

Central Bedfordshire
Council
Priory House
Monks Walk
Chicksands,
Shefford SG17 5TQ

**This meeting
may be filmed.***



**Central
Bedfordshire**

please ask for Paula Everitt
direct line 0300 300 4196
date 6 August 2015

NOTICE OF MEETING

CHILDREN'S SERVICES OVERVIEW & SCRUTINY COMMITTEE

Date & Time

Tuesday, 18 August 2015 10.00 a.m.

Venue at

Council Chamber, Priory House, Monks Walk, Shefford

Richard Carr
Chief Executive

To: The Chairman and Members of the CHILDREN'S SERVICES OVERVIEW & SCRUTINY COMMITTEE:

Cllrs Mrs A Barker (Chairman), G Tubb (Vice-Chairman), Mrs A L Dodwell,
P A Duckett, K Ferguson, Mrs J Freeman, P Hollick, M R Jones, D McVicar, A Ryan,
T Stock and B Walker

[Named Substitutes:

D Bowater, J Chatterley, B Saunders, D Shelvey, P Smith and T Swain]

Co-optees: Mrs Deans (Parent Governor), Mr Court (Parent Governor),
Mrs Rowlands (Parent Governor), Ms Image (Roman Catholic Diocese), and
Mr Morton (Church of England Diocese)

All other Members of the Council - on request

**MEMBERS OF THE PRESS AND PUBLIC ARE WELCOME TO ATTEND THIS
MEETING**

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AGENDA

1. **Apologies for Absence**

Apologies for absence and notification of substitute members.

2. **Minutes**

To approve as a correct record the Minutes of the meeting of the Children's Services Overview and Scrutiny Committee held on 15 June 2015 and to note actions taken since that meeting.

3. **Members' Interests**

To receive from Members any declarations of interest and of any political whip in relation to any agenda item.

4. **Chairman's Announcements and Communications**

To receive any announcements from the Chairman and any matters of communication.

5. **Petitions**

To receive petitions from members of the public in accordance with the Public Participation Procedure as set out in Annex 2 of Part A4 of the Constitution.

6. **Questions, Statements or Deputations**

To receive any questions, statements or deputations from members of the public in accordance with the Public Participation Procedure as set out in Annex 1 of part A4 of the Constitution.

7. **Call-In**

To consider any decision of the Executive referred to this Committee for review in accordance with Procedure Rule 10.10 of Part D2.

8. **Requested Items**

To consider any items referred to the Committee at the request of a Member under Procedure Rule 3.1 of Part D2 of the Constitution.

Reports

Item	Subject	Page Nos.
9	Executive Member Update To receive a brief verbal update from the Executive Members for Social Care and Housing, Education and Skills and Health.	* Verbal
10	Public Health Briefing To receive a presentation on the work of Public Health in Children's Services.	* 13 - 24
11	Transfer of the 0-5 Healthy Child Programme to the Council To receive a presentation on the Transfer of the 0-5 Healthy Child Programme.	* To Follow
12	Central Bedfordshire's Five Year Plan: 2015-20 To receive a report and presentation on the proposed 5-year Plan framework and provide feedback on the programmes of work.	* 25 - 40
13	Special Educational Needs and Disabilities Capital Programme 2015/16	* 41 - 54
14	Children's Trust Board Annual Report To receive the annual report of the Children's Trust.	* 55 - 136
15	Fees and Allowances for Foster Carers	* To Follow
16	Quarter 4 2014/15 Performance The report highlights the Quarter Four (January – March 15) performance for the Children's Services Directorate.	* 137 - 148
17	Q4 Budget Presentation To receive a presentation regarding the directorate's capital and revenue budget monitoring information for the outturn 2014/15.	* Verbal
18	Q1 Revenue & Capital Budget Monitoring Update 2015/16	* 149 - 156
19	Work Programme 2015-2016 & Executive Forward Plan The report provides Members with details of the currently drafted Committee work programme and the latest Executive Forward Plan.	* 157 - 162

CENTRAL BEDFORDSHIRE COUNCIL

At a meeting of the **CHILDREN'S SERVICES OVERVIEW & SCRUTINY COMMITTEE** held in Council Chamber, Priory House, Monks Walk, Shefford on Thursday, 9 July 2015

