be located in a CSE hot spot area.

There has been one case considered under the Prevent arrangements locally. The planned WRAP and PREVENT training programme scheduled for the autumn will strengthen frontline practice when it is rolled out across the workforce so you need to ensure there is no slippage to the roll-out. Some frontline staff we met were not clear around PREVENT or the 'channel panel' process. We also noted that work to ensure case recording is completed in a timely way and to the right quality is underway.

3.3. Outcomes, Impact and Performance Management

The Performance Accountability Board (PAB) is addressing cross-cutting priorities across the partnership to continue improvement. There is a good level of self-awareness about the level and pace of progress made and the self-assessment document provided to the peer team was considered to be generally accurate.

The performance management and quality assurance processes in the Trust are comprehensive and of high quality. Managers at all levels highlighted how they believe that they now have a firmer grip on understanding where their team are and what they need to do to 'get to good'. We saw a healthy competition developing between the team and areas and an increase in pride across staff and teams. The Trust recognised, however, that some managers had not yet made as much progress as others in recognising the benefits information and data provided for them to undertake their role. Monthly self-assessment at whole Trust and locality basis provides a good level of analysis of each locality, and this is supported by high quality performance data from the performance team which the Heads of Service review alongside wider quality and workforce information in order to inform their overall analysis.

The auditing process is dynamic with support, coaching and workforce development addressing key areas for improvement. Early help quality assurance is developing with 24 cases being audited per week by early help co-ordinators who provide feedback and support to lead professionals in order to improve the quality of assessments and plans. Multi-agency audits are also undertaken routinely and demonstrate improvement. The peer team can see that the Trust is developing as a learning organisation which engages staff and allows them to be creative. Staff we spoke to in focus groups all highlighted the feeling of empowerment they felt they now have as a consequence.

The support from the Trust's leadership team has increased the drive and ambition to influence improved health and wellbeing over a longer term in child safeguarding projects. Health clearly contributes towards instilling pace and confidence through tackling key challenges and importantly doing this in the spirit of partnership working. The same passion was shown by the range of committed health staff we met who want to make a collective difference. As an example we saw evidence of and were told by the IRO service of contributions from school

nurses to improve educational attainment and reducing teenage domestic violence and supporting young parents.

Reports from Independent Reviewing Officers (IRO's) and conference chairs clearly indicate an improvement in the evidence of direct work with children. Also, children and young people who are unaccompanied asylum seekers (UASC) were very positive about the quality of support they receive from agencies. There was good evidence of robust packages of care which had continued through transition into adult services and they were positively engaged in the development of services.

The early focus for the Trust had been on ensuring compliance and embedding improved processes and pathways. The Trust is now intensively tackling consistency, quality and outcomes and we note that the Principal Social Worker is driving this forward.

Further exploration may be required in those situations where children and families have been passed backwards and forwards between early help and children in need teams. In particular, this related to neglect cases that had been stepped down from child protection and children in need and were subject to reassessment. This was described by locality teams as a cause of some duplication and frustration.

There is evidence of drift in some cases but this has to be viewed within a context of general improvement and the team are fully aware that the Trust started from a very low base on transfer of children's services some 20 months ago. Similarly case audits show some variability in management oversight and direction but again this must be viewed through the lens of general improvement. However, the Trust's plan to build on progress made with supervision compliance in order to monitor quality and impact and develop use of reflective practice is clear.

Whilst managers are increasingly making sense of the data provided, the commentary is being provided by the central performance team and there is not as yet sophistication in their use of the data, such as where a dip in performance would lead to further curiosity or further information being sought. As an example some cases which could have been closed earlier in the assessment timescale have remained open for much longer than necessary. We were told that managers do set timescales at the outset of assessments and timescales are tracked, but delay remains and further work is required to ensure that those children who do not need support as children in need are identified and work is completed earlier. Performance data about PLO and court proceedings is currently held with a case manager, however, timely sharing of this data with operational managers is currently a gap which must be addressed.

Overall, despite the high quality and comprehensive performance management data and systems established impact has been hard to demonstrate because the legacy of historic poor services has meant that outcomes take longer to evidence. Nevertheless, it is clear that there is evidence of improvements in children's experiences as a result of work undertaken and a trend of improving performance is emerging, such as in adoption, placement stability, life chances of care leavers and young people involved with the YOS.

The planned improvements to the IT systems including the 'business objects' analytical tool and developments around equipping the "modern social worker" project are innovative and good examples of the Trust looking to the future.

3.4. Working Together (including LSCB and Health and Wellbeing Board)

The representatives of partner agencies the peer team met with were positive about the changes that they had seen over the past 18 months in relation to the development of children's services with a reduction in number of escalations. Many partners spoke about how helpful locality teams were and we saw good examples of joint working, for example school nurses and pastoral support staff.

The development of a MASH, whilst in its current model is embryonic, is seen as a key to improving the management of thresholds and appropriate referrals to assessment. It was encouraging to hear about the vision for the MASH, providing a single pathway across early help and statutory services. The electronic system to record the MASH process was impressive, in particular the opportunity for each agency to grade their level of concern between 0-5. The manager had secured some early progress in getting Police to quality assure their notifications and the police representatives in the MASH showed us examples of where they had returned notifications for further information. The police were also recording outcomes of their notifications on their system in order to pass information back to colleagues.

The Principal Social Worker (PSW) was very impressive in terms of improvement work she is leading internally and how she was cautious to hold up a realistic gauge of the quality and consistency of work. We discussed the assessment tool being used in Doncaster and whether it would be more helpful for staff if the detail in the domains was added as a prompt for good quality. The PSW was also doing some work externally across the region and with the Teaching Partnership underpinning the Trust's development as a learning organisation.

We were informed that the executive coaching approach across the partnership is contributing to senior management development. The workforce strategy will be critical in looking at succession planning for the organisation moving forward. Partners told us that they had a better understanding of a number of key topical areas such as FGM, Prevent and human trafficking and this will be crucial in having a broader view when looking through the safeguarding lens and decision making for children and young people.

The LSCB had strong representation from partners and was very well managed by the Independent Chair. The peer team observed a LSCB Board meeting and felt the Board had developed some good practice, an example being the challenge log as a useful tool. There was considerable evidence of challenge between partners and the Board appeared to be cohesive and very useful. The Chair is hugely experienced and a real asset to the Trust. Overall the Board had undertaken significant change and was now fit for purpose. It is fully aware of the requirements for further improvement and is clear about its own role in supporting that improvement.

As part of the development of the MASH a coherent communication strategy could be considered including allowing head teachers, other partner agencies and elected members to visit and understand the triage system at the operational level. Representatives from health and schools indicated that they didn't routinely receive a response from the MASH detailing the outcome of their referral. However, the MASH team do have a template to respond to referrers which might just need to be fully embedded into practice. This is a quick win which can be easily implemented to improve communication across the partnership.

There were some concerns regarding the designated health roles; currently it is a combined role including looked after children, head of quality and designated children nurse for safeguarding. This would be an area of concern for CQC when they inspect the Clinical Commissioning Group (CCG) and we suggest the CCG consider the role by reviewing the statutory guidance from March 2015 "*Department of Health and Education, Promoting the health and wellbeing of looked after children*" to ensure full compliance. Having the right capacity at this level will support the vision and development of the Trust and ensure children in care receive the right scrutiny.

Whilst a 'whole family approach' was mentioned in relation to Growing Futures, Family Group Conferences and Stronger Families staff were not able to clearly articulate what this meant in relation to their own services and how to access these services. A worker funded by Stronger Families has been allocated to the front door which should help to embed a better

understanding but this does need to be better communicated across the whole workforce. In addition, the role of adult services in achieving a 'whole family approach' needs to be clarified.

The significant number of improvements that have been made with processes and practice have clearly improved experiences for children but need to be more consistently embedded to drive forward and sustain better outcomes. The view from the LSCB Chair is that there has been a major drive on quality but the Trust also needs some time to get this right. Finally, the benefits from the Early Help offer have yet to be realised so the framework needs to be crystal clear going forward and any "must do's" can no longer be vague.

There may be some concern about the role of the PAB and how it sits in relation to the LSCB going forward. On its own the PAB is seen as a really useful addition to ensure robust governance across the main strategic partners but its role will need to be considered in the light of the Wood report.

3.5. Capacity and Managing Resources

All the senior managers we met clearly understood their role, their business and the expectations of themselves and their staff. Staff we spoke to were all complementary about senior officers stating there was a confidence and optimism within the Trust which for many staff who had previously worked for the council felt like a "breath of fresh air". Staff are committed and passionate with a real 'can do' attitude, both internally and across the partnership, and they now speak of a 'sense of family' within the Trust.

There is recognition that staff were poorly supported in the past and that good and effective leadership was lacking. The clear message we picked up is that the Trust both require and support staff to get to good, thereby removing what was perceived by some as a 'blame culture'. Staff receive high levels of intensive training and this is welcomed, however, to attend all training courses can currently be difficult given operational workloads and some staff told us that e-learning is, in their view, not always the best approach and they would prefer some face to face training and development.

The workforce development strategy details the training offer and the progression pathway for social workers and other staff. There is real optimism and enthusiasm for using the 'signs of safety' model and we saw evidence that staff were using it in assessments, conferences and supervision. The performance reports indicate that the service is now less reliant on agency staff and sickness levels are low and reducing. Capacity is regularly monitored across all service areas and managers were aware that demands were continuing to increase during the review, with some opportunities through utilising national funding to innovate and pilot new approaches to working with families, for example the Pause programme, Growing Futures, Empower and Protect and the Mockingbird fostering programme. The Council have provided additional funding to the Trust to deliver the Practice Improvement Programme to strengthen social work and family support practice and have been supportive in responding to business cases for additional funding to support further improvement. The Trust are overcoming the bureaucratic barriers that have previously slowed down quick solutions, for example access to finance for care leavers through procurement cards has done away with nine previous financial processes.

Financial sustainability in the current climate for public services is recognised as an important issue and this will drive the future approach to demonstrating value for money in all service areas, however, the Trust did start from a low base in terms of resources and took on a significant overspend on transfer. However, using innovative solutions to get more from existing resource or do things in a different way and working closely with the council as the Commissioner of services will hopefully provide the optimum fit.

The Trust is also aware that staff resilience and morale which has been hard won, is vitally important to maintain in the context of rising demand and increasing caseloads. This emphasises the importance of achieving shared strategic direction with and support from partners. The peer team were unclear how demand is being predicted/forecast to inform future resourcing levels. A coherent demand management strategy needs to be developed by the partnership, otherwise there is a risk that the improvement in compliance and quality will be impacted by the rising demand.

There was limited evidence of joint commissioning across the partnership. There are real opportunities with regard to health visiting and school nursing, particularly in relation to early help along with opportunities to develop integration of approaches to children with disabilities, which as yet appear not to have been fully explored. There is also a real opportunity to work closer with voluntary sector organisations to co-design solutions.

Many staff spoke to us about the Liquid Logic IT system and ensuring it is user friendly and fit for purpose. Currently the system causes delay in recording or doesn't pull key documents through in order to make informed decisions on cases. The Trust is aware of these issues and has a rigorous programme to address this, which includes strong governance, staff engagement, specialist business analyst capacity and an additional £200k of resource. We would strongly recommend this is seen as a priority to resolve. Aligned to this is the approach to achieving flexible and agile working across the workforce with procurement of smart phones, laptops and other IT devices to facilitate more flexible working. Currently the equipment being used is out dated and not fit for purpose so again we suggest the Trust increase the pace of procurement for all such equipment. This will ensure staff have the tools to do the job effectively.

4. Suggestions for Improvements

Following the peer review, and based on the evidence collected, the peer team provide some suggestions for the partnership to consider in the short to medium term as follows:

- Develop a shared strategy to effectively manage demand across the partnership;
- Consider opportunities where joint commissioning might achieve better joined up investment and efficiencies – such as in the MASH and whole family approaches;
- Distribute regularly updated locality problem profiles so that every area is aware of children missing, those at risk of CSE, hot spots, networks and other soft intelligence;
- Continue to develop approaches to reflective practice;
- Clarify the Early Help framework to ensure joint awareness and ownership of the local offer.

The peer team also looked at quick wins that the Trust could implement swiftly to facilitate improvement and these are:

- To appoint a care leavers champion on the Corporate Parenting Board;
- Resolve how to share PLO/Family proceedings information on a regular basis;
- Consider opportunities for engaging other elected members in Corporate Parenting activities;
- Share the data and soft intelligence around CSE that is known to managers so that practitioners are more fully informed

5. Next Steps

Following the team's presentation on 15th July, you then ran a prioritisation workshop with a wide variety of stakeholders, which the peer review team stayed for at your request to assist with the dialogue on tables. This has assisted in determining top priorities for the Trust and the multi-agency partners to focus upon in the short to medium term and to be incorporated into your improvement plan.

The Local Government Association would be happy to discuss how we could help you further through the LGA's Principal Adviser Mark Edgell Telephone 07747 636910 or e-mail: mark.edgell@local.gov.uk or the Children's Improvement Adviser, Ann Baxter Telephone 07577495153 or e-mail: baxter.ann@googlemail.com.

This will include the opportunity for a follow-up peer review in 9-12 months. The purpose of this will be to help the partnership assess the impact of the peer review and the progress it has made against the areas for consideration identified by the peer team.

Thank you to everyone involved for their participation. In particular, please pass on thanks from the review team to James Thomas, Hazel Cole and their respective teams for their sterling help and support prior to the review and during the on-site phase.

Appendices:

Appendix 1 – Case Record outcome report

Appendix 2 – Individual case record templates (14 cases + 1 Practice Observation)

Appendix 3 – Audit Validation report

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2 September 2016

Mr Damian Allen,
Doncaster Metropolitan Borough Council Children's Services,
Civic Office
Doncaster
DN1 3BU

Dear Mr Allen,

Monitoring visit of Doncaster Metropolitan Borough Council children's services

This letter summarises the findings of the monitoring visit of Doncaster Borough Council children's services on 3 and 4 August 2016.

The visit was the first monitoring visit since the local authority and the children's trust were judged inadequate for services to children who need help and protection in September 2015. This monitoring visit was carried out by Her Majesty's Inspectors, Cath McEvoy and Graham Reiter.

The local authority and the trust are making significant progress from a low baseline to improve services for children and young people in need of help and protection in the areas covered by this visit. There were no cases seen where children were judged to have been at immediate risk of harm.

Areas covered by the visit

During the course of this visit, inspectors reviewed the progress made in respect of help and protection, with a particular focus on six important themes:

- response to children in need of help and protection
- the quality and timeliness of single assessments
- the voice of the child
- recognition and management of risk
- management oversight
- the overall application of thresholds.



A range of evidence was considered during the visit, including electronic case records, direct discussions and observations of social workers and managers and information provided by staff and managers. In addition, we spoke to a range of social workers and frontline managers, as well as senior managers from both the council and the trust.

Summary of findings

- The council and the trust have demonstrated a meaningful response to the recommendations made following the single inspection in 2015. As a result, there has been effective progress made to improve the quality of services provided.
- Working closely with the council, the senior leadership team of the trust is highly visible, accessible and demonstrates a comprehensive understanding of the key priorities for improvement.
- Performance management and quality assurance arrangements have improved significantly, and have been supported by an extensive auditing programme. The trust's senior leadership team is fully involved in these arrangements, ensuring that strengths and areas for improvement are known and understood.
- Social work staff are very positive about working in Doncaster and report clear improvement in support and their working environment. Use of agency staff has reduced at all levels, leading to a more stable workforce. This has enabled progress to be made in relation to the quality of social work practice.
- The impact of significant investment in training for social care staff is beginning to be demonstrated in practice.
- Social workers now see children and young people during assessments, although there were examples of delay in the timing of these visits. Children's views or observations of the child are recorded and this helps to inform the outcome of the assessment in most cases.
- Assessment timeliness remains variable. While timescales are almost always set to meet the needs of the child, these are not always adhered to and there was evidence of some assessments not being completed within the agreed timescales.
- The quality of assessments remains inconsistent. The introduction of the 'Signs of Safety' model is beginning to show impact in relation to understanding the child's experience and clear risk analysis. The use of history and chronologies is variable, however, leading to incident-focused assessments.
- Child protection enquiries are on the whole informed by multi-agency discussion and within strategy meetings which lead to appropriate decisions around risk. The police do not always attend joint visits when this would be appropriate. Examples were seen where this would have assisted the investigation.

- Children and young people at risk of being sexually exploited receive tenacious and effective support from a dedicated multi-agency service. In a few cases, inspectors found examples where potential risks of child sexual exploitation were not always immediately recognised.
- Thresholds for social care intervention are not yet fully understood by partners, and contacts and referrals remain high. There has been a recent reduction in contacts and assessments since the introduction of the 'Early Help Hub', and a further reduction since the implementation of the 'Multi-agency Safeguarding Hub' (MASH), but it is too early to assess the impact of this.

Evaluation of progress

Doncaster children's services trust knows itself well and uses external scrutiny and challenge to improve services and processes. Alongside this, significant internal quality assurance and performance management activity contributes to targeted learning, which is helping to drive more effective social work practice.

A comprehensive and detailed action plan developed following the inadequate judgement in the single inspection is leading to coordinated improvement across the service. The recruitment of permanent staff to key management posts and the reduction of agency staff is contributing to a more stable workforce within the trust, enabling progress to be made in relation to the quality of social work interventions.

There is effective leadership from the senior management team in the trust and a clear understanding and focus on priorities. Leadership across the trust is highly visible, accessible and has inspired an increased confidence within the workforce and led to improved morale.

Improved performance management and data collation means that the council and trust better understand where resources need to be targeted and where progress is being made. This is particularly evident in early help, where significant developments have been made in relation to the quality of available data. This is leading to a better understanding of the impact of early help across the partnerships.

Quality assurance oversight has been effectively developed, and includes an integral extensive case audit programme which involves managers at all levels. The comprehensive case audit pro-forma has an appropriate mix of compliance and quality and this provides senior managers with a solid understanding of performance and areas for improvement. Thematic audits are targeting areas which have either historically been an issue or where issues have become evident as through the analysis of data or other audits. Across all levels, the feedback and learning cycle is already contributing to an improved understanding of what good looks like.'

Social workers report they feel well supported by managers at all levels. Social workers and their managers receive regular supervision and training. The quality of supervision for social workers remains variable. Where the 'Signs of Safety' model is

used, supervision is more focused on social work interventions and whether the child is making progress in a timely way. Supervision is not always reflective when this model is not yet being utilised and social workers' professional development is not consistently given enough consideration.

Thresholds for social care intervention are not yet fully understood by partner agencies and, as a result, contacts remain high. Only a quarter of cases progress to referral. The focus and drive in relation to early help is ongoing, but there has not yet been a significant impact in relation to a cross-partnership understanding of what needs a social care response. The objective of working towards a single point of access for early help and social care is being rigorously progressed. This should offer greater consistency and understanding of thresholds to ensure only those cases that need social care intervention receive such help.

Intensive multi-agency training and increased levels of support, provided by early help coordinators, is assisting lead practitioners to make more appropriate threshold decisions. The impact of this is evident in the increase of enquiries received by the 'Early Help Hub' from a range of agencies, and the early help local offer is increasingly well understood by professionals working across the local partnership.

The recently revamped MASH is not yet able to realise its vision of all cases being subject to a MASH process. Consent is sought in almost all cases by professionals to make a referral. It is not however clear if families are providing informed consent or whether frontline professionals are fully aware of the MASH process and what this entails in terms of information gathering.

Some very early indications evidence a reduction in the need for a statutory assessment as a result of this information gathering, but using the MASH to screen all referrals is an ambitious target and the potential sustainability of this needs to be considered. The lack of a health professional within the MASH reduces the potential impact of the information gathering process and means that the overall effectiveness and intention of the MASH is limited.

Some safeguarding cases are not benefiting from the MASH process as they are immediately sent to locality teams for action when the risk assessment would be better informed by the swift coordination of relevant information.

The vast majority of cases seen at the front door receive a timely response, with a clear analysis of risk that in turn leads to appropriate decisions. There are, however, delays apparent in some cases moving on from the MASH where allocation and further action is necessary.

There has been a notable improvement in the quality of assessments undertaken by social workers in Doncaster, although there remains inconsistency. The use of the 'Signs of Safety' model is leading to better assessment of risk and analysis of need, but this is not yet embedded and there is variation in its application. Children are

seen and are seen alone for the most part. In the cases seen during the monitoring visit, children's views were recorded or observations were made about their presentations, and these provided an understanding of the child's lived experience. Consideration of identity issues was rarely given in the assessments seen and, in addition, the lack of chronology or analysis of the family history in a number of cases means that assessments are not always holistic. In almost all cases, there was an appropriate outcome for children in terms of next steps and interventions offered.

Direct management oversight is not always evident within the case files and rationale for decisions could be more clearly articulated. The quality assurance process utilised at the end of assessments, however, evidences that managers are seeing assessments and appropriately evaluating the quality and outcomes for families. Timescales for assessment completion are set to meet the needs of the child, but these are not always achieved and there is a lack of consistency in management direction and challenge in the cases seen. Appropriate outcomes and decisions for children and families were, however, evident in almost all the cases sampled.

In the majority of cases, there were multi-agency contributions to strategy meetings and child protection enquiries. This leads to appropriate decision making for the child and prompt and appropriate action taken to address the safeguarding concerns. The practice of joint visits with the police was variable and a number of investigations would have benefited from greater police involvement.

Targeted multi-agency support is available to address the needs of those children who are at risk of sexual exploitation once the risk has been identified. However, there was some delay in a small number of cases recognising the potential risk and referring the young person for help.

I am copying this letter to the Department for Education. This letter will be published on the Ofsted website.

Yours sincerely,

Cath McEvoy

Her Majesty's Inspector

**To the Chair and Members of the
CHILDREN AND YOUNG PEOPLE'S OVERVIEW AND SCRUTINY PANEL**

Overview of outcomes from recent external evaluation:-

Review of Early Help - DfE Achieving for Children

Relevant Cabinet Member(s)	Wards Affected	Key Decision
Cllr Fennelly Cabinet Member for Children, Young People and Schools	All Wards	No

EXECUTIVE SUMMARY

1. This report provides a progress report as to the effectiveness of early help services in Doncaster.

EXEMPT REPORT

2. This is not an exempt report.

RECOMMENDATIONS

3. The panel is asked to:-
 - i) Note the progress of Early Help offer to date; and
 - ii) Question and comment on that progress to date.

WHAT DOES THIS MEAN FOR THE CITIZENS OF DONCASTER?

4. Families who need help at the earliest possible point are much more likely to be identified and supported by the right people at the right time and so reducing the potential for escalation into more costly statutory services.

Families who may need help are screened via the multi-agency staffed Early Help Hub in order to allocate the most appropriate lead worker if needed. Many families simply need some advice and guidance or some more in depth work by the agency they are already involved in.

The Early help Hub sits alongside the MASH to ensure effective step up / step down of families where necessary without 'ping ponging' them between the two.

Services are more coordinated and an early help offer is more defined and

understood by partners and families themselves.

When families do need extra help Early Help Assessments are undertaken by a lead professional and they help the family to understand what their issues are and who can help them resolve or reduce the impacts on their lives.

'Delivering Early Help' training has been delivered to over 250 practitioners across agencies so far, increasing the understanding of early help and improving staff implementation; thus improving their ability to identify and support families early on.

Early Help coordinators are improving the quality of early help by supporting partners to undertake Early Help Assessments and ensure they include SMART targets to achieve outcomes required.

Over the next few months the Early Help offer will be embedded into partner agencies which includes the Whole Family approach driven by the Stronger Families Programme; improving support for families and supporting the Stronger Families Payment by Results claims figures.

BACKGROUND AND CURRENT POSITION

5. *Achieving for Children (AfC)* is the DfE appointed partner engaged to provide challenge and support to the improvement journey for the Trust and the Council. The review commenced in January 2016 following a letter from the Minister directing AfC to consider the Early Help offer in Doncaster. An interim visit took place in May 2016 which led to an interim report and a follow up visit took place over two days on 11th and 12th July, 2016 which led to the most recent final report in August 2016.

The 2015 Ofsted inspection of services for children in need of help and protection judged that early help services in Doncaster were fragmented and inconsistent. It found that too many children whose needs could be met by preventative services were being referred to statutory social work services. Inspectors also noted that partner organisations were insufficiently engaged in the provision of a coordinated early help service.

As a result of the Ofsted inspection, a series of progress reviews, directed by the Secretary of State have taken place since January of this year and significant improvements have been made.

In January 2016 the AfC review found that, "*children whose needs could be met at a lower level were not identified and consistently offered support to prevent their needs escalating to more intrusive statutory services.*" This meant that where families needed early help they did not necessarily get it and they were not picked up until their needs met higher statutory thresholds.

The inspection also found that an Early Help Strategy was in place but deemed to be too broad and required greater clarity. The Early Help Hub was in its infancy but showing some signs of effective referral screening. The quality of Early help Assessments was varied and there was a lack of clarity about the multi-agency locality delivery model.

A ministerial letter received in January 2016 requested we undertake an in-

depth review of our early help offer.

These issues were addressed by the establishment of the Early Help Implementation Task Group (EHITG) over the next few months. This multi-agency senior group have gripped the Early Help agenda and driven the implementation of the report recommendations.

The development of early help offer in Doncaster has been rapid and transformational over the past few months. The 'Achieving for Children' (AfC) report for the period April to May 2016 stated that:

“THE SHARED AMBITION FOR EARLY HELP SERVICES IS GOOD. CONSIDERABLE WORK HAS BEEN ACHIEVED IN SECURING COMMITMENT AND BUY-IN FROM SCHOOLS, HEALTH SERVICES, THE VOLUNTARY SECTOR AND OTHER AGENCIES, TO CREATE THE FOUNDATIONS FOR A COHERENT AND JOINED-UP EARLY HELP OFFER ACROSS THE PARTNERSHIP

Highlight reports in June and August have shown significant progress in developing our Early Help offer and in improving practice across partner agencies.

The latest (August 2016) AfC report; is attached at appendix 1, but in essence found that:-

- Good progress has been made since the first review in May 2016, which means that by Ofsted grading standards early help services are now firmly in the 'Requires Improvement' category, with a trajectory steadily moving towards 'good'.
- The EHITG has been effective at refocusing improvement work and ensuring good partnership engagement in the strategy and overall direction of travel for early help services.
- Strong multi agency training and promotional work by early help coordinators has ensured that practitioners in partner agencies understand early help and have confidence in identifying and referring children and families who need that support.
- The co-location and transfer of management of the early help Hub with the Children's Trust has ensured that thresholds are more appropriately and consistently applied.
- There needs to be greater input from some partner agencies to ensure that the Early help 'offer' is comprehensive and coherent enough to prevent escalation into more costly and intrusive statutory interventions.
- There needs to be more evidence of the impact of the early help offer on children and families in the next phase.

The next review phase will be in January 2017, with a final review to take place in March 2017, specifically focussed on the impact that early help support and interventions have had on improving outcomes for children and their families.

IMPACT ON THE COUNCIL'S KEY PRIORITIES

6

	Priority	Implications
	<p>We will support a strong economy where businesses can locate, grow and employ local people.</p> <ul style="list-style-type: none"> • <i>Mayoral Priority: Creating Jobs and Housing</i> • <i>Mayoral Priority: Be a strong voice for our veterans</i> • <i>Mayoral Priority: Protecting Doncaster's vital services</i> 	<p>Providing early help means that families (including veterans) are able to seek out and access help when they need it. This help ensure all services are used appropriately and thus the right help goes to the right families by the right services.</p>
	<p>We will help people to live safe, healthy, active and independent lives.</p> <ul style="list-style-type: none"> • <i>Mayoral Priority: Safeguarding our Communities</i> • <i>Mayoral Priority: Bringing down the cost of living</i> 	<p>Ensuring people get the right help at the right time means they are more likely to be able to function effectively and be more resilient to upcoming issues.</p>
	<p>We will make Doncaster a better place to live, with cleaner, more sustainable communities.</p> <ul style="list-style-type: none"> • <i>Mayoral Priority: Creating Jobs and Housing</i> • <i>Mayoral Priority: Safeguarding our Communities</i> • <i>Mayoral Priority: Bringing down the cost of living</i> 	<p>Families who access early help are more likely to need less help, be more independent and make a positive contribution to their communities.</p>
	<p>We will support all families to thrive.</p> <ul style="list-style-type: none"> • <i>Mayoral Priority: Protecting Doncaster's vital services</i> 	<p>Ensuring people access the right services at the right time will make services much more efficient and so protect the more intensive costly services for those who need it.</p>
	<p>We will deliver modern value for money services.</p>	<p>Early help services are more cost efficient and so provide better value for money where appropriately used.</p>
	<p>We will provide strong leadership and governance, working in partnership.</p>	<p>Early help has strong multi-agency support and leadership via Early Help Implementation Task Group.</p>

RISKS AND ASSUMPTIONS

7.

1. Early help is a partnership responsibility and there is a potential risk that individual agency pressures could impact on the implementation of Early Help services.
2. The fact that Doncaster has a Children's Trust is an opportunity and a risk in

that the model is unprecedented.

LEGAL IMPLICATIONS

8. A negative report from Achieving for Children could have meant that the remaining elements of the service within the Council would be subject to consideration for transfer of the service to another provider. The receipt of a positive report means that a statutory direction from the Department for Education will not be implemented. In addition, the DfE increasingly appreciated that this is a partnership response.

FINANCIAL IMPLICATIONS

9. An efficient and effective early help service is fundamental to the delivery of whole family outcomes and in particular ensuring that referrals for social care and / or more complex care are appropriate. It is, therefore a sustainable model and should in the long term reduce the cost of care both financially and to individuals and society more generally.

HUMAN RESOURCES IMPLICATIONS

10. There are no human resources issues directly arising.

EQUALITY IMPLICATIONS

11. There are positive impacts in that the Early Help offer aims to improve service delivery at the earliest point around whole families, avoid duplication and improve outcomes. There is no evidence to suggest that any of the protected characteristics are likely to be impacted negatively by the Development of the Early Help offer.

CONSULTATION

12. None applicable.

ATTACHMENTS

13. Review of Early Help Services - report of 'Achieving for Children', June – August 2016.

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**Damian Allen,
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LA INTERVENTION – HIGHLIGHT REPORT

LA Name:		DONCASTER		
Adviser:	Ian Dodds Achieving for Children	DfE case lead:	Matthew Edwards	Reporting period: June to August 2016

RAG (mark with 'X')		Status report [Overview of progress, indication of whether improvement is on track]
Current	Last report	
W		REVIEW OF EARLY HELP SERVICES
		Background
Moderate concerns		<p>I first reviewed the effectiveness of early help services in Doncaster in January 2016. The review found that the early help offer was fragmented; children whose needs could and should be met at a lower level were not identified and consistently offered support in a timely manner to prevent their needs escalating to more intrusive statutory services. In brief, the review found that:</p> <ol style="list-style-type: none"> 1. The current strategy provided a broad vision statement and direction for early help services in Doncaster with sign-up from key partners, but required greater clarity on how it would be implemented and coordinated. 2. The strategic group responsible for developing the strategy and designing the early help offer (the EHIG) had not been effective at driving its implementation. Discussions had been protracted over a two-year period and there had been a lack of pace in delivering an effective offer. 3. The Early Help Hub had been established and was becoming effective at screening referrals, so that children and young people received appropriate support from the most appropriate professional in a timely manner. The plan to co-locate the Hub with the Referral and Response Service in DCST would strengthen the application of thresholds and decision-making and reduce the likelihood of cases ping-ponging between social work and early help services. 4. The quality of early help assessments and support plans was too variable. Plans were insufficiently SMART and did not articulate the actions that were needed to deliver change and better outcomes for the child and/or family. Reviews of plans were not being held regularly so it was difficult to see how work with children and their families was progressing. 5. There was a lack of clarity about the multi-agency locality delivery model for early help services and how this would be affected by DMBC's plans to reconfigure their children's centre, family support and youth service provision, as well as planned changes to the school collaborative working arrangements.
Minor concerns		
X	X	
On track		
		<p>Initial recommendations</p> <p>Following the January review, I made three recommendations to strengthen the early help offer. These were accepted by both DMBC and DCST.</p> <ol style="list-style-type: none"> 1. Transition the Early Help Implementation Group (EHIG) into a task and finish group with specific responsibility for driving and completing the development of the early help offer. The task and finish group should include representatives from all multi-agency partners who are able to make decisions on behalf of their organisations. The task and finish group should report into the Performance and Accountability Board (PAB) in the LSCB which has overall responsibility for the improvement plan in Doncaster. It was agreed that the task and finish group would be up and running by early February 2016 and would take forward the remaining two recommendations.

2. Transfer management oversight of the Early Help Hub and co-locate it with the Referral and Response Service by mid-February 2016. As part of the transfer, DCST should ensure that the IT systems enable practitioners to consider historical concerns and risk-factors when making decisions on referrals.
3. Develop an operating model for early help services in Doncaster, building on the current vision/strategy. This should clearly define the early help offer and set out how it will be implemented through the locality delivery model. It is clear that this model will need strong coordination and so it should also include a review of the current Early Help Coordinator role. The operating model should be agreed by early March 2016 and implemented by end March 2016.

First review of progress – 4/5 May 2016

I reviewed progress on 4/5 May 2016. This involved meetings with DMBC and DCST, a focus group with early help practitioners, a review of performance information, sampling of early help assessments, plans and reviews, and follow-up telephone calls with partner agencies. I found that solid progress had been made, but that the pace of change needed to quicken further to ensure that a consistent and coherent early help offer was in place by July 2016. The progress made between January and May 2016 is summarised below:

1. The task and finish group had been established by mid-February 2016 and was meeting regularly to drive forward the improvements to the early help offer. It is co-chaired by senior leaders from children's services in DMBC and DCST and has appropriate representation from key stakeholders. Indigo Children's Services Community Interest Company, the improvement partner working for DMBC on their early help services, provide support, challenge and additional capacity.
2. The transfer and co-location of the Early Help Hub had been completed and there had been a full review of working practices and systems by the Early Help Improvement Task Group (EHITG) This Hub works effectively. There was good evidence in the review that contacts into the Hub were screened and appropriately referred for information, advice or assessment in a timely way. This had led to a reduction in the number of inappropriate referrals into DCST and fewer referrals ping-ponging between early help and social work services. Children and young people needing early help were being identified in a timely way and the very large majority were referred to the appropriate service(s) for support.
3. The first review identified that the shared ambition for early help services was good. Considerable work had been achieved in securing commitment and buy-in from schools, health services, the voluntary sector and other agencies, to create the foundations for a coherent and joined-up early help offer across the partnership. Key to this had been the provision of multi-agency training which had been attended by 267 practitioners. Feedback from partner agencies was that the training was effective and that this had significantly improved their understanding of the early help offer and interventions or support available, as well as their skills in assessment and planning. It was too early to see the full impact of this training in the quality of practice, most of which required improvement; however, evaluations of training showed that a wide range of partners were self-reporting that their practice had improved.
4. 4 FTE Early Help Coordinators were in post at the time of the first review – one allocated to each locality. An experienced manager had been recently appointed by DMBC to lead the Coordinator team. The post-holders clearly understood the requirements of their role to be: ensuring that practitioners in their locality have the support and resources they need to provide effective early help to children and young people; ensuring support is well planned and coordinated through regular multi-professional meetings focused on the needs of the child; the overall quality of work is good and child-focused; ensuring that outcomes for the child and his or her family are positive and minimise the likelihood of their needs escalating into statutory social work services. Up until May 2016, the work of the

Early Help Coordinators had been focused on process, including training practitioners and advising on the use of the electronic recording system. This had prevented them from fully taking up their responsibilities for developing the early help offer in the localities and driving up the quality of direct work with children and families. This was a capacity issue and, shortly after the review, DMBC recruited an additional 4 FTE Coordinators to enable this development work to happen.