PRESENT

Cllr Mrs A Barker (Chairman)

Councillors:	K Ferguson Mrs J Freeman P Hollick	Councillors:	D McVicar A Ryan
Parental Co-optees:	Mr S Court Mrs G Deans Mrs E Rowlands		
Church of England Co-optee:	Mr D Morton		
Roman Catholic Co-optee:			
Apologies for Absence:	Cllrs	P A Duckett Mrs F Image T Stock G Tubb B Walker	
Substitutes:	Cllrs	D Bowater (In place of G Tubb) J Chatterley (In place of P A Duckett) P Smith (In place of T Stock)	
Members in Attendance:	Cllrs	R D Berry Mrs A L Dodwell C Hegley B Saunders D Shelvey M A G Versallion	Deputy Executive Member for Social Care and Housing Executive Member for Social Care and Housing Executive Member for Education and skills
Officers in Attendance:	Mrs P Everitt Miss H Redding	Scrutiny Policy Adviser Assistant Director School Improvement	

CS/15/15. **Minutes**

That the minutes of the meeting of the Children's Services Overview and Scrutiny Committee held on 15 June 2015 be confirmed and signed by the Chairman as a correct record, subject to the following changes.

Cllr Stock as an ex-governor of Sandy Upper School and Stephen Court as a governor of Ivel Valley School, which has satellite classes collocated with both the Lawns Nursery and Biggleswade Academy.

CS/15/16. **Members' Interests**

None.

CS/15/17. **Chairman's Announcements and Communications**

The Chairman announced she had attended a CHUMS event and had been interviewed as part of the Domestic Abuse strategy work.

CS/15/18. **Petitions**

None.

CS/15/19. **Questions, Statements or Deputations**

None.

CS/15/20. **Call-In**

None.

CS/15/21. **Requested Items**

None.

CS/15/22. **Executive Member Update**

The Executive Member for Social Care and Housing announced she had attended her first meeting of the Corporate Parenting Panel.

On behalf of the Executive Member for Health, the Chairman announced the Committee would receive a presentation on the new duties for the Council relating to Children's Health in August.

The Executive Member for Education and Skills announced the following activities he had undertaken:-

- A number of schools had been visited.
- Attendance at a skills event. The Executive Member advised there had been low attendance by young adults and this would be an area of focus to increase the numbers.

- That Bedford Borough Council had announced it would support schools that wished to switch to the two tier system. It was unclear what immediate affect this change would have on Central Bedfordshire schools.

In light of the update a Member asked what advice would be given to schools affected by the Borough's decision. The Executive Member agreed to keep the Committee and schools informed when full details were available.

CS/15/23. **Partnership Vision For Education 2015-19**

The Executive Member for Education and Skills introduced a report that set out the revised Partnership Vision for Education. There had been significant changes from the original vision from 2010 which was revised in 2012, and it reflected the changed educational context with a large number of schools now academies. An agreed joint working arrangement to develop successful approaches to learning was emerging. Seven principles and six strands of work had been developed with partners from the original vision and Members were invited to comment on these and intended outcomes outlined in the paper.

The Committee noted the questions submitted by the Vice-chairman and these would be addressed outside of the Committee meeting.

The Committee commented and discussed the following:-

- Concern that the Vision emphasis remained on GCSE and 'A' level attainment and did not reflect vocational attainment. Members present felt the Vision would be enhanced by exploring everyone's ability and attainment. A Member also proposed that a College for Skills and Learning would be appropriate and put skills and learning on a level playing field with academic success. In response the Assistant Director School Improvement advised the skills agenda was embedded within the document and that workstream five was intended to develop the skills agenda. The Youth Parliament had also identified support for the work readiness agenda needing a focus. Headteachers seek a balance of academic and vocational achievement. The Executive Member for Education and Skills advised that new assessment arrangements from the Department of Education would address the skills based attainment and details would be submitted to this Committee. The new assessment arrangements had already been considered by this committee but it was recognised that there were a number of new members.
- The Co-opted Member (Church of England Diocese) expressed his disappointment that the Diocese had not been involved and wished to be included and referred to in the engagement process. Concern was raised as to whether there was an issue with leadership and governance within schools and whether the use of Ofsted outcomes was appropriate. The importance of succession management was considered a vital part of school and governorship planning. In response the Assistant Director School Improvement explained succession planning was an important area and featured in section 1 (Leadership) and section 2 (improving outcomes). It was agreed the wording will be reviewed to strengthen this message. The overarching principle was to raise the quality of leadership, teaching and learning and therefore the improvement in results.

- Whether the approach taken by some schools to implement a contract with parents to ensure 'school readiness' could be extended to a work readiness for leavers? The Assistant Director School Improvement agreed the whole pathway was important and officers would look at the most successful schemes used by schools within that workstream area.
- What influence the Council would have on struggling schools to incorporate the key principles outlined in the Vision. The Assistant Director School Improvement advised that the document should be owned by all partners, however, the Council had an overarching strategic lead role to make it happen. The Executive Member for Education and Skills explained that a launch event was planned and all parties would be invited and asked to sign up to the Vision. It was noted that the Department for Education's Regional Schools Commissioner (RSC) had a challenging role to challenge and support underperforming academies. The Assistant Director School Improvement advised that there were regular discussions between the Local Authority and the RSC.
- Concern was raised regarding the expectation on school governors to challenge Head Teachers. There was a perception that governors lacked the skills and self confidence as well as recruiting sufficient governors in schools. The Assistant Director School Improvement advised that the Governor training Programme was well received, but was aware of this issue in some schools. One of the actions identified to support this was that Council staff could be invited to stand as school governors. This has been successful where implemented as additional governors.
- The need to encourage more people to become school governors (not just council employees or parents) particularly those with transferrable skills from the business world who would bring a professional input to school governance.
- That central government be encouraged to revise legislation to better reflect new and emerging models of school leadership.
- That a governors' role and ability to challenge performance data should be extended to give support and encouragement to improve performance.
- That reference to mental health and wellbeing and the CAMHS role within the Vision be enhanced and mainstream headteachers with responsibilities for embedded Autism spectrum disorder (ASD) units in their schools are referenced along with special school leaders and SNAP.
- Whether more should be done to include parents in the Vision, many of whom continued to be confused by the school system. The Executive Member for Education and Skills advised that in his experience parents were concerned about a child's experience in school rather than governance and other arrangements. The Assistant Director School Improvement advised that succession management was very important and there were many examples of schools working together to ensure continuity in school life for a child.

RECOMMENDED

- 1. To include comments in the Partnership Vision for Education relating to Special Education Needs and include mainstream headteachers with responsibility for ASD.**

2. That officers reflect on the duty/role of parents in the different elements of the Partnership Vision for Education.
3. That the new assessment arrangements be submitted to a future meeting of the Committee.
4. The revised document be shared with Members of the Executive.

(Note: The meeting commenced at 10.00 a.m. and concluded at 2.10 p.m.)

Chairman

Dated

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Central Bedfordshire Council

CHILDRENS SERVICES OVERVIEW AND SCRUTINY COMMITTEE

18 August 2015

PUBLIC HEALTH BRIEFINGS

Advising Officers: (Muriel Scott) Director of Public Health
Muriel.scott@centralbedfordshire.gov.uk

Drafting officer: (Celia Shohet) Assistant Director of Public Health
Celia.shohet@centralbedfordshire.gov.uk

Purpose of this report

The report introduces the briefings which give an overview of the role and responsibilities of Public Health in relation to improving outcomes for children, young people and families. The briefings were originally prepared for new Members of the Council following the May elections and the Executive Member for Health asked that they were made available to a wider audience.

RECOMMENDATIONS

The Committee is asked to:

1. To consider the content of the briefings and identify any areas where further information or briefings would be helpful to the committee in order to understand the public health role of the Council.

Introduction

1. Public Health transferred to Local Authorities in April 2013 together with a ring-fenced grant and a number of responsibilities to improve the health of the local population. These briefings outline the main public health responsibilities, achievements and challenges in relation to children and young people.