5. There were a large number of early help cases on the electronic system which had been opened before the Early Help Hub was established. These cases were allocated to a wide range of lead practitioners in a large number of organisations including schools and the IFST and DMBC family support services. At the time of the review, there were 975 pre-Hub cases which were being followed up by Early Help Coordinators. A large number of these cases needed to be reviewed to determine whether they needed to simply be closed on the electronic recording system, or be allocated to an appropriate practitioner or service. There needed to be a renewed sense of urgency in completing the task, particularly given that there may be children who require immediate support or who are at risk of harm. DMBC rightly recognised that this task needed to be prioritised.
6. The first review noted that the core early help offer was developing but needed to be strengthened. DMBC reported that it was likely that they would be requesting a change to their contact with DCST to transfer 4 Senior Family Support Workers and 24 Family Support Workers. It is most likely that this will happen as part of the contract review process in October 2016. This would allow the DMBC family support function to be aligned with the intensive family support function in the Trust to provide a more joined-up and coherent service. The partner early help offer also required further development. The Coordinators were able to explain the services available in each locality; however, it would have been beneficial if these had been set out clearly in an operational handbook or service directory available to lead practitioners. Some partner agencies were more engaged as lead practitioners than others. Schools held the large majority of cases, and the Coordinators were aware of the need to develop the offer with a wider range of partners, particularly health services.
7. A key area of improvement noted in May 2016 was the availability and use of performance data. A comprehensive dataset was in place, which had been jointly developed by DMBC and the Trust. This enabled the Coordinators to track the progress of early help casework and provide targeted support to lead practitioners with their assessments, plans and the provision of family support. Understandably, the dataset was focused on activity data but there were plans in place to provide information on the quality of services and to evidence the impact of interventions on children and families. The planned implementation of the Outcome Star Framework (an evidence-based tool to support and measure change) will help with this development.
8. The quality of early help assessments and plans was slowly improving at the time of the first review, albeit from a low base. The Early Help Coordinators were beginning to help lead practitioners to develop SMART plans so that children and families received the support that they need from the most appropriate professional or service. There was evidence that multi-professional (Team around the Child) meetings were taking place to coordinate support and interventions. The quality of work was not yet consistent.

There were four areas where further work was needed to strengthen the early help offer before the second review in July. These were:

1. To review the pre-Hub enquiries to determine whether there were any cases that needed to be allocated to a lead practitioner for intervention.
2. To work with lead practitioners to improve the quality and consistency of early help assessments and support plans.
3. To ensure that the early help offer and menu of family interventions was clearly

articulated and understood by lead practitioners.

4. To ensure that services are able to track and measure the outcomes for children and families receiving support through coordinated early help services.

Following the review, DMBC requested a framework for my evaluation of services at the second review in July 2016. The evaluation framework is based on the descriptors of a good service set out in the Ofsted thematic inspection, Early Help: Whose Responsibility published in March 2015.

- a. How effectively are opportunities to provide early help to children and their families **identified** by all partners?
- b. Is there are clear and coordinated **early help offer** in place based on the identified needs of children and their families?
- c. How effectively do early help **assessments and plans** focus on improving outcomes for children and their families, and how well are they reviewed?
- d. Is there effective management **supervision** of early help so that casework does not drift and cases are stepped-up where a child's needs escalate?
- e. Are there clear processes for **stepping-down and stepping up** cases from social work services to provide additional support to families so that their needs do not re-escalate?
- f. Do professionals working in early help have access to multi-agency **training** and support that informs and improves their practice with children and families?
- g. Is there evidence of effective **scrutiny** and challenge of early help services by EHITG, the LSCB and others to ensure services work well together and are impactful?

Second review of progress – 11/12 July 2016

The second review of progress in July 2016 focused on evidencing the impact that the early help offer on children and families, using the evaluation framework provided at the first review. The review involved meetings with DMBC and DCST, individual meetings with the Early Help Coordinators, a focus group with early help practitioners and partner agencies, observation and case tracking in the Early Help Hub, telephone calls to five parents in receipt of early help services, case file auditing of ten multi-agency cases, and a review of performance information. The EHITG also provided a self-assessment.

Identification

At the time of the first review, there were more than 975 pre-Hub cases which required review. By 11 July 2016, this had reduced to 351 cases. All of these cases had been screened by a manager to determine there were no safeguarding concerns. Actions were put in place to provide further information, allocate the cases for assessment or close the referral.

There is good evidence that professionals from different agencies make appropriate referrals to the Early Help Hub in order to access multi-agency early help support for children and their families. There has been a 40% increase in enquiries to the Hub between November 2015 and June 2016. The Hub now receives approximately 480 enquiries per month from a range of agencies, which indicates that the early help service and local offer is now much better understood across the local partnership. The largest number of enquiries continue to come from schools (35%); however, enquiries from health services and children's centres are steadily increasing. The number of direct referrals from nurseries and childcare settings remains low; however, there is early evidence that recent training for 150 early education providers has improved their awareness. In July 2016, there were 843 active users of the case management system, which is an increase from 385 active users in May 2016. This is a significant

achievement.

The timeliness of decision-making in the Hub is a strongly improving picture. At its lowest point in February and March 2016, just 6% of early help enquiries were screened by the Hub within the expected 48 hours. This had increased to 66% by June 2016 with a good indication that the improvement trajectory will continue. There is also good evidence that the decisions on enquiries made to the Early Help Hub are appropriately managed. There are a low number of enquiries (< 5%) that are stepped-up from the Hub to Referral and Response because they meet the threshold for children's social care services. The co-location and management of the Hub with the Referral and Response Team has strengthened front door arrangements and ensured the consistent application of thresholds in line with a recently revised LSCB threshold framework. Observation and case tracking of enquiries into the Hub showed effective multi-agency information gathering to inform decision-making, as well as consultation on thresholds with the experienced social work manager who now manages the Hub. There are daily meetings between the social work manager in the Hub and the Head of the Referral and Response service to ensure effective joint working and threshold application. This is now an area of strength.

As part of the local CAMHS transformation plan, the single point of access for CAMHS services will be moving into the Hub. Two CAMHS clinicians will work as part of the Hub multi-agency team to screen enquiries and provide consultation or advice to ensure that referrals are allocated to the most appropriate service for the child. This is a welcome development.

Approximately one-third of enquiries into the Hub are allocated for a multi-agency early help assessment (34% in June 2016) and a further 23% proceed with a single-agency response. This is a relatively high rate of conversion from enquiry to assessment and is a further indicator that practitioners and agencies understand the thresholds for early help services. Information and advice is provided in response to 27% of enquiries, and 12% relate to the provision of further information on cases already open to the service. There is a very low rate of enquiries where no further action is taken by the Hub.

Early help offer

The Early Help Strategy clearly sets out the vision and direction of travel for early help services in Doncaster. There is good partnership sign-up to the principles of the strategy but further work needs to be completed by the whole partnership to clearly define how this will be local implemented by all participating agencies. An example is the lower level of participation in the multi-agency offer by Rotherham, Doncaster and South Humber (RDaSH) NHS Foundation Trust. RDaSH delivers a wide range of specialist and community health services to children and their families and therefore appropriately coordinates a health agency response internally without referring into the Hub for wider multi-agency response. The LSCB is leading work to strengthen the partnership offer and the EHITG is working closely with health colleagues to align health processes with those used in the Early Help Hub to bring them closer into the partnership.

DMBC and DCST are committed to aligning their respective family support services to strengthen their contribution to the core early help offer. This would involve transferring management of the DMBC Family Support Workers to the Trust in October 2016. Both the Council and the Trust are keen to achieve this without the need for a statutory direction from the Department for Education (see below).

The local early help offer is coordinated by 8 FTE Early Help Coordinators. Doubling the number of Coordinators since mid-May 2016 has enabled the development of the local early help offer; however, there needs to be continued focus to ensure the offer is coherent and consistent across Doncaster, and the menu of support and family interventions is widely understood by lead practitioners and partner agencies. The framework for delivering multi-agency early help services is clearly set out in an handbook for practitioners, and some details of the services available to support families are set out in the Family Guide; however, the guide is not explicit in terms of what actual services and interventions, such as parenting and behaviour support programmes, are available to lead practitioners when developing support plans. Positively, the Early Help Coordinators hold weekly network meetings with lead practitioners in their localities to troubleshoot and provide guidance on the available services. DCST has encouraged

locality-based social workers to attend these sessions to strengthen the relationship between early help and social care services. Attendance by agencies at the network meetings is improving and practitioners report that it is a valuable support to them. The network meetings have also enabled the Coordinators to identify gaps in services and the need for specific interventions within their localities. They have fed this into the commissioning priorities of the local Collaborative to improve the local early help offer.

Assessment and planning

At the time of the review, there were 1,069 active early help cases. The majority of these cases (41%) were allocated to schools as the lead agency; 27% were open to Intensive Family Support Services in DCST and 24% were open to the family support services in DMBC. 4% were open to health services and 4% to voluntary sector agencies.

42% of active cases have a completed assessment and in 51% of the cases the early help assessment is in progress. This is a strongly improving picture across all the lead practitioner agencies. The expectation is that assessments will be completed within 30 days and, at the end of June 2016, the average length of an assessment was 34 days. Again, this is a strong improvement compared to the picture in May 2016.

The quality of assessment and intervention planning remains variable across the lead practitioner agencies; however, there is early evidence that this is gradually improving. The large majority of the casework audited during the review required improvement, although there was evidence of very good early help casework in the Intensive Family Support Team (case 16019) where effective assessment, planning, intervention and direct work with the family had led to positive outcomes for a 12-year-old perpetrator of domestic violence.

In general, assessments need to be more focused and analytical. There was evidence that the quality of support plans was improving with SMART-er objectives; however, it was clear that lead practitioners are struggling to write clear outcomes in their plans that set out what needs to change for the child and his or her family. This has been recognised by the EHITG and two new training courses have been developed and implemented: a three-hour workshop on assessment and a three-hour workshop on outcomes and plans. Further work is also required to ensure that the voice of the child is fully captured and informs assessment and support planning.

There was evidence that multi-agency (TAC) meetings were being held regularly to drive forward support plans. In the majority of cases, meetings were timely (every 4 to 6 weeks) and involved the appropriate professionals and family members. In two of the audited cases, the TAC would have benefited from the involvement of CAMHS.

Quality assurance systems and processes have been strengthened. The Early Help Coordinators audit 24 cases per week and agree actions with the lead practitioner. It is not clear that this level of auditing is sustainable in the longer term but it is clear that it is having an impact on improving the quality of early help practice across all partner agencies. The overall profile of the audited casework fits with that completed as part of the review: 24% is good; 61% requires improvement; and 15% is inadequate. Themes from the audit inform the peer support work of the Coordinators and training provision. Performance data by agency is also used well to support improvement in this area. There is still too little evidence of the impact of early help work and improved outcomes for children and families. The EHITG is implementing the Outcome Star Framework and, at the time of the review, 54 lead practitioners had been trained. On an individual level, children, parents and lead practitioners were able to articulate the difference that early help interventions had made to them, particularly in relation to parental behaviour management issues. The number of early help cases closing with all planned objectives met is steadily increasing.

Supervision

In the case tracking and casework audits, there were some good examples of effective supervision and management oversight of casework. Audits showed that the Early Help

Coordinators were starting to provide effective supervision of casework. There was little evidence of drift in early help casework. On average, an early help case is open for 91 days, which is appropriate for a targeted early help intervention.

Step-up and step-down

There are agreed processes for stepping-up cases from early help to social care services, and for stepping-down cases from social care services to early help. In June 2016, 21 cases (4%) were stepped up to children's social care. The EHITG do not yet have accurate data on the number of cases that are stepped-down from social care to early help for ongoing support to prevent families' needs re-escalating. This is in the next phase of the EHITG's work programme. During the review, I did not see comprehensive evidence of the effectiveness of the transfer process; however, one lead practitioner was able to explain how she had appropriately stepped-up a case from early help due to child protection concerns, and I saw evidence of a TAC meeting considering the threshold for social care services in another case.

Training

There is a good multi-agency training offer in place. 197 practitioners have attended the full-day Delivering Early Help course for lead practitioners. This includes delegates from early years' settings (20%), health agencies (15%) and housing services (10%), in addition to those from schools and family support services. There is early evidence of the impact of the training programme on practitioner's confidence and skills in working with children and families. 44 delegates have now completed their training impact evaluations. 55% of delegates have made an enquiry to the Hub; 30% have become a lead practitioner; and 30% have started or completed an early help assessment. New training provision is being developed in response to identified needs. This includes short courses on assessment, outcome planning, managing difficult meetings and working with complex families. This will be a comprehensive training programme and an area of strength.

Scrutiny

The EHITG has been effective at driving the improvement in early help services and has picked up the pace over the last three months. The EHITG has strong oversight of the early help offer and there is a strong sense of support and challenge from all members. The EHITG reports to the Performance Accountability Board which has Chief Executive representation from key partner agencies. The LSCB receives regular reports on early help and specific performance information is included in the Board's performance report. LSCB scrutiny is effective, although some agencies reported that partners should be more challenging of each other to speed up the full development of the early help offer.

Summary

Good progress has been made since the first review in May 2016. In terms of Ofsted judgements, early help services are now firmly in the 'requires improvement' category with a trajectory moving steadily towards good. The EHITG has been effective at re-focusing improvement work and ensuring good partnership engagement in the strategy and overall direction of travel for early help services. Strong multi-agency training and promotional work by the Early Help Coordinators has ensured that practitioners in partner agencies understand early help and are confident about identifying and referring children and families who would benefit from early intervention and preventative work. Front-door arrangements for early help services have been strengthened. The co-location and management of the Early Help Hub with children's social care services has ensured that thresholds are more appropriately and consistently applied, so that children and families receive timely advice, support and interventions. The early help offer is slowly developing but continues to need greater input from some partner agencies to ensure it is comprehensive and coherent enough to prevent children's needs escalating into more intrusive statutory interventions where this is preventable. Assessments, plans and direct work with children are gradually improving. This needs to be a continued focus for the EHITG and all agencies. Training, quality assurance processes and management supervision are in place to support this and there is early evidence that these are effective. At this stage, there is limited evidence of the impact that the early help offer has made to children and their families. Collecting this evidence through the

		<p>Outcomes Star Framework will be a priority in the next phase.</p> <p>Recommendations</p> <ol style="list-style-type: none"> 1. Continue to work with all partner agencies to develop a comprehensive and coherent early help offer. There should be a particular emphasis on ensuring that the offer is sufficient in high-need areas – parenting programmes and support for behaviour management. It would be beneficial to enhance the current Family Guide so that there is a comprehensive directory of the services and interventions available to support families in each locality. 2. Continue to prioritise improvements to assessments and care planning so that they are timely and analytical with clear identification of needs and risks and have a focus on measurable goals and outcomes for children. Implement the Outcomes Star Framework so that lead practitioners are able to evidence the impact that early help interventions have had on children and their families. 3. Achieving for Children to complete a final review of the early help in March 2017, specifically focused on the impact that early help support and interventions have had on improving outcomes for children and their families.
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Progress/things going well	Issues of concern and what's being done to address them
See above.	None.

Top Risks	Probability L, M, H	Impact L, M, H	Risk Owner
None.			

Specific issues to raise/feedback to DfE case lead [From adviser or LA – policy questions, clarification]
DMBC and the Trust are keen to move forward with the agreed transfer of family support services without the need for a statutory Direction. It would be helpful if the DfE could consider how this could be achieved.

What's coming up in the next reporting period? [Key meetings, activity]
DfE six-monthly review scheduled for 30 August 2016.

**To the Chair and Members of the
Children and Young People Overview and Scrutiny Panel**

Inspections Framework Special Educational Needs and/or disabilities SEND

Relevant Cabinet Member(s)	Wards Affected	Key Decision
Cllr Nuala Fennelly Lead Member Children and Young People	ALL	No

EXECUTIVE SUMMARY

- All local areas in England will be inspected during the five year period which commenced in May 2016. Notification is given on a Monday morning, before 10 a.m., of a 5 day inspection to commence the following week.

Inspections will provide an independent external evaluation of how well a local area carries out its statutory duties in relation to children and young people with special educational needs and/or disabilities (SEND) in order to support their development. It will take into account publicly available data and focus on three key questions during the inspection week:

Question A: How effectively does the local area identify children and young people who have special educational needs and/or disabilities?

Question B: How effectively does the local area assess and meet the needs of children and young people who have special educational needs and/or disabilities?

Question C: How effectively does the local area improve outcomes for children and young people who have special educational needs and/or disabilities?

Whilst the Local Authority is taking a lead on the SEND self-evaluation planning and preparation prior to and during an inspection, this is a local area joint OFSTED/CQC inspection. The local area is defined as the geographical area and includes the local authority, clinical commissioning groups (CCGs), public health, NHS England for specialist services, early years' settings, schools and further education providers.