Issues

2. The briefings identify the key challenges in delivering improved public health for local children and their families. These are reducing the proportion of mothers who smoke throughout their pregnancy,

increasing the proportion of mothers breastfeeding, improving the early identification of mothers with mental health issues, increasing the proportion of children who are a healthy weight, reducing the number of teenage conceptions and improving young people's emotional resilience.

Council Priorities

3. Public Health helps *promote health and well being and protect the vulnerable*, in particular through actions that promote giving every child the best start in life.

Corporate Implications

4. Sustainability – no issues arising directly from this briefing
5. Risk – no issues arising directly from this briefing.

Legal Implications

6. Legal implications – no issues arising directly from this briefing

Financial Implications

7. There are no direct financial implications arising from the briefings as activity will be carried out within the agreed ring-fenced allocation for 2015/16.

Equalities Implications

8. Central Bedfordshire Council has a statutory duty to promote equality of opportunity, eliminate unlawful discrimination, harassment and victimisation and foster good relations in respect of nine protected characteristics; age disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation.
9. The Public Health team coordinates the production of the local JSNA (Joint Strategic Needs Assessment). The JSNA describes the current and future health and wellbeing needs of the local population and comprises of over 80 reports. As part of the development of the JSNA, consideration is given to the identification of vulnerable groups and variations in prevalence of illness and treatment outcomes which might be influenced by factors such as socio economic status, sex, race, disability, etc.,
10. Analysis of such factors helps to ensure that vulnerable groups are identified and the most effective approaches delivered.

Conclusion and next Steps

11. The committee is asked to consider the briefings.

Appendices

Appendix A contains the briefings relevant to children and young people

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Public Health Briefing 1: Overview

The role of Public Health in CBC

Helping the residents of Central Bedfordshire to live healthier lives for longer is at the heart of our work in the Public Health Team at CBC. We know that the life experience and expectancy of our residents varies considerably by ward and that life can be further complicated by a range of social and environmental influences every day.

This is why the Public Health Team, led by our Director of Public Health, are prominent in the agenda to build a more resilient and healthy community for Central Bedfordshire. This will not only help them towards living healthier and longer lives, but will also reduce their reliance upon local support services. We have big aspirations to develop new ways of working across the health and social care system to align our collective efforts towards the wider goals of the Health and Well Being Board.

What do we commission or provide?

Across Central Bedfordshire, we commission or provide the following services:

- Stop Smoking Services and Tobacco Control
- Prevention and Treatment of Drug and Alcohol Abuse
- Preventions and Treatment of Excess Weight, including the National Child Measurement Programme
- NHS Health Checks (which includes prevention and early detection of Cardiovascular disease and diabetes)
- Health Protection Assurance (including blood borne viruses, screenings and immunisation)
- Workplace Health
- Public Dental Health
- Public Mental Health.

What are the public health local priorities?

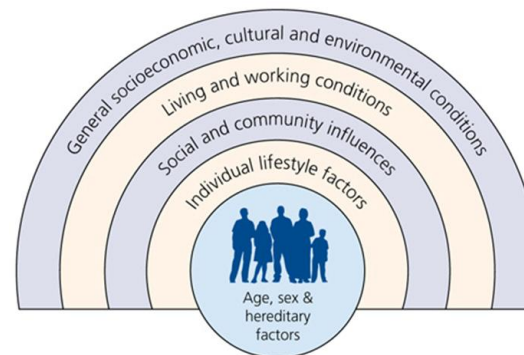
The Joint Strategic Needs Assessment (The JSNA) <http://www.centralbedfordshire.gov.uk/jsna> provides an overview of what our residents need and we have used this to identify the most important priorities for our Health and Wellbeing Strategy. Our priorities are:

1. Good mental health and wellbeing at every age
2. Making sure the children in Central Bedfordshire have the best start in life
3. Empowering our communities to stay healthier for longer
4. Improving the wellbeing for frail older people.

We also want to make sure that we focus on preventing health inequalities across Central Bedfordshire by earlier detection and supporting of the wider issues that impact on health such as lifestyle and environmental conditions.

The social determinants of health

We also continue to focus on **reducing inequalities** by improving the social determinants of health:



The CBC public health budget

The Central Bedfordshire budget for Public Health is £12 million for 2015/16.

This includes £2.9 million for drugs and alcohol, £3 million for children and young people, £1 million for stop smoking and health checks and £2.2 million for sexual health.

'Investing in the right public health interventions provides an excellent return on investment for councils as well as improving the health and wellbeing of local communities.'
(Kings Fund December, 2013)

Who to contact in Public Health

Muriel Scott (DPH) on 07702 203441
Muriel.scott@centralbedfordshire.gov.uk

Celia Shohet (AD Public Health, CBC) on 0300 300 4578
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Sanhita Chakrabarti (AD Public Health, Core Team)
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Bharathy Kumaravel (AD Public Health, Core Team) Bharathy.Kumaravel@bedford.gov.uk

Barbara Rooney (Head of Public Health, Children and Young People) on 0300 300 5076
Barbara.rooney@centralbedfordshire.gov.uk

Public Health Briefing 2: Ensuring good mental health and wellbeing at every age

Why this is important?

Mental illness can affect anyone at any age. It is reported that as many as 10% of 15-16-year-olds experience mental health illness. Older people are also at risk of depression, which can be because of loneliness, social isolation, retirement, physical illness or disability.

On average, a man with mental health issues can die 16 years earlier (and a woman can die 12 years earlier) than their counterparts who do not have mental health conditions. Over 75% of this difference is related to physical conditions such as cardiovascular disease and cancer, which are primarily driven by high rates of smoking.

Our plan is to continue to support our residents so that they can enjoy healthier lives despite their condition. Not only will this allow them to enjoy longer and happier lives, but it will also reduce their reliance on local support services into the future.

What are our achievements so far?

We have delivered our first Mental Health First Aid Training (known as LITE training) in workplaces and we expect this to be rolled out across Central Bedfordshire and the Clinical Commissioning Group (CCG).

We have also established a new multi-disciplinary Wellbeing Forum where partners are working together to deliver our shared 'Five Ways to Wellbeing' strategy. You can find out more about our work on Twitter @LetsTalkCentral.

What local challenges do we face?

Mental health is a significant health challenge across our area. In Central Bedfordshire, 1,695 children between the ages of 5-10 and 2,165 children aged 11-15 are estimated to be living with mental health illness.

The trend continues into adult life and is growing. 26,735 adults aged 18-64 have a mental health condition and many report poor physical health and difficult experiences because of the perceived stigma around mental health issues.

Five Ways to Wellbeing



What are we doing about them?

Our approach is to support mental health throughout our residents' lives. We start by providing excellent maternal mental health and we then build on this by making sure that professionals working with children across Central Bedfordshire are equipped with the specialist skills and knowledge to provide the best well-being support.

Our work with adults is focused on improving the physical health of those living with mental health illness. This means providing the best access to the healthy lifestyles support, stop smoking services and help for residents to become more physically active. We also work closely with local employers supporting wellbeing in the workplace.

Case study

Lucy's mother contacted our service to request support for her daughter who appeared to be suffering from anxiety and panic attacks. Our team provided an initial assessment within CHUMS Emotional Wellbeing Service where it was agreed to offer Lucy on-going psychological support based on Cognitive Behaviour Therapy. At the end of the intervention, Lucy was working weekends as a shop assistant and had started back to college full time.*

- Clinical Psychologist at CHUMS

*Name has been changed to maintain confidentiality

Public Health Briefing 3: Giving Every Child The Best Start In Life (Starting Well)

Why this is important

Giving every child the best start in life, starting from conception and including the physical and mental health of the mother, is crucial to reducing health inequalities across our lifetime, what we call the 'life course'.

The early years lay down the foundations for future health and wellbeing, for example, breastfed babies have a reduced risk of developing high blood pressure and cholesterol in adulthood and may also have a reduced risk of Type 2 diabetes and obesity. Achieving the best start in life also benefits educational achievement and economic status later in life.

What have we achieved so far?

Our 'Smokefree Baby and Me' programme was first introduced in 2013. So far, the number of pregnant women who have stopped smoking throughout their pregnancy has increased from 32% to 54%.

Breastfeeding initiation rates have continued to improve and remain above national rates.

We have expanded our Health Visiting workforce which increases the opportunities to identify maternal mental health needs and ensure that mothers receive the support they require.