The 0-25 SEND Strategic Board maintains a strategic overview of performance and developments and a cross agency OFSTED/CQC Self-evaluation Planning Group is in place. The Planning Group has developed a

Self-Evaluation Framework, based upon previous OFSTED Inspections, which has been extended to include health and social care. Briefings are available for planned Focus Groups. Regular Highlight Reports have been provided for Damien Allen's Senior Leadership Team. A 'Welcome to Doncaster' pack has been prepared for the Inspection Team which includes contextual information about Doncaster, key contacts, permissions and maps.

A suite of documents and draft timetables have been prepared to ensure that key officers across all agencies can respond effectively from Day 1 of the notification period.

The Self Evaluation document has been organised to set out key strengths and areas for development in the following areas:

- Local roles and responsibilities
- Identification of SEND
- Meeting the needs of children and young people with SEND
- Improving outcomes for children and young people with SEND

The Self-Evaluation document is accompanied by comprehensive Data Booklets, 'How we...' Profiles and individual case studies.

There are three main indicators to measure the success of the SEND system:

- i) A positive experience of the SEND system for children, young people and their families: Doncaster is generally performing well on this indicator;
- ii) Positive outcomes for children, young people and their families: Doncaster is performing well for children and young people with a statutory plan but less so for those with SEN but no statutory plan; and
- iii) Effective preparation for adulthood: Doncaster is in line with the national picture in that more work needs to be done from at least Year 9 (aged 14) to prepare for and offer a range of pathways and opportunities to maximise life chances.

EXEMPT REPORT

2. This is not an exempt report.

RECOMMENDATIONS

3. That the panel note and receive the report.

WHAT DOES THIS MEAN FOR THE CITIZENS OF DONCASTER?

4. The inspection will review how Doncaster's local area supports children and young people to achieve the best possible educational and other outcomes, including being able to live independently, secure meaningful employment and be well prepared for their adult lives.

The inspection will assess the accuracy and rigour of our local area's self-evaluation: the extent to which we know our strengths and weaknesses, and what we need to do further to improve the life chances of children and young people with special educational needs and/or disabilities.

The inspection is intended to hold the local area to account but also to help improve and develop effective processes and support systems in order to deliver better outcomes for children and young people.

Parents/ carers, children and young people will be invited to speak to the inspection team through established focus groups and webinars.

BACKGROUND

5. In September 2014, new duties came into force on local areas regarding provision for children and young people with special educational needs and/or disabilities. These are contained in the Children and Families Act 2014 and amplified in regulations and in the 2015 'Special Educational Needs and Disability Code of Practice: 0 to 25 years'. OFSTED and the Care Quality Commission (CQC) are responsible for inspecting local areas on their effectiveness in fulfilling the new duties.

The SEND Reforms include a range of new duties upon the Local Authority and its partners:

- Extension of statutory rights to young people with SEND, up to the age of 25
- Publication of the local area's Local Offer for SEND provision and services in one place
- Completion of statutory Education Health Care Plans for children and young people with significant SEND within 20 weeks
- Extension of personal budgets to some education provision and coordination of support and review with health and care
- LA and Health to commission provision and services jointly
- Parental and child/ young people's voice and influence at a strategic, operational and an individual level.

OPTIONS CONSIDERED

6. This is a statutory requirement and no options are, therefore, proposed.

REASONS FOR RECOMMENDED OPTION

7. As above

IMPACT ON THE COUNCIL'S KEY OUTCOMES

8.

	Outcomes	Implications
	<p>All people in Doncaster benefit from a thriving and resilient economy.</p> <ul style="list-style-type: none"> • <i>Mayoral Priority: Creating Jobs and Housing</i> • <i>Mayoral Priority: Be a strong voice for our veterans</i> • <i>Mayoral Priority: Protecting</i> 	<ul style="list-style-type: none"> • Improving the quality and improving Outcomes across vital services for Special Education Needs and disabilities. • Increasing opportunity to contribute to Doncaster's economy

	<i>Doncaster's vital services</i>	
	<p>People live safe, healthy, active and independent lives.</p> <ul style="list-style-type: none"> • <i>Mayoral Priority: Safeguarding our Communities</i> • <i>Mayoral Priority: Bringing down the cost of living</i> 	<p>Safeguarding and protecting vulnerable children young people and adults by improving access to educational opportunity. Increasing resilience and building independency</p>
	<p>People in Doncaster benefit from a high quality built and natural environment.</p> <ul style="list-style-type: none"> • <i>Mayoral Priority: Creating Jobs and Housing</i> • <i>Mayoral Priority: Safeguarding our Communities</i> • <i>Mayoral Priority: Bringing down the cost of living</i> 	<p>Removing barriers to learning and increasing opportunity to live independently</p> <p>Enabling personal budgets to support independent living</p>
	<p>All families thrive.</p> <ul style="list-style-type: none"> • <i>Mayoral Priority: Protecting Doncaster's vital services</i> 	<p>Maximise the impact of Education Health and Care plans to sustain quality of life</p>
	<p>Council services are modern and value for money.</p>	<p>Modern and responsive to individual need through Person Centred Planning</p>
	<p>Working with our partners we will provide strong leadership and governance.</p>	<p>Joint Stakeholder and co-production to achieve defined outcomes</p>

RISKS AND ASSUMPTIONS

9. A positive inspection outcome is reliant on stakeholder engagement at a strategic and operational level.

The inspection will provide children and young people, parents, elected council members, local providers, and those who lead and manage the delivery of services at local level, with an assessment of how well the local area is meeting the needs of children and young people with SEND; and how well service providers work together to deliver positive outcomes and improve education, health and social care provision in the local area.

An inspection outcome could require the local area to consider the actions that it should take in light of the report and prepare a written statement that sets out those actions and the timetable for them.

Inspectors will respond accordingly to any concerns of a safeguarding or child protection nature.

LEGAL IMPLICATIONS

10. There are no legal implications arising from this report.

FINANCIAL IMPLICATIONS

11. Additional resources are required to maintain current and any new statutory duties; to extend stakeholder engagement; to plan and prepare in advance of an inspection; and potentially to implement further developments identified through self-evaluation or the inspection outcome report.

HUMAN RESOURCES IMPLICATIONS

12. As above

TECHNOLOGY IMPLICATIONS

13. Additional consideration is needed to implement effective information sharing across key agencies both at a strategic and an operational level.

EQUALITY IMPLICATIONS

14. Considerations under the Children and Families Act 2014 and the Equality Act 2010.

CONSULTATION

15. No formal consultation in respect of the inspection framework however engagement with all stakeholders and service users will be undertaken as part of strategic developments and the self-evaluation process over time.

BACKGROUND PAPERS

16. The following papers are included for reference:

- The framework for the inspection of local areas' effectiveness in identifying and meeting the needs of children and young people who have special educational needs and/or disabilities
- The handbook for the inspection of local areas' effectiveness in identifying and meeting the needs of children and young people who have special educational needs and/or disabilities

<https://www.gov.uk/government/publications/local-area-send-inspection-framework>

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**To the Chair and Members of the
SCHOOLS, CHILDREN AND YOUNG PEOPLE'S OVERVIEW & SCRUTINY PANEL**

DONCASTER EDUCATION ATTAINMENT SUMMARY 2016

Relevant Cabinet Member(s)	Wards Affected	Key Decision
Cllr Fennelly Lead Member Children and Young People	All	No – Information only

EXECUTIVE SUMMARY

1. This report informs the panel about the 2016 educational outcomes of children and young people aged 5, 7, 11 and 16.

EXEMPT REPORT

2. This is not an exempt report.

RECOMMENDATIONS

That the panel note;

- Challenges that are in place to the DfE, Governing Bodies and School Leaders to improve performance at all levels, including proposals for the growth of Multi-Academy Trusts
- The transformational nature of school improvement support and services within Doncaster, across the region and nationally
- That year one of the Key stage 2 Raising Achievement Initiative placed focus on writing and GPS as subjects identified as weak in 2015.
- 2016 results have reaffirmed the need to place additional focus on reading through the Key stage 2 Raising Achievement Initiative.
- Changes to the curriculum and assessment system.
- That in line with the white paper 'Educational Excellence Everywhere' the next phase of current strategies and initiatives looks to build on educational performance by building character and resilience in every child.

WHAT DOES THIS MEAN FOR THE CITIZENS OF DONCASTER?

3. Performance across different age groups in 2016 has varied with younger children again laying strong foundations to build on.

- Where focus has been placed on individual subjects through various initiatives performance has improved. However, there is still a need to ensure that Doncaster children build on the positive outcomes from a young age and translate them into better outcomes in the years of education that follow.

BACKGROUND

- In 2016 approximately 15,000 children in Doncaster were assessed at various stages of their school life. The 2015/16 academic year saw 3887 five year olds undertake Early Years Foundation Stage (EYFS) assessments, 3760 six year olds undertook Phonics screening checks, 3735 seven year olds were teacher assessed at the end of Key Stage 1, 3439
- Local authorities are held to account based on the performance of children undertaking the above assessments and tests with the 2015/16 outcomes published as follows:

Stage	Age	Date	Final/Provisional
EYFSP	5	October 2016	Final
Phonics	6	29/09/2016	Final
Key stage 1	7	29/09/2016	Final
Key stage 2	11	November	Provisional
Key stage 4 (GCSE)	16	October	Provisional

- This report covers performance of children and young people across the borough for the 2016 academic year. Where comparisons are made to previous years they are to be treated with caution due to changing calculations, curriculum and the change in reporting outcomes.
- In partnership with schools and academies the Local Authority act swiftly

Outcomes for Doncaster Children and Young People

- Early Years Foundation Stage – Good Level of Development

The percent of Doncaster children making a 'Good Level of Development (GLD)' in 2016 increased by 4.3% to 69.7% which is above the national average of 69.3%.

The table below show performance over the last three years:

	Percentage reaching a good level of development			Percentage achieving at least expected in all ELGs			Average Total Point Score		
	2014	2015	2016	2014	2015	2016	2014	2015	2016
Doncaster	53.2%	65.4%	69.7%	50.7%	63.4%	67.6%	32.0	33.6	34.4
National	60.0%	66.3%	69.3%	58.0%	64.1%	-	33.8	34.3	34.4
Diff to national	-6.8%	-0.9%	0.4%	-7.3%	-0.7%	-	-1.8	-0.7	0.0

(See appendix - Chart 15a)

The highest performing group of children is those born in the autumn of which 80.1% reach a GLD.

Girls outperform boys by 15.1% (77.4% of girls make a GLD compared to 62.3% of boys).

A lower number of children eligible for Free School Meals (FSM) make a GLD (56.2%) compared to 72.4% of those not eligible.

Children whose first language is English outperform those whose first language is other by 15.6% with 71.7% of those whose first language is English making a GLD in comparison to 56.1%.

Chart 15b in the Appendix gives a breakdown of performance against each of the pupil groups.

Performance across school pyramids varies from 63.5% in the Danum pyramid to 78.6% in the Hayfield. Seven pyramids (De Warenne, Hall Cross, Hayfield, Hungerhill, Ridgewood, Rossington All Saints and Sir Thomas Wharton) outperformed the national average.

Chart 15c in the Appendix shows the performance of pyramids against both the national and Doncaster average.

10. Phonics Screening Check

	% of cohort	Wa	Mark	LA	England	Wa 2015	Wa 2014	GLD 2015
All pupils (3747)	100%	78%	32.7	77%	81%	71%	71%	66%
Female (1836)	49%	81%	33.6	81%	-	74%	75%	74%
Male (1911)	51%	75%	31.8	75%	-	67%	68%	57%
FSM (566)	15%	64%	29.3	64%	-	58%	58%	51%
Not FSM (3181)	85%	80%	33.3	80%	-	74%	75%	69%
EHCP (16)	0%	19%	14.9	10%	-	38%	21%	18%
SEN support (367)	10%	32%	20.3	32%	-	24%	35%	14%
No SEN (3333)	89%	83%	34.2	83%	-	77%	78%	70%
English (3294)	88%	79%	33.0	78%	-	72%	72%	67%
EAL (453)	12%	71%	30.8	71%	-	63%	64%	53%

The percentage of year 1 achieving the expected standard has increased 7 percentage points since 2015, with girls being the highest performing cohort. Pupils in receipt of SEN support have the lowest percentage of pupils achieving the measure however this is a vast improvement from previous years and is in line with national.

See Charts 16a, 16b and 16c in the Appendix

Pupils in the Balby Carr pyramid are the least likely in Doncaster to achieve the expected standard of phonic decoding, falling considerably below national and Doncaster averages. There are 6 pyramids where the national average is met with Sir Thomas Wharton having the highest proportion of pupils meet this measure.

11. KEY STAGE 1

Key Stage 1 codes:	
GDS	Working at greater depth at the expected standard
EXS+	Working at the expected standard or above (EXS and GDS)
EXS	Working at the expected standard
WTS	Working towards expected standard
PKF	Pre-key stage foundation
BLW	Below the standard of the pre-key stage

Figures in the teacher assessment (TA) sections of the tables include pupils from special schools, whereas figures in the LA column do not include these pupils and this is often reflected in a difference in the score breakdown of special educational need pupils.

Key Stage 1 Reading, Writing and Maths combined

	% of cohort	TA	LA	England
		EXS+	EXS+	EXS+
All pupils (3711)	100%	58%	58%	60%
Female (1833)	49%	63%	63%	66%
Male (1878)	51%	54%	53%	55%
Pupil prem. (1147)	31%	44%	44%	46%
Not PP (2564)	69%	65%	65%	63%
EHCP (31)	1%	16%	10%	8%
SEN support (465)	13%	11%	11%	17%
No SEN (3183)	86%	66%	66%	68%
English (3293)	89%	60%	59%	61%
EAL (386)	10%	50%	50%	59%

In Doncaster 58% of pupils achieved at least the expected standard in reading, writing and mathematics, two percentage points lower than national. There is a higher percentage of pupils achieving this combined measure with no special educational needs than any other cohort. There is a large gender gap seen in this measure nationally, of which is also seen in Doncaster. Pupil premium students in Doncaster perform better than their peers nationally.

See Chart 17a in the Appendix

Key Stage 1 Reading

	% of cohort	Teacher assessment						LA	England
		EXS+	GDS	EXS	WTS	PKF	BLW	EXS+	EXS+
All pupils (3711)	100%	70%	20%	50%	20%	7%	2%	70%	74%
Female (1833)	49%	75%	23%	51%	18%	5%	2%	75%	79%
Male (1878)	51%	66%	17%	49%	22%	10%	3%	65%	70%
Pupil prem. (1147)	31%	58%	10%	47%	27%	11%	4%	57%	62%
Not PP (2564)	69%	76%	24%	51%	17%	6%	2%	75%	77%
EHCP (31)	1%	23%	10%	13%	23%	26%	26%	13%	14%
SEN support (465)	13%	22%	3%	19%	36%	32%	9%	22%	32%
No SEN (3183)	86%	78%	23%	55%	17%	3%	1%	78%	82%
English (3293)	89%	72%	21%	50%	19%	6%	2%	71%	75%
EAL (386)	10%	61%	11%	49%	23%	14%	3%	61%	70%
EYFS 1 (35)	1%	66%	11%	54%	17%	11%	6%	66%	-
EYFS 2 (36)	1%	72%	25%	47%	19%	6%	3%	70%	-
EYFS 3 (37)	1%	65%	30%	35%	22%	14%	0%	63%	-
Wt (393)	11%	7%	0%	6%	32%	46%	14%	7%	-
Wa Y2 (707)	19%	40%	1%	39%	49%	10%	2%	40%	-
Wa Y1 (2546)	69%	89%	29%	60%	10%	1%	1%	89%	-

In Doncaster 70% of pupils achieve at least the expected standard in reading, compared to 74% nationally. Pupils who achieved the expected standard of phonic decoding in year 1 were much more likely to achieve the expected standard in reading than those who passed phonics in year 2 or were working toward achieving it. The highest performing cohort are those with no special educational need, yet is below national. There is a large disparity between Doncaster and national pupils who receive SEN support – a 10 percentage point difference.

See Chart 17b in the Appendix

Key Stage 1 Writing

	% of cohort	Teacher assessment						LA	England
		EXS+	GDS	EXS	WTS	PKF	BLW	EXS+	EXS+
All pupils (3711)	100%	64%	12%	53%	26%	7%	2%	64%	66%
Female (1833)	49%	71%	15%	56%	22%	5%	2%	71%	73%
Male (1878)	51%	58%	8%	50%	30%	9%	3%	57%	59%
Pupil prem. (1147)	31%	50%	6%	44%	35%	10%	5%	50%	52%
Not PP (2564)	69%	71%	14%	57%	22%	6%	1%	70%	69%
EHCP (31)	1%	19%	3%	16%	32%	19%	26%	12%	10%
SEN support (465)	13%	14%	1%	13%	44%	31%	10%	14%	21%
No SEN (3183)	86%	72%	13%	59%	23%	3%	1%	72%	74%
English (3293)	89%	66%	12%	54%	26%	6%	2%	65%	66%
EAL (386)	10%	56%	8%	48%	28%	14%	2%	56%	64%
EYFS 1 (35)	1%	60%	17%	43%	29%	6%	6%	60%	-
EYFS 2 (36)	1%	75%	17%	58%	17%	6%	3%	73%	-
EYFS 3 (37)	1%	65%	11%	54%	19%	16%	0%	63%	-
Wt (393)	11%	4%	0%	4%	38%	43%	14%	4%	-
Wa Y2 (707)	19%	30%	0%	30%	58%	9%	2%	30%	-
Wa Y1 (2546)	69%	83%	16%	67%	15%	1%	1%	83%	-

In Doncaster 64% of pupils achieve at least the expected standard in writing, two percentage points below national. There is a 14 percentage point difference between the genders which is evident in both Doncaster and national scores. The biggest difference to national is seen in the the SEN support cohort in Doncaster.