What local challenges do we face?

The increasing numbers of mothers who are smokers 'at the time of delivery' is an on-going challenge, particularly for mothers in South Central Bedfordshire.

Although breastfeeding initiation is good, we need to make more progress to sustain rates for the longer term. In addition, identifying prevalence and continuing to tackle maternal mental health is a key priority.



What are we doing about them?

We are working in partnership with hospitals, community midwives, health visitors, children's centres and early years settings to create more consistent messages and support for parents across a range of initiatives.

We have also expanded our Health Visiting workforce to increase the opportunity to identify maternal mental health needs and to support and offer advice about breastfeeding.

Service user feedback

"My advisor has been an excellent help and would not have been able to do this alone."

"I feel 100% better in myself; feel I can do so much more."

"My skin, hair and nails are healthier, not breathless when walking and baby moves better."

Here is a video clip from a mother who gave up smoking during pregnancy:

<https://www.youtube.com/watch?v=7MigNK0uV4g>

Public Health Briefing 4: Giving Every Child The Best Start In Life (Starting Well Priorities)

Breastfeeding

Why this is important

It is widely recognised that breastfeeding secures the best start in life. Not only are there a number of health benefits to breastfeeding, but from a health service perspective, we know that when breastfed babies become infants, they are less likely to suffer from conditions like gastroenteritis and respiratory disease and are therefore less likely to need to go to hospital.

What are we doing about it?

CBC is working to achieve full Baby Friendly Initiative Accreditation for both Bedford Hospital and Luton and Dunstable Hospitals. This will mean strengthening the contracts with maternity services providers to incentivise support for breastfeeding and staff training to ensure that professionals have the right skills to support new mothers to start and continue to breastfeed their babies.

Smoking at time of delivery

Why this is important

Smoking in pregnancy increases the risk of miscarriage and perinatal death. It also increases the risk of pre-term birth. This is a major cause of infant mortality and can affect physical and mental health development during childhood.

What are we doing about it?

CBC and partners are working together to create a 'Smoking in Pregnancy Multi-Agency Pathway' so that we can provide additional support for mums-to-be who would like to stop smoking. Through this, we expect to see an increase in the number of pregnant women who stop smoking through our 'Smokefree Baby and Me' programme. We will also be looking a how to implement national legislation to reducing smoking around children as part of the smoke free homes and cars initiatives.

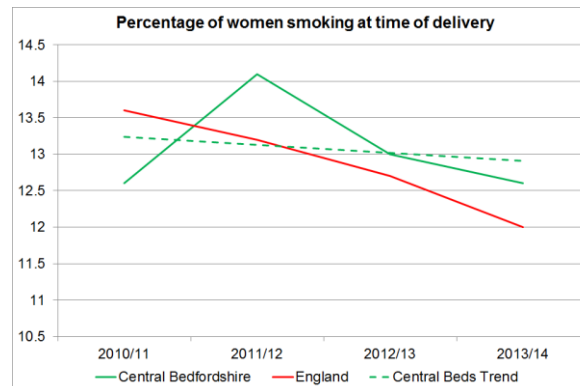
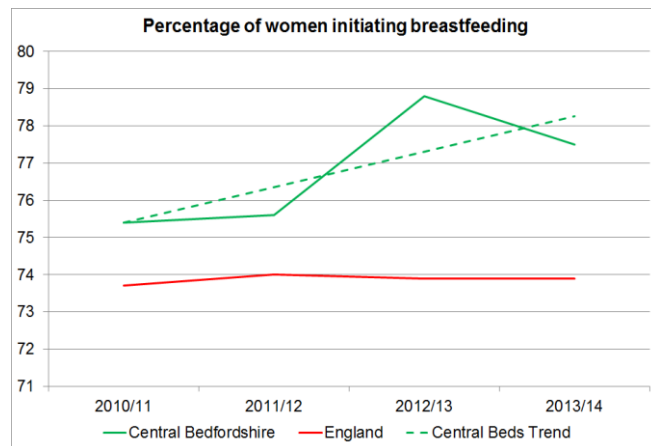
Maternal Mental Health

Why this is important

Nationally, more than 1 in 10 women develop a mental illness during pregnancy or within the 1st year of having a baby. Maternal mental health problems impact on the woman, the baby and also the rest of the family, with increased chances of young people developing depression themselves.