See Chart 17c in the Appendix

Key stage 1 Mathematics

	% of cohort	Teacher assessment						LA	England
		EXS+	GDS	EXS	WTS	PKF	BLW	EXS+	EXS+
All pupils (3711)	100%	71%	17%	54%	22%	6%	2%	70%	73%
Female (1833)	49%	71%	16%	55%	22%	5%	2%	71%	74%
Male (1878)	51%	70%	18%	52%	21%	7%	2%	69%	72%
Pupil prem. (1147)	31%	58%	9%	49%	29%	9%	3%	57%	59%
Not PP (2564)	69%	76%	20%	56%	18%	5%	1%	76%	76%
EHCP (31)	1%	26%	6%	19%	32%	10%	29%	15%	14%
SEN support (465)	13%	25%	4%	21%	41%	26%	7%	25%	33%
No SEN (3183)	86%	78%	19%	59%	19%	3%	1%	78%	80%
English (3293)	89%	71%	17%	54%	21%	5%	2%	71%	73%
EAL (386)	10%	65%	13%	52%	24%	9%	2%	65%	71%
Num 1 (1404)	38%	43%	2%	41%	41%	13%	3%	42%	-
Num 2 (1795)	48%	90%	22%	68%	9%	0%	1%	90%	-
Num 3 (295)	8%	98%	61%	37%	1%	0%	1%	98%	-
SSM 1 (1123)	30%	35%	1%	34%	45%	16%	4%	34%	-
SSM 2 (2019)	54%	87%	19%	69%	12%	1%	1%	87%	-
SSM 3 (352)	9%	100%	64%	36%	0%	0%	0%	100%	-

Nationally, 73% of pupils achieved at least the expected standard in maths with 3 percentage point fewer pupils achieving this measure in Doncaster. There is a slightly higher percentage of pupils with a statement or EHC plan in Doncaster achieving above the expected standard than there is nationally. There is a smaller gender gap in this measure compared to reading and writing with boys scoring slightly below girls.

See Chart 17d in the Appendix

Key Stage 1 Science

	% of cohort	Teacher assessment		LA	England
		EXS	HNM	EXS	EXS
All pupils (3711)	100%	79%	21%	78%	82%
Female (1833)	49%	81%	19%	81%	84%
Male (1878)	51%	77%	23%	76%	79%
Pupil prem. (1147)	31%	67%	33%	66%	71%
Not PP (2564)	69%	84%	16%	84%	84%
EHCP (31)	1%	32%	65%	19%	17%
SEN support (465)	13%	33%	67%	33%	46%
No SEN (3183)	86%	86%	14%	86%	89%
English (3293)	89%	80%	19%	80%	84%
EAL (386)	10%	68%	31%	68%	76%

Nationally, 82% of pupils achieve the expected standard in science whereas 78% of Doncaster pupils achieve this measure. The largest difference to national is seen in the SEN support cohort, with a 13 percentage point difference. Although pupils with a statement/EHC plan have the lowest percentage achieving this measure across the cohort, they perform above their national peers.

See Chart 17e in the Appendix

Key Stage 1 Children in Care Results

Results below are the percentage of pupils achieving at least the expected standard in each measure. 'ALL' refers to all pupils in care, whereas OC2 children are those who have been in care for 12 months as at 1st April. Figures do not include children who are looked after by Doncaster local authority but live and attend as school outside the borough.

Group	Cohort	RWM	Reading	Writing	Maths	Science
Doncaster		58%	70%	64%	70%	78%
ALL	17	35%	47%	35%	59%	65%
ALL Boys	9	22%	44%	22%	67%	67%
ALL Girls	8	50%	50%	50%	50%	63%
ALL No SEN	12	42%	50%	42%	67%	75%
ALL Support	2	50%	100%	50%	100%	100%
ALL EHCP/St	3	0%	0%	0%	0%	0%
OC2	13	31%	46%	31%	62%	69%
OC2 Boys	9	22%	44%	22%	67%	67%
OC2 Girls	4	50%	50%	50%	50%	75%
OC2 No SEN	8	38%	50%	38%	75%	88%
OC2 Support	2	50%	100%	50%	100%	100%
OC2 EHCP/St	3	0%	0%	0%	0%	0%

It is difficult to compare the scores of such small cohorts to Doncaster figures and analysis will therefore lack statistical significance. Children in care perform most poorly in measures of writing with this affecting their combined reading, writing and mathematics scores. There is a tendency for girls to perform better than boys in most subjects.

12. KEY STAGE 2

Key Stage 2 codes:	
GDS/High	Working at greater depth at the expected standard
EXS	Working at the expected standard
WTS	Working towards expected standard
PKF	Pre-key stage foundation
BLW	Below the standard of the pre-key stage

Figures in the test and teacher assessment (TA) sections of the tables include pupils from special schools, whereas figures in the LA column do not include these pupils and this is often reflected in a difference in the score breakdown of special educational need pupils.

Key Stage 2 Reading, Writing and Maths combined

	% of cohort	Test		LA	England
		Exp+	High	Exp+	Exp+
All pupils (3368)	100%	46%	3%	46%	53%
Female (1673)	50%	49%	4%	49%	57%
Male (1695)	50%	44%	3%	43%	50%
Pupil prem. (1352)	40%	34%	1%	33%	39%
Not PP (2016)	60%	55%	5%	54%	60%
EHCP (65)	2%	15%	0%	9%	7%
SEN support (504)	15%	10%	0%	10%	16%
No SEN (2782)	83%	54%	4%	54%	62%
English (3084)	92%	48%	3%	47%	54%
EAL (267)	8%	32%	1%	32%	50%
W+ (76)	2%	0%	0%	0%	
1+ (607)	18%	8%	0%	8%	
2C+ (658)	20%	26%	0%	26%	
2B+ (973)	29%	51%	1%	51%	
2A+ (652)	19%	85%	4%	85%	
3 (280)	8%	95%	25%	95%	

46% of key stage 2 pupils in Doncaster achieve at least the expected standard in measures of reading, writing and mathematics which is 7 percentage points below national average. Not pupil premium students and pupils without special educational needs perform the best out of the cohorts, yet fall below national comparatives. Both genders perform considerably below their national peers by 7 and 8 percentage points.

See Chart 18a in the Appendix

Key Stage 2 Reading

	% of cohort	Test				Teacher assessment						LA	England
		Score	Exp+	High	Progress	EXS	HNM	PKG	PKE	PKF	BLW	Exp+	Exp+
All pupils (3382)	100%	100	56%	11%	-1.9	78%	17%	4%	1%	1%	0%	58%	66%
Female (1679)	50%	101	59%	13%	-1.6	82%	14%	3%	1%	1%	0%	61%	70%
Male (1703)	50%	100	53%	10%	-2.2	73%	19%	4%	2%	1%	0%	56%	62%
Pupil prem. (1359)	40%	98	44%	6%	-2.8	68%	23%	6%	2%	1%	0%	47%	53%
Not PP (2023)	60%	102	64%	15%	-1.3	84%	13%	2%	1%	1%	0%	65%	72%
EHCP (65)	2%	189	26%	2%	-3.3	37%	26%	11%	12%	3%	3%	43%	14%
SEN support (511)	15%	94	23%	2%	-3.6	38%	40%	14%	4%	2%	0%	27%	32%
No SEN (2789)	82%	101	63%	14%	-1.6	86%	12%	2%	0%	0%	0%	64%	74%
English (3098)	92%	101	58%	12%	-1.9	79%	16%	3%	1%	1%	0%	60%	67%
EAL (267)	8%	96	36%	4%	-1.9	61%	21%	12%	2%	2%	1%	41%	58%
W (51)	2%	89	2%	0%	-1.9	6%	28%	36%	17%	4%	4%	5%	-
1 (441)	13%	91	15%	0%	-2.5	29%	51%	13%	5%	2%	0%	17%	-
2C (362)	11%	95	32%	1%	-2.6	58%	37%	4%	1%	1%	0%	34%	-
2B (821)	24%	98	43%	3%	-2.5	82%	16%	1%	0%	0%	0%	43%	-
2A (841)	25%	103	74%	12%	-1.4	96%	4%	0%	0%	0%	0%	74%	-
3 (743)	22%	108	94%	35%	-1.2	100%	0%	0%	0%	0%	0%	94%	-

Nationally, there was 66% of pupils achieving at least the expected standard whereas in Doncaster there was a smaller proportion of pupils achieving this measure at 58%. The largest disparity between Doncaster's and national average is seen in pupils with English as an additional language, with a 17 percentage point difference. Doncaster pupils with a statement/EHC plan perform considerably above their national peers in this measure.

See Chart 18b in the Appendix

Key stage 2 Writing

	% of cohort	Teacher assessment									LA	England
		EXS+	GDS	EXS	WTS	PKG	PKE	PKF	BLW	Progress	EXS+	EXS+
All pupils (3368)	100%	74%	11%	63%	17%	5%	2%	1%	1%	-0.5	73%	74%
Female (1673)	50%	80%	14%	66%	13%	4%	1%	0%	1%	0.4	80%	81%
Male (1695)	50%	68%	8%	60%	21%	7%	2%	1%	1%	-1.3	66%	68%
Pupil prem. (1352)	40%	64%	5%	58%	23%	9%	3%	1%	1%	-1.3	62%	64%
Not PP (2016)	60%	81%	15%	66%	13%	3%	1%	1%	0%	0.1	80%	79%
EHCP (65)	2%	29%	2%	28%	26%	22%	12%	5%	3%	-3.6	16%	13%
SEN support (504)	15%	29%	0%	29%	42%	18%	6%	4%	0%	-3.6	29%	32%
No SEN (2782)	83%	84%	13%	70%	12%	3%	0%	0%	1%	0.2	84%	84%
English (3084)	92%	76%	12%	64%	17%	5%	1%	1%	1%	-0.5	74%	75%
EAL (267)	8%	58%	6%	52%	22%	15%	2%	1%	1%	0.2	58%	73%
W (68)	2%	4%	0%	4%	21%	44%	18%	9%	3%	-2.5	4%	-
1 (538)	16%	26%	0%	26%	47%	17%	5%	3%	1%	-1.9	26%	-
2C (615)	18%	64%	1%	63%	29%	5%	1%	0%	1%	-1.1	64%	-
2B (936)	28%	89%	5%	84%	9%	1%	0%	0%	1%	-0.4	89%	-
2A (712)	21%	98%	17%	80%	2%	0%	0%	0%	0%	0.1	98%	-
3 (376)	11%	100%	51%	49%	0%	0%	0%	0%	0%	0.0	100%	-

There is a similar proportion of pupils in Doncaster achieving at least the expected standard to national in key stage 2 writing, with 11% of pupils achieving a greater depth of understanding. As like in other key stage 2 measures, pupils with a first language other than English perform significantly below national in the percentage of pupils achieving at least the expected standard. There is a considerable gap between the genders, 14 percentage points, a gap that is mirrored nationally.

See Chart 18c in the Appendix

Key Stage 2 Mathematics

	% of cohort	Test				Teacher assessment						LA	England
		Score	Exp+	High	Progress	EXS	HNM	PKG	PKE	PKF	BLW	Exp+	Exp+
All pupils (3382)	100%	102	64%	12%	-0.8	77%	18%	3%	1%	1%	0%	66%	70%
Female (1679)	50%	102	64%	12%	-1.3	78%	18%	3%	1%	1%	0%	65%	70%
Male (1703)	50%	102	65%	13%	-0.4	76%	18%	4%	2%	1%	0%	67%	70%
Pupil prem. (1359)	40%	100	52%	6%	-1.7	67%	24%	6%	2%	1%	0%	55%	57%
Not PP (2023)	60%	103	72%	16%	-0.3	84%	13%	2%	1%	1%	0%	73%	76%
EHCP (65)	2%	195	34%	5%	-2.7	35%	26%	9%	15%	6%	0%	48%	14%
SEN support (511)	15%	96	30%	2%	-2.4	39%	41%	13%	4%	2%	0%	33%	36%
No SEN (2789)	82%	103	72%	14%	-0.5	85%	13%	1%	0%	0%	0%	72%	78%
English (3098)	92%	102	65%	13%	-1.0	78%	17%	3%	1%	0%	0%	67%	69%
EAL (267)	8%	101	58%	10%	1.2	68%	19%	8%	3%	2%	0%	62%	72%
W (25)	1%	88	0%	0%	-1.6	0%	24%	43%	19%	10%	0%	0%	0%
1 (267)	8%	92	12%	0%	-0.3	17%	54%	14%	9%	4%	0%	14%	0%
2C (488)	14%	96	30%	0%	-0.7	50%	42%	6%	1%	0%	0%	31%	0%
2B (896)	26%	100	57%	2%	-0.9	79%	19%	2%	0%	0%	0%	57%	0%
2A (954)	28%	104	87%	13%	-0.8	95%	4%	0%	0%	0%	0%	87%	0%
3 (629)	19%	109	96%	44%	-1.1	99%	1%	0%	0%	0%	0%	96%	0%

In Doncaster 66% of pupils reached at least the expected standard in mathematics whereas nationally, 70% of pupils achieved this measure. There is a considerably higher percentage of pupils with a statement/EHC plan achieving at least the expected standard (48%) than national average (14%). All other cohorts perform around two percentage points below their national counterparts.

See Chart 18d in the Appendix

Key Stage 2 Science

	% of cohort	Teacher assessment		LA	England
		EXS	HNM	EXS	EXS
All pupils (3368)	100%	80%	20%	79%	81%
Female (1673)	50%	82%	18%	81%	83%
Male (1695)	50%	78%	21%	76%	79%
Pupil prem. (1352)	40%	71%	29%	69%	71%
Not PP (2016)	60%	86%	14%	85%	86%
EHCP (65)	2%	38%	60%	21%	18%
SEN support (504)	15%	44%	56%	44%	47%
No SEN (2782)	83%	88%	12%	88%	89%
English (3084)	92%	82%	18%	80%	82%
EAL (267)	8%	67%	32%	67%	77%
W (13)	0%	0%	100%	0%	0%
1 (287)	9%	28%	72%	28%	0%
2 (2305)	68%	84%	16%	83%	0%
3 (639)	19%	99%	1%	99%	0%

There is a two percentage point difference between the percentage of pupils achieving at least the expected standard in key stage 2 science between Doncaster and national pupils. Most cohorts score around two percentage points lower than their national peers with the exception of pupils with a statement/EHC plan who perform three percentage points above.

See Chart 18e in the Appendix

Key Stage 2 Grammar, Punctuation and Spelling

	% of cohort	Test			LA	England
		Score	Exp+	High	Exp+	Exp+
All pupils (3382)	100%	102	66%	17%	68%	72%
Female (1679)	50%	104	72%	21%	73%	78%
Male (1703)	50%	101	59%	13%	62%	67%
Pupil prem. (1359)	40%	100	54%	10%	57%	60%
Not PP (2023)	60%	104	73%	23%	74%	78%
EHCP (65)	2%	193	28%	3%	42%	14%
SEN support (511)	15%	95	23%	2%	25%	31%
No SEN (2789)	82%	104	75%	21%	75%	82%
English (3098)	92%	103	67%	18%	68%	72%
EAL (267)	8%	100	54%	13%	58%	73%

68% of pupils in Doncaster at key stage 2 achieve at least the expected standard in tests of grammar punctuation and spelling, whereas the national average was 4 percentage points above that at 72%. There is a large gender gap that is also seen nationally, with both genders in Doncaster performing 5 percentage points lower than their national peers. Of the small cohort of pupils in Doncaster with a statement/EHC plan, 42% meet the expected standard in grammar, punctuation and spelling which is significantly higher than their national counterparts.

See Chart 18f in the Appendix

Comparison between test and teacher assessment at key stage 2

See Charts 18g and 18h in the Appendix commentary/analysis

Key Stage 2 Children in Care Results

Results below are the percentage of pupils achieving at least the expected standard in each measure. 'ALL' refers to all pupils in care, whereas OC2 children are those who have been in care for 12 months as at 1st April. Figures do not include children who are looked after by Doncaster local authority but live and attend as school outside the borough.

Group	Cohort	RWM	Reading	Writing	Maths	GPS	Science
Doncaster		46%	55%	73%	63%	65%	79%
ALL	28	29%	46%	43%	46%	36%	43%
ALL Boys	14	14%	29%	29%	50%	14%	29%
ALL Girls	14	43%	64%	57%	43%	57%	57%
ALL No SEN	11	55%	64%	64%	73%	64%	64%
ALL Support	12	17%	42%	33%	42%	25%	33%
ALL EHCP/St	5	0%	20%	20%	0%	0%	20%
OC2	23	30%	43%	43%	52%	35%	43%
OC2 Boys	14	14%	29%	29%	50%	14%	29%
OC2 Girls	9	56%	67%	67%	56%	67%	67%
OC2 No SEN	8	63%	63%	75%	88%	63%	75%
OC2 Support	11	18%	36%	27%	45%	27%	27%
OC2 EHCP/St	4	0%	25%	25%	0%	0%	25%

It is difficult to compare the scores of such small cohorts to Doncaster figures and analysis will therefore lack statistical significance. Children in care perform most poorly in measures of grammar, punctuation and spelling, with boys much less likely to achieve this measure. OC2 pupils perform well in mathematics, with more pupils achieving at least the expected standard than children in care that were not OC2.

13. KEY STAGE 4

Key Stage 4 GCSE Results (Provisional)

Key Stage 4 GCSE Results (Provisional)	
5 + A* to C including English & mathematics	55.9%
A* to C in English and mathematics	59.5%
A* to C English	70.5%
A* to C mathematics	67.3%
Progress 8	-0.04
Attainment 8	47.7
Achieving E-Bacc	16.0%

Over half of key stage 4 pupils in Doncaster achieve at least five GCSEs grades A* to C including English and mathematics, with nearly 60% of pupils achieving A* to C in both English and mathematics GCSEs. There is a higher percentage of pupils achieving A* to C in English than there is in mathematics GCSE. Pupils in Doncaster make slightly less progress expected.

Key Stage 4 Children in Care GCSE Results (Provisional)

Key Stage 4 GCSE Results (Provisional)	
5 + A* to C including English & mathematics	3%
5+ A* to G	50%
A* to C English	29%
A* to C mathematics	14%
Attainment 8	2.30
Achieving E-Bacc	0%

A small percentage of children in care achieve five or more GCSEs including English and mathematics but half achieve at least five GCSEs A* to G. There is a higher percentage of pupils achieving A* to C in English than mathematics but no pupils achieve the E-baccalaureate.

OPTIONS CONSIDERED

14. There are no options as the report is for information

REASONS FOR RECOMMENDED OPTION

15. There are no options as the report is for information

IMPACT ON THE COUNCIL'S KEY OUTCOMES

Outcomes	Implications
All people in Doncaster benefit from a thriving and resilient economy.	Good education enables us to prepare our children and young people for employment in the future. In turn helping the economy to grow and flourish.
All families thrive	As above, a good education supports families to thrive by preparing children and young people for future employment

RISKS AND ASSUMPTIONS

16. Assumptions:
- a. Doncaster schools are challenged by their governing body, the Local Authority, the DfE and Ofsted about their examination and test outcomes for all children at all stages.
 - b. Governing bodies are responsible for ensuring the school development plans are in place to address low attainment and progress
 - c. Schools are responsible for the purchase of high quality training and support from a range of sources to improve teaching and learning
 - d. The Local Authority is not the provider of training and support, but acts to challenge providers when the results are too low.
 - e. The Local Authority and partners monitor results and progress and exercises duties in accordance with a published Doncaster School Improvement Policy.
 - f. Schools, academies and partners will respond appropriately to issues associated with changes to exam systems.
17. Risks:
- a. New measures and tests could result in a lack of consistency when comparing performance year on year.
 - b. New measures mean we want have an accurate picture of progress or schools below floor standard until December.

LEGAL IMPLICATIONS

18. Section 13 of the education act 1996 states that a local authority shall (so far as their powers enable them to do so) contribute towards the spiritual, moral, mental and physical development of the community by securing that efficient primary, secondary and further education are available to meet the needs of the population in their areas.
19. This duty is extended by Section 13A which requires a local authority in England to ensure that their relevant education functions and the relevant training functions are (so far as capable of being so exercised) exercised by the authority with a view to promoting high standards, ensuring fair access to opportunity for education and training, and promoting the fulfilment of learning potential by every person under the age of 20 and aged 20 or over but under 25 who are subject to a learning difficulty assessment.

FINANCIAL IMPLICATIONS

20. There are no specific financial implications relating to the recommendations in this report

HUMAN RESOURCES IMPLICATIONS

21. There are no specific Human Resources implications relating to the recommendations in this report.

TECHNOLOGY IMPLICATIONS

22. Not applicable

EQUALITY IMPLICATIONS

23. The equality of expectation for all children is a core value within all aspects of the work undertaken in education settings and underpins the support and challenge provided by officers.

CONSULTATION

24. No further consultation was undertaken for this report

BACKGROUND PAPERS

25. Education Excellence Everywhere

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Chart 15a - Good Level of Development (GLD over the past three years)

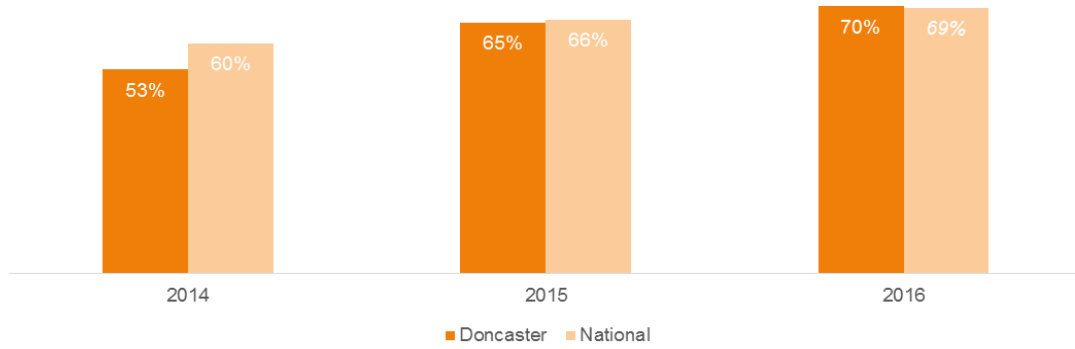


Chart 15b – Percentage of pupils achieving GLD in 2016 by demographic groups

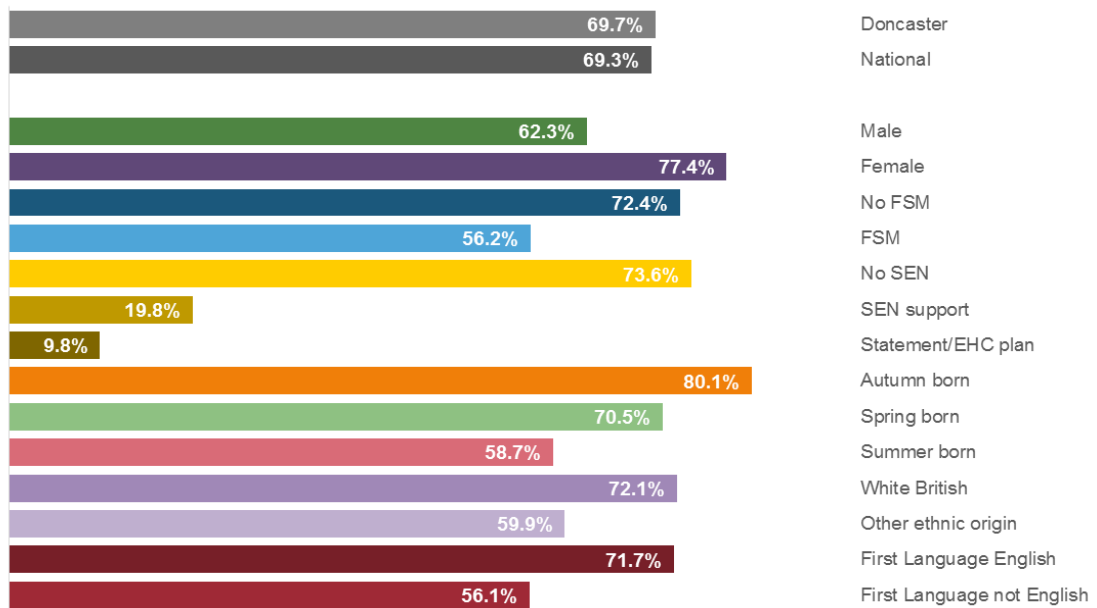
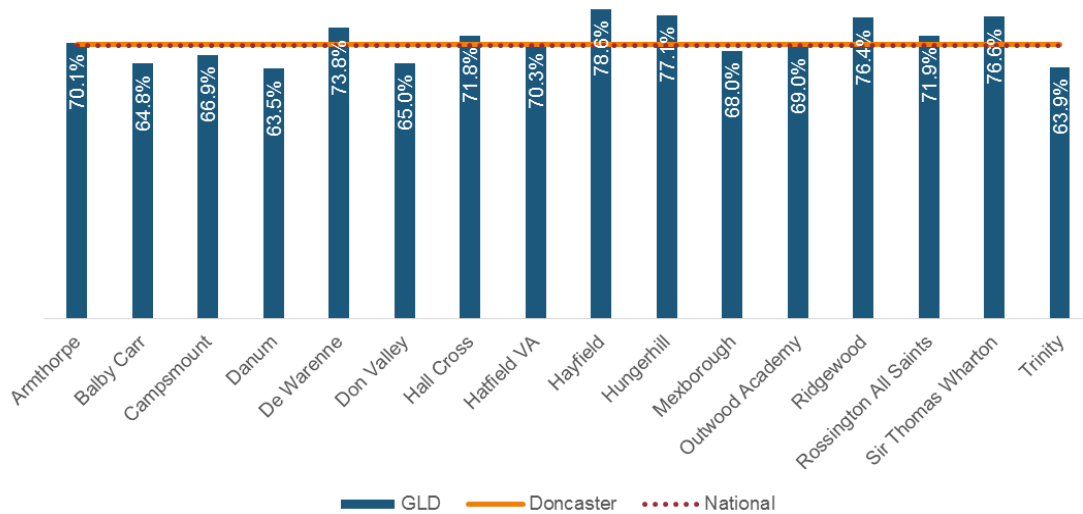


Chart 15c – Percentage of pupils achieving a GLD by school pyramid



Phonics

Chart 16a – percentage of pupils working at the expected level in Y1 Phonics

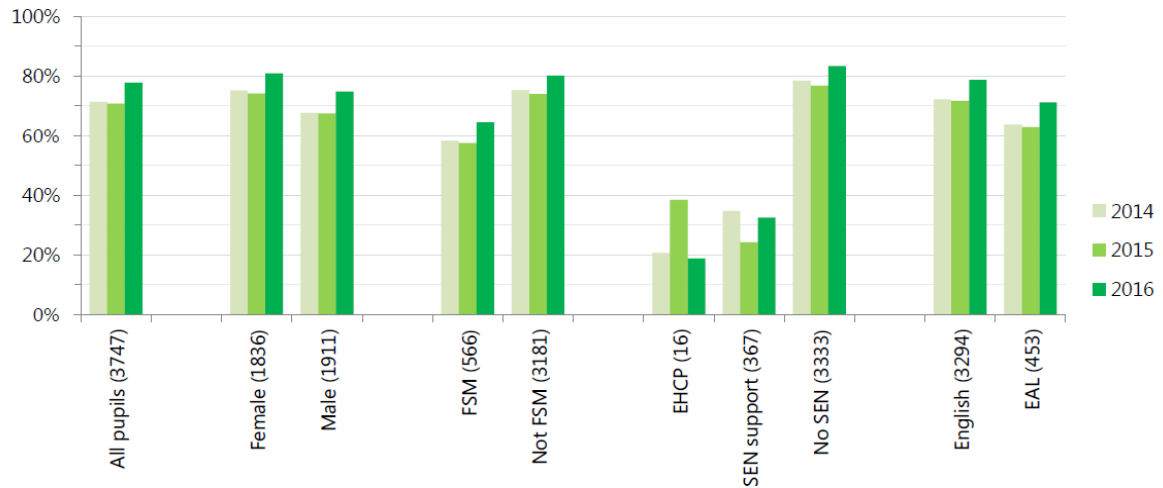


Chart 16b – The average mark in the Phonics Screening check by pupil demographics (NB: Pupils were required to reach a mark of 32 to work at the expected standard)

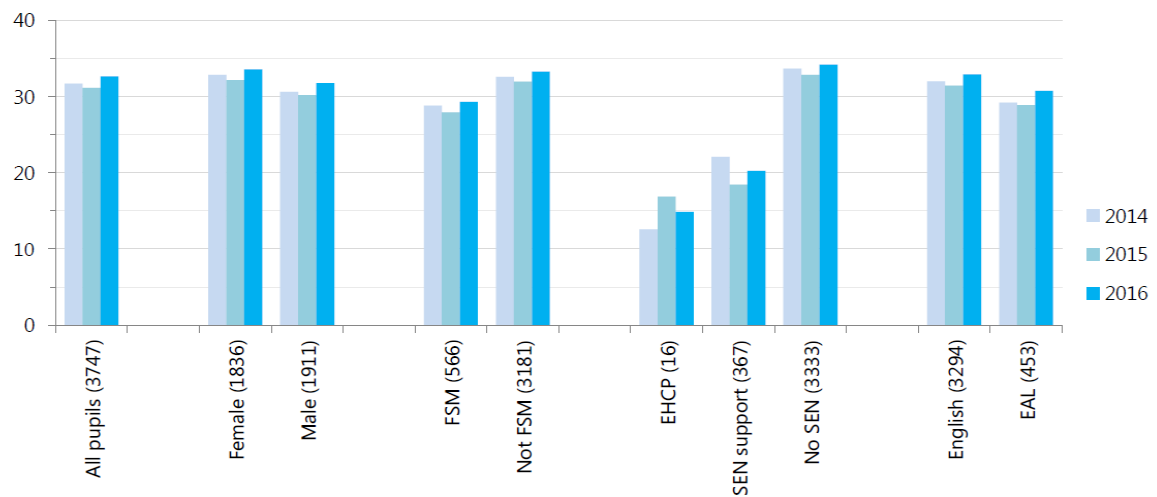


Chart 16c – Percentage of pupils working at the expected standard in Phonics by school pyramid

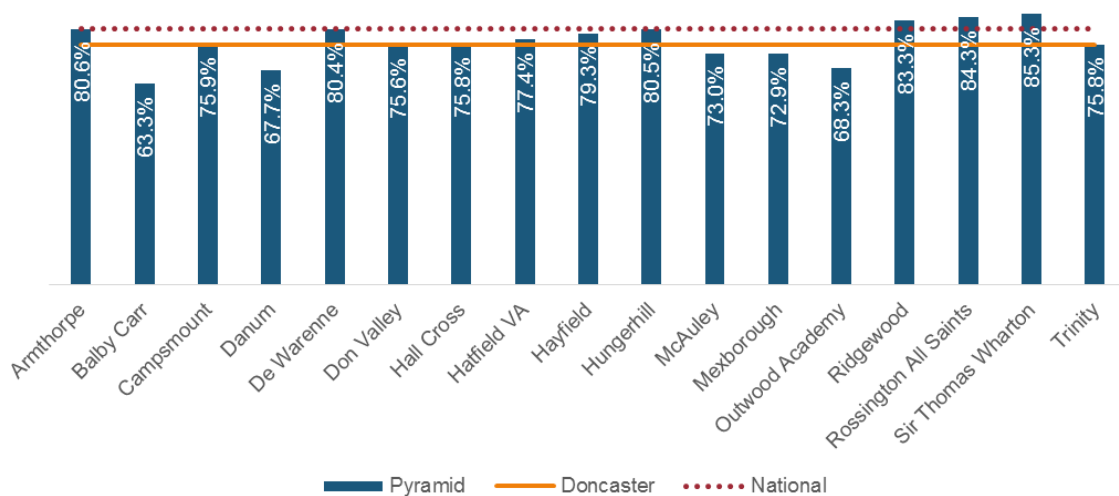


Chart 17a – Percentage of pupils at Key Stage 1 achieving at least the expected standard in reading, writing and maths combined by pupil demographic groups (The grey diamonds are the relative national average)

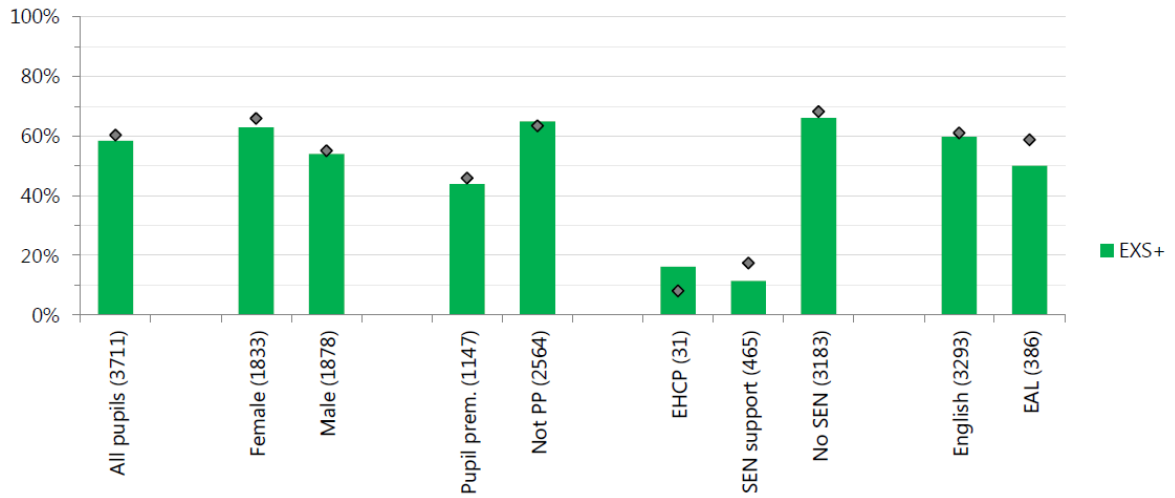


Chart 17b – Grade distribution of Key Stage 1 reading by demographic groups

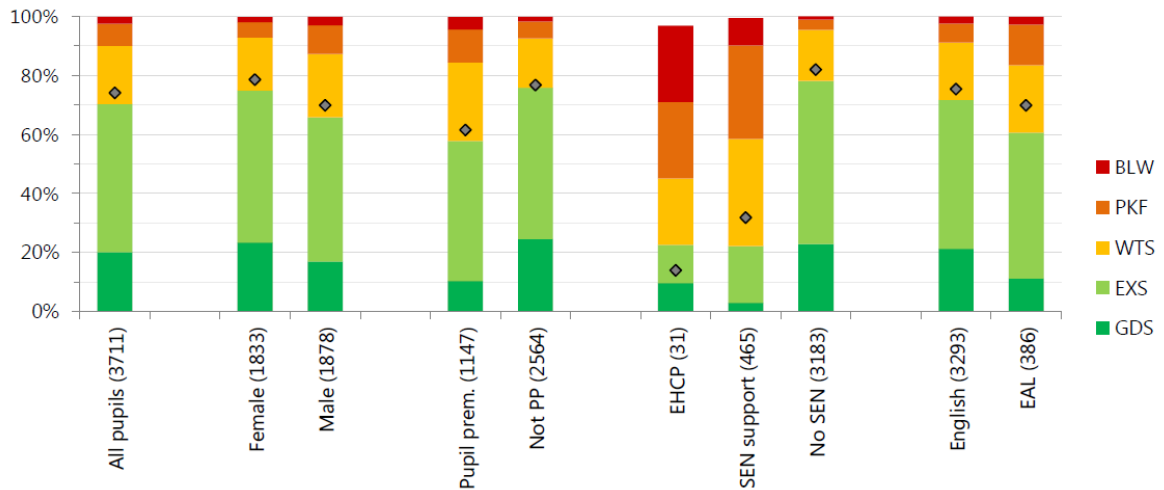


Chart 17c – Grade distribution of Key Stage 1 writing by demographic groups

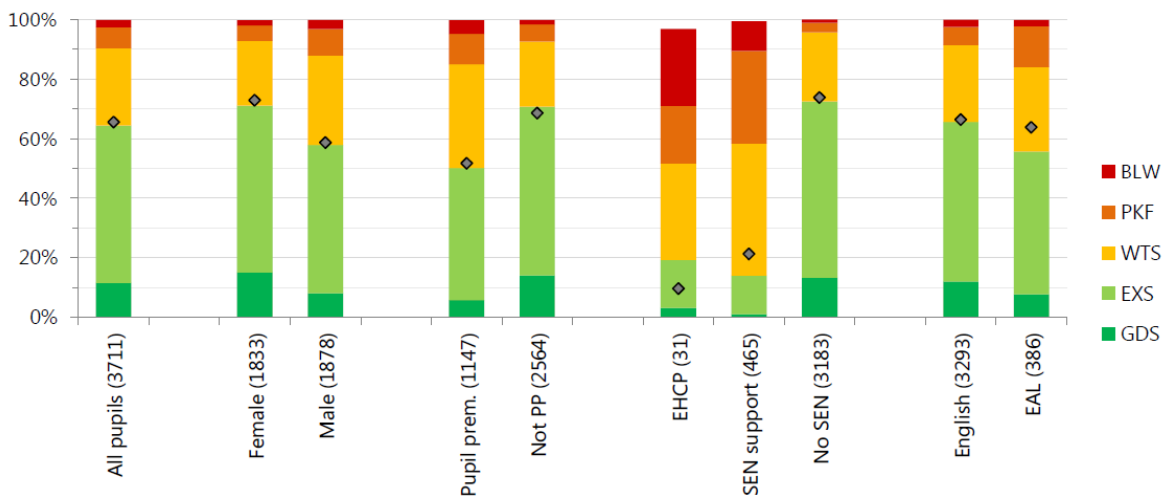


Chart 17d – Grade distribution of Key Stage 1 mathematics by demographic groups

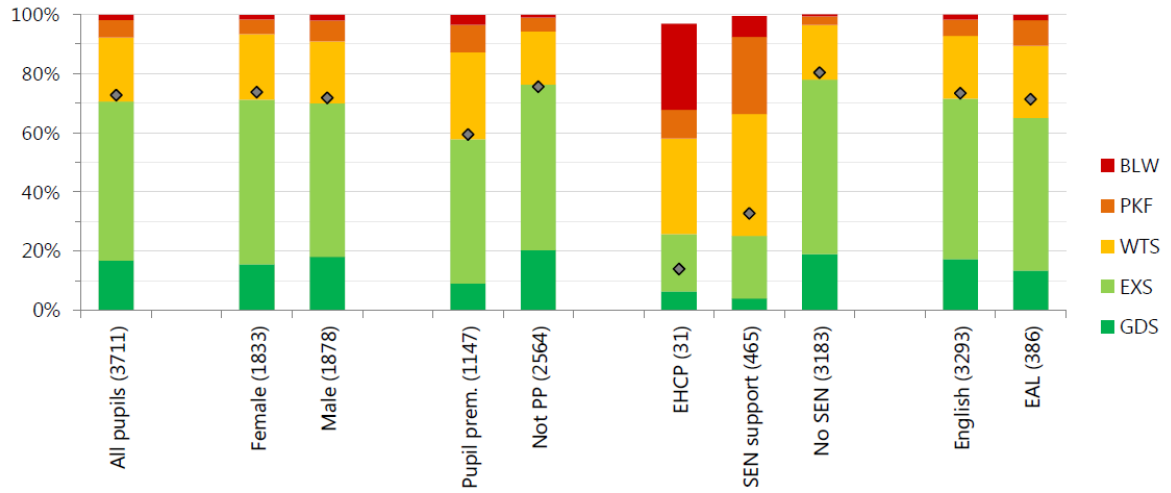


Chart 17e – Grade distribution of Key Stage 1 science by demographic groups

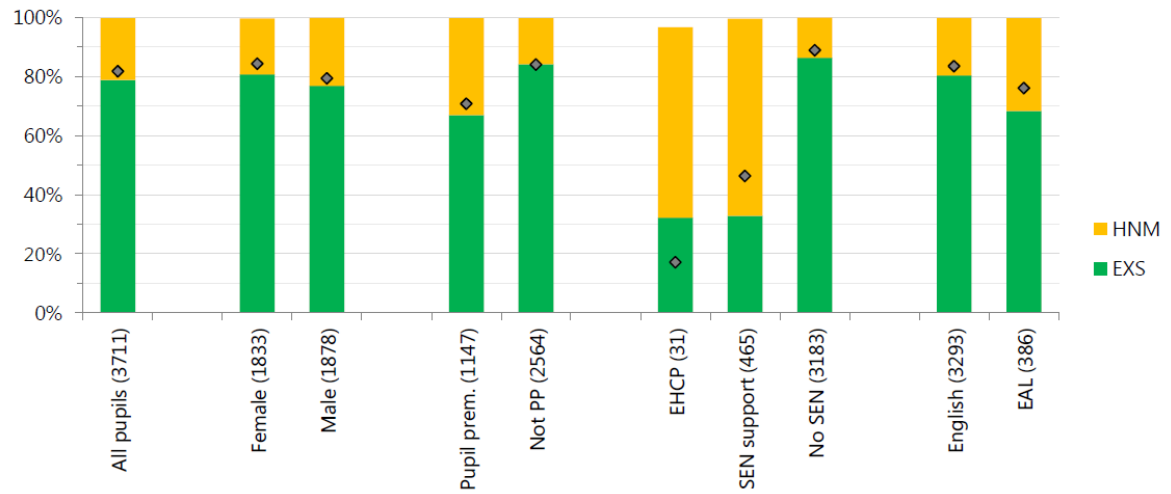


Chart 18a – Percentage of pupils achieving at least the expected standard in Key Stage 2 reading, writing and maths combined by demographic groups

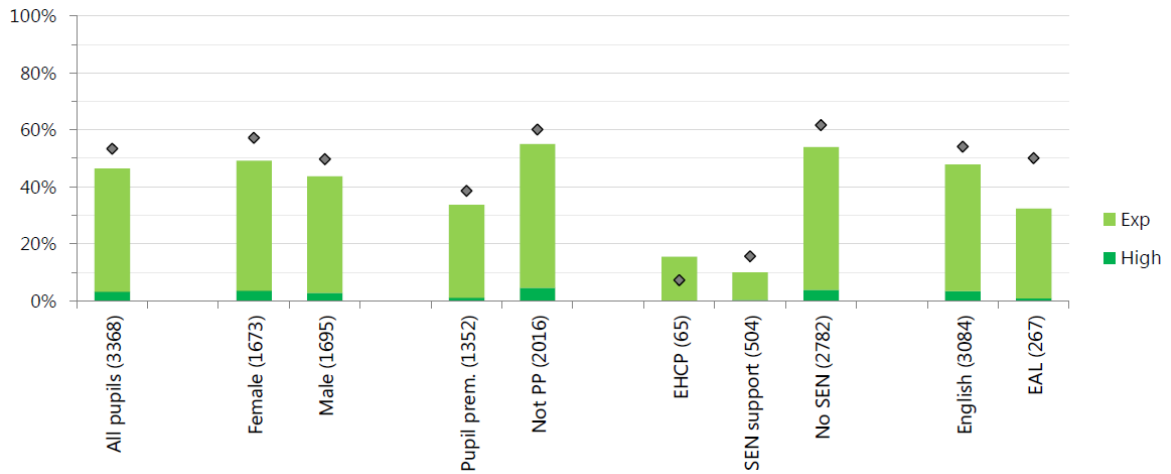


Chart 18b – Percentage of pupils achieving the expected standard in Key Stage 2 reading test by demographic groups

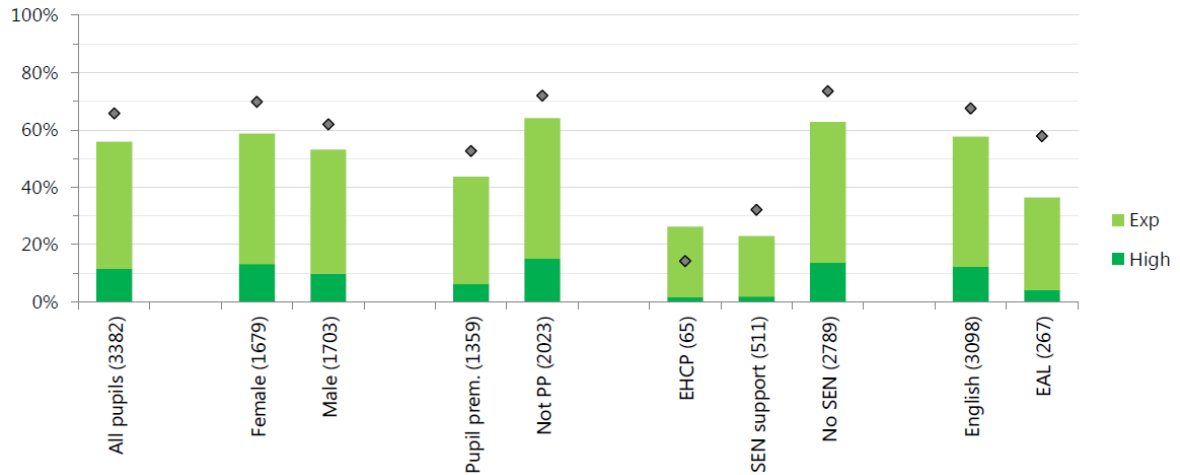


Chart 18c – Percentage of pupils achieving the expected standard in Key Stage 2 writing teacher assessment by demographic groups

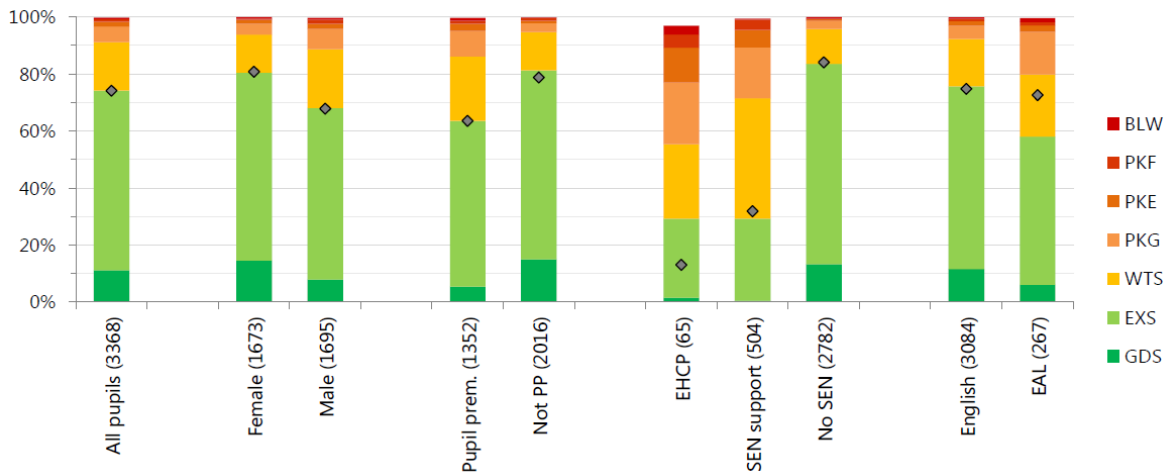


Chart 18d – Percentage of pupils achieving the expected standard in Key Stage 2 mathematics test by demographic groups

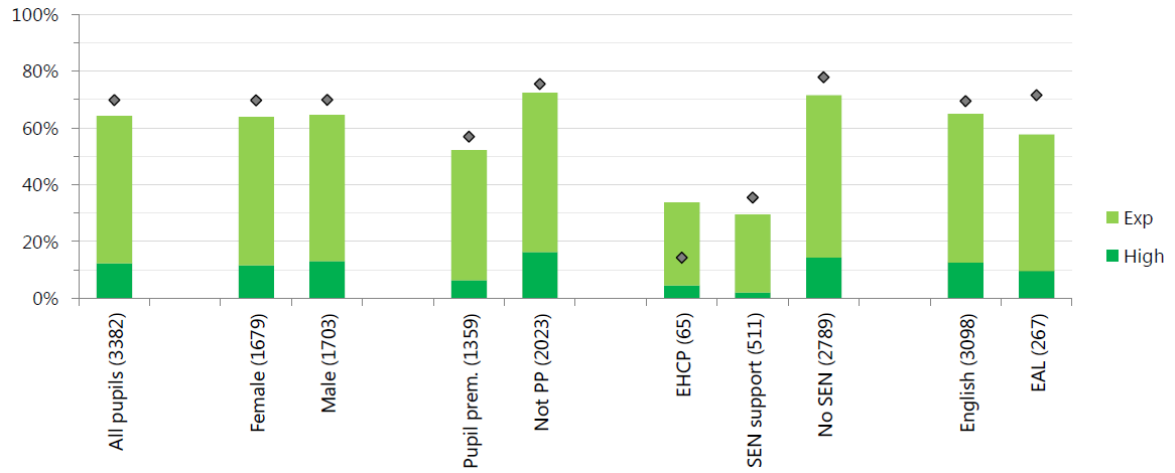


Chart 18d – Percentage of pupils achieving the expected standard in Key Stage 2 science teacher assessment by demographic groups

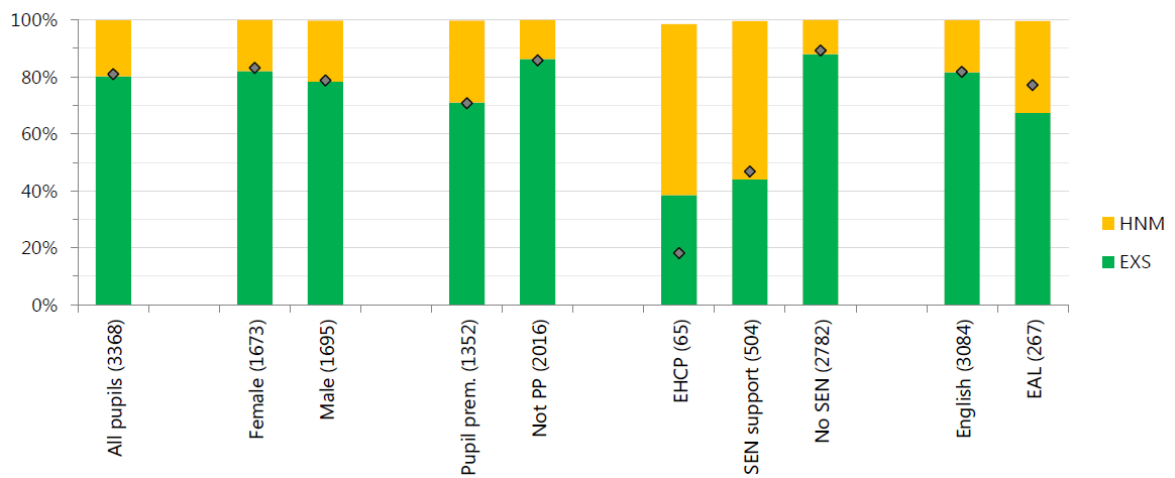
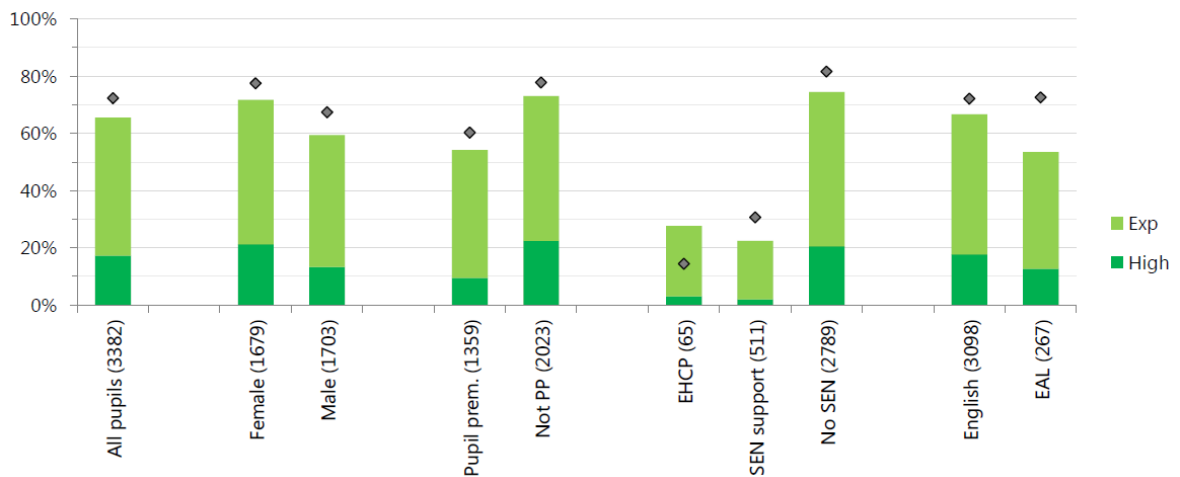


Chart 18f - Percentage of pupils achieving the expected standard in Key Stage 2 grammar, punctuation and spelling test by demographic groups



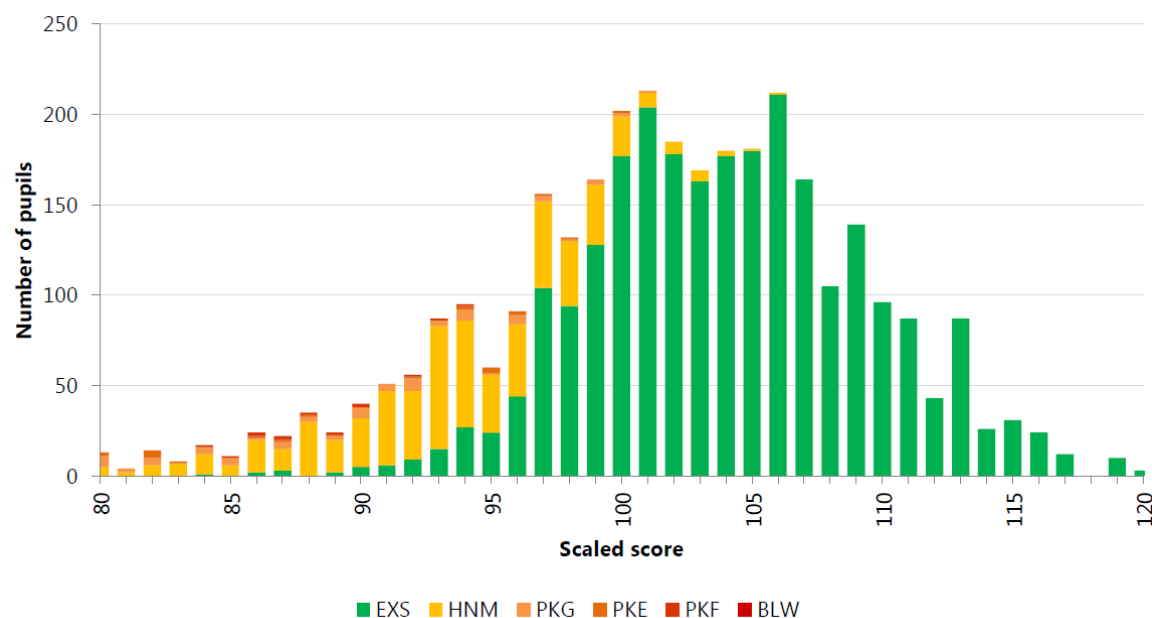
Comparison between test and teacher assessment at key stage 2

Chart 18g – Comparison between reading test outcomes and TA



There is a concerning number of pupils assessed as achieving the expected standard (green) through teacher assessments that have scaled (test) scores below 100 in reading. Whereas in measures of mathematics, there are fewer pupils assessed as meeting the expected standard scoring below the scaled score benchmark of 100, instead there are more pupils who have been assessed as not meeting the expected standard below this benchmark which would be as expected.

Chart 18h – Comparison between maths test outcomes and TA



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27th September, 2016

**To the Chair and Members of the
CHILDREN AND YOUNG PEOPLE'S OVERVIEW AND SCRUTINY PANEL**

**OVERVIEW & SCRUTINY CHILDREN AND YOUNG PEOPLE'S PANEL WORK
PLAN REPORT 2016/17**

Relevant Cabinet Member(s)	Wards Affected	Key Decision
Councillor Nuala Fennelly Cabinet Member for Children, Young People and Schools	All	None

EXECUTIVE SUMMARY

1. The Panel is asked to note and consider the updated work plan report for 2016/2017.

EXEMPT REPORT

2. Not exempt.

RECOMMENDATIONS

3. The Panel is asked to consider and comment on the Scrutiny work plan attached at Appendix A;

WHAT DOES THIS MEAN FOR THE CITIZENS OF DONCASTER?

4. The Overview and Scrutiny function has the potential to impact upon all of the Council's key objectives by holding decision makers to account, reviewing performance and developing policy. This is achieved through making robust recommendations, monitoring performance of Council and external partners and reviewing issues outside the remit of the Council that have an impact on the residents of the borough.

BACKGROUND

5. Members will recall that OSMC and the standing Panels held work planning sessions in May and June, 2016 with a view to identifying areas for consideration over the coming year. The work plan attached at Appendix A, approved by OSMC provides an ongoing summary of the work currently being undertaken across the whole Scrutiny function

OPTIONS CONSIDERED

6. There are no specific options to consider within this report as it provides an opportunity for Members to discuss the Panel's work plan for 2016/17.

REASONS FOR RECOMMENDED OPTION

7. This report provides the Panel with an opportunity to develop a work plan for 2016/17.

IMPACT ON COUNCIL'S KEY OBJECTIVES

	Outcomes	Implications
1.	<p>All people in Doncaster benefit from a thriving and resilient economy.</p> <ul style="list-style-type: none"> • <i>Mayoral Priority: Creating Jobs and Housing</i> • <i>Mayoral Priority: Be a strong voice for our veterans</i> • <i>Mayoral Priority: Protecting Doncaster's vital services</i> 	<p>The Overview and Scrutiny function has the potential to impact upon all of the council's key objectives by holding decision makers to account, reviewing performance and developing policy through robust recommendations, monitoring performance of council and external partners services and reviewing issues outside the remit of the council that have an impact on the residents of the borough.</p>
2.	<p>People live safe, healthy, active and independent lives.</p> <ul style="list-style-type: none"> • <i>Mayoral Priority: Safeguarding our Communities</i> • <i>Mayoral Priority: Bringing down the cost of living</i> 	
3.	<p>People in Doncaster benefit from a high quality built and natural environment.</p> <ul style="list-style-type: none"> • <i>Mayoral Priority: Creating Jobs and Housing</i> • <i>Mayoral Priority: Safeguarding our Communities</i> • <i>Mayoral Priority: Bringing down the cost of living</i> 	
4.	<p>All families thrive.</p> <ul style="list-style-type: none"> • <i>Mayoral Priority: Protecting Doncaster's vital services</i> 	
5.	<p>Council services are modern and value for money.</p>	
6.	<p>Working with our partners we will provide strong leadership and governance.</p>	

RISKS AND ASSUMPTIONS

8. To maximise the effectiveness of the Overview and Scrutiny function it is important that the work plan devised is manageable and that it accurately reflects the broad range of issues within its remit. Failure to achieve this can reduce the overall impact of the function.

LEGAL IMPLICATIONS

9. The Council's Constitution states that subject to matters being referred to it by the Full Council, or the Executive and any timetables laid down by those references Overview and Scrutiny Management Committee will determine its own Work Programme (Overview and Scrutiny Procedure Rule 6a).
10. Specific legal implications and advice will be given with any reports when Overview and Scrutiny have received them as items for consideration.

FINANCIAL IMPLICATIONS

11. The budget for the support of the Overview and Scrutiny function 2016/17 is not affected by this report however, the delivery of the work plan will need to take place within agreed budgets. There are no specific financial implications arising from the recommendations in this report. Any financial implications relating to specific reports on the work plan will be included in those reports.

HUMAN RESOURCES IMPLICATIONS

12. There are no specific human resources issues associated with this report.

TECHNOLOGY IMPLICATIONS

13. There are no specific technological implications resources issues associated with this report.

EQUALITY IMPLICATIONS

14. This report provides an overview of the work programme undertaken by Children and Young People Overview and Scrutiny. There are no significant equality implications associated with this report. Within its programme of work Overview and Scrutiny gives due consideration to the extent to which the Council has complied with its Public Equality Duty and given due regard to the need to eliminate discrimination, promote equality of opportunity and foster good relations between different communities.

CONSULTATION

15. The work plan has been developed in consultation with Members and officers.

Background Papers

16. None

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Schedule of Overview & Scrutiny Meetings with Potential Items

	OSMC	H&SAC O&S	CYP O&S	R&H O&S	C&E O&S
May	Fri, 20th May 2016, 11am –Chamber (CR) • Commission Care & Support (FP)	Mon, 23rd May 2016, 2pm – Sheffield (CR) Regional Health Scrutiny; • Working Together Programme		Wed, 25th May 2016, 1:30pm Rm 209 (CM) • Work planning – R&H O&S	
	Fri, 10th June 2016 at 9am – Chamber (CM) • Work planning - OSMC	Mon 6th June 2016, 10am - Rm 410 (CR) • Work planning – HASC O&S	Thurs 2nd June 2016, 9am –Rm 210 (CM) • Work planning – CYP O&S		Wed, 1st June 2016, 3:30pm, Rm 210 (CR) • Work planning – C&E O& S
June	Fri, 10th June 2016, 10am – Chamber (CM) • O&S Draft Work Plans • O&S Membership				
	Mon, 27th June 2016 – Rm 209 (CR) • Corporate Plan (Refresh)				
July	Thurs, 7th July 2016, 10am – Chamber (CM) • DMBC Finance & Performance Qtr 4 15/16 • SLHD Finance & Performance Qtr 4 15/16 • Youth Justice Plan	Wed 6th July 2016, 10am – Rm 409 (CM) • Intermediate Care – changes to current service (Jon Tomlinson/Debbie John-Lewis/Karen Johnson)	Mon, 11th July 2016, 10am – Chamber (CR) • Education White Paper Update – Implications for Doncaster • Accountability Arrangements • Childrens Trust Update Qtr 4 1516		
	Friday 12th August, 2016 at 10am - (CM) • Budget discussion	Mon, 8th August, 2016– 3:30pm (CR) Regional Health Scrutiny; • Working Together Programme (Doncaster supporting this meeting).			Thurs 11th August 2016 – All Day, Rm 210 (CM & CR) Domestic Abuse (one day review) 1. Strategy 2. Meet Victims 3. Meet with Partners: • Growing Futures • Perpetrator Programme – Foundation for Change • Changing Lives • Police (Safeguarding Adults Team) • Riverside • DMBC Officers Sandra Norburn/Bill Hotchkiss 4. Refuge Visit (separate session)) – two members only
Aug					Wed 17th August 2016 – 2:30pm, Council Chamber (CM) • Isle of Axholme Strategy - including Hydraulic Modelling. Meeting with the Environment agency
	Thurs, 1st Sept. 2016, 2pm –Chamber (CR) • Core annual 'define & deliver' cycle	Wed, 21st Sept. 2016, 10am –Rm 008 (CM) Health Inequalities. Incl. • description of overall approach • focus on the health needs of BME populations • plans to update the assessment • Veterans Information session to follow: • Health Watch - Chair	Tues, 27th Sept. 2016, 10am – Chamber (CM) • Childrens Trust Update – Split Screen report • DFE Achievements of Children • Inspections Framework SEN • School Results (by pyramid/sub-groups)		
Sept					
	Thurs, 6th October 2016, 10am – Chamber (CM) • DMBC Finance & Performance Qtr 1 16/17 • SLHD Finance & Performance Qtr 1 16/17	Dates – TBC (CM &/or CR) • Age Friendly Review (cross-cutting)		10th October, 2016, 9am – Room 008 • Economic Plan – Outline • Place Marketing – update • Additional Housing Update	Mon, 3rd October 2016, 10am – 3pm, 410 (CM &/or CR) Domestic Abuse Review continued: • 10am – meeting with victims who have experienced domestic abuse and been
Oct	Dates TBC - (CM or CR)				

	OSMC	H&SAC O&S	CYP O&S	R&H O&S	C&E O&S
	<ul style="list-style-type: none"> Budget 				supported. <ul style="list-style-type: none"> 1:30 pm - the Panel will recap on the key points learnt from the whole review and outline some recommendations based on the information that has been received.
Nov	Thurs, 10th Nov 2016, 10am – Chamber (CM) Possible community themed meeting including; <ul style="list-style-type: none"> Stronger Families Update Equalities - Policy and Governance 	Wed, 23rd Nov 2016, 10am – 007b (CR) <ul style="list-style-type: none"> Transformation programme as that will cover direct payments and the development of the community led model Adult Safeguarding Report Intermediate Care Update – changes to current service Information session to follow: <ul style="list-style-type: none"> CQC 			Dates – TBC (CM &/or CR) <ul style="list-style-type: none"> Waste Collections Hate Crime
	Thurs, 15th Dec 2016, 2pm – Chamber (CR) <ul style="list-style-type: none"> DMBC Finance & Performance Qtr 2 16/17 SLHD Finance & Performance Qtr 2 16/17 Progress on Digital Council 		Tues, 6th Dec 2016, 10am – Chamber (CM) <ul style="list-style-type: none"> Childrens Trust Update split screen report Education & Skills Programme (Standards & Strategy) Chairs Safeguarding Board – Annual report including CSE Update (outstanding issues) Outline and Function of the Performance Account Board (PAB) CIC – Virtual School 		
Dec					
	Thurs, 19th Jan 2017, 10am – Chamber (CR) <ul style="list-style-type: none"> Budget (formal/informal) 	Wed, 25th Jan 2017, 2pm – 007b (CM) <ul style="list-style-type: none"> Mental Health within Children's Services (jt with CYP O&S) Update on Care and Support at home 	H&ASC O&S - Invite Wed, 25th Jan 2017, 2pm – 007b CYP O&S Invite for the following; <ul style="list-style-type: none"> Mental Health within Children's Services (jt with CYP O&S) 		
Feb	9th or 23rd Feb 2017, 10am – Council Chamber (CM or CR) <ul style="list-style-type: none"> Budget (formal - will commence earlier tba) 		Mon, 27th Feb 2017, 10am – Chamber (CR) <ul style="list-style-type: none"> Children's Trust Update split screen report Children's Trust Annual report Annual Complaints Exam Results (& update on actions from E&SC) Council's response to the Education & Skills Programme Effectiveness of Pupil Premium across Doncaster 		Mon, 13th Feb 2017, 10am – 007b (CM or CR) <ul style="list-style-type: none"> Crime & Disorder Meeting <ul style="list-style-type: none"> Performance & Update on Priorities Community Safety Strategy Fly Tipping – Enforcement Hate Crime
	Thurs, 23rd March 2017, 10am – Chamber (CM or CR) <ul style="list-style-type: none"> DMBC Finance & Performance Qtr 3 16/17 SLHD Finance & Performance Qtr 3 16/17 	15th March 2017, 10am – 007b (CM or CR) <ul style="list-style-type: none"> Public Health Protection Responsibilities (annual) to include: <ul style="list-style-type: none"> Vaccinations – how is data on reactions used Air Pollution (performance targets/impact on public health) Intermediate Care – changes to current service 			H&ASC O&S - Invite 15th March 2017, 10am – 007b - invite C&E O&S Invite for the following; <ul style="list-style-type: none"> Public Health Protection Responsibilities (annual) :- <ul style="list-style-type: none"> Air Pollution (performance targets/impact on public health)
Mar					

Other potential issues to be considered and confirmed				
OSMC	H&SAC O&S	CYP O&S	R&H O&S (one review or one-off meetings)	C&E O&S (one review or one-off meetings)
<p><u>Ongoing List of Plans</u></p> <p>Council Plans:</p> <ul style="list-style-type: none"> Corporate Plan Refresh - 27th June 2016, 2pm <p>Statutory Plans: -</p> <ul style="list-style-type: none"> Youth Justice Plan (Yth Offending Plan) – 7th July 2016, 10am Local Transport Plan – TBC Community Safety Plan (known as Crime and Disorder Reduction Strategy – Refresh 2016/New Plan 2017) – May refer to Crime and Disorder Committee Health and Well-being Strategy - not required 2016 Local Plan (Development Plan) - TBC <p>Other:</p> <ul style="list-style-type: none"> Devolution - Date/s TBC (Also see C&E – Waste) New Library/Training/Museum/Cultural Centre (FP Item) - Oct 2016? TBC Equality Action Plan Borough Strategy (Sustainable Community Strategy no longer obliged to have as a Statutory Plan) Community Engagement Strategy - TBC 	<p>Review – Cross Cutting – Developing an Age Friendly Doncaster</p> <p>Health Inequalities: -</p> <ul style="list-style-type: none"> Adult Obesity Health for homeless <p>Other</p> <ul style="list-style-type: none"> Cancer Quality Accounts (annual) Updates e.g. CQC, Healthwatch, NHS England, NHS CCG,H&WB, regional health scrutiny 	<p>Other: -</p> <ul style="list-style-type: none"> ETE Opportunities for CIC – Career Advice & Guidance (CYP O&S Members involvement) Update – Ofsted <p>Joint Scrutiny Work: -</p> <ul style="list-style-type: none"> Mental Health within Children's Services (jt with H&ASC O&S) – Possible piece of work/involvement with Youth Council 	<ol style="list-style-type: none"> Economic Plan Refresh – to consult with the Panel (will include element of housing) – Autumn 2016 Also for an update on the Place Marketing Action Plan and outstanding Delivery of Additional Housing actions to be provided at a later date. Housing – Date TBC <ul style="list-style-type: none"> Homelessness – Strategic overview Proposed changes to legislation 	<p>If capacity allows:</p> <p>Waste – to look at future opportunities through Devolution how can the authority make the most out of joint opportunities.</p> <p>Vol/Com Strategy – update and impacts of the the new grant scheme.</p>

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