What we're doing about it

We will work in partnership with local providers to unify and integrate pathways of services delivery. From 2015/16, new commissioning arrangements will provide more opportunities for Health Visitors to assess maternal mental health. This will improve identification of problems and enable early support and intervention for those who need it.



Condition	Estimated prevalence	Estimate prevalence Central Bedfordshire
Baby blues	80%	2640
Postnatal depression	10-15%	330 - 495
Puerperal psychosis	0.1-0.2%	3 - 6
Puerperal psychosis	50% of reoccurrence	1.5 - 3 (based on same numbers)

Public Health Briefing 5: Giving Every Child The Best Start In Life (Developing Well)

Why this is important

We know that what happens in our childhood and adolescence will have a profound impact upon how we live out our adult lives, so it is vital that we provide our children and young people with a sound foundation for long term health and wellbeing, allowing them to achieve their potential. Excess weight in children has been increasing nationally over the past 20 years.

Children born to teenage parents are more likely to experience a range of negative health and social outcomes later in life.

Building resilience is important in helping to protect children. It builds cognitive development and helps learning and can be the difference between engaging in risky behaviours and creating sustainable, healthy lifestyles.

What have we achieved so far?

Within the Development Strategy for Central Bedfordshire we have managed to secure a 400 metre restricted opening time zone for hot food take-aways near our upper schools and colleges.

There has been a 25% reduction in teenage pregnancies in Central Bedfordshire since 2010. Local rates are now below the regional and national averages.

A Schools & Partners Network has been launched to promote and support positive health and wellbeing in all Central Bedfordshire schools.

What local challenges do we face?

Overall levels of excess weight in children across Central Bedfordshire are slightly below the national average but 20% of our 4-5 year-olds and 29.8% of our 10-11 year-olds are overweight or very overweight.

Teenage pregnancy rates have fallen overall. We need to continue to reduce conceptions in specific communities where rates are higher than both the local and national averages.

A recent health behaviour perception survey of over 3000 Central Bedfordshire pupils highlighted a downward trend in self-esteem. It is therefore understandable that the number of hospital admissions due to self-harm in local girls has also increased in recent years.

What are we doing about them?

Planning, Leisure Services and other teams at the Council are working together to reduce the number of children with excess weight by creating the Central Bedfordshire Excess Weight and Physical Activity Strategy.

The local Teenage Pregnancy Strategy combines a universal approach to reducing teenage pregnancy, with additional targeted services working within high rate areas and with more vulnerable groups.

We are also working with schools, partner organisations and providers to promote resilience and emotional wellbeing in children and young people in all settings.

Public feedback

'The approach to a sustainable and a more happy and healthy lifestyle is one that I think underpins all that we have learnt whilst on the programme.'

- A parent who attended a locally commissioned family weight management programme

"The group has been a very informative and fun approach to nutrition and exercise. Keep up the good work, team!"

Parent



Public Health Briefing 6: Giving Every Child The Best Start In Life (Developing Well Priorities)

Childhood Excess Weight

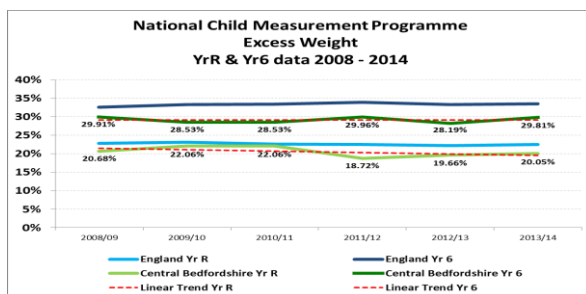
Why this is important

Whilst the latest National Child Measurement Programme (NCMP) data for children aged 4-5 years shows a downward trend in both 'overweight' and 'very overweight' rates, for children aged 10-11 years there is an upward trend in 'very overweight' rates.

What are we doing about it?

Our newly commissioned weight management service for adults and children will have a strengthened focus on prevention and early intervention services, including collaborative work on physical activity with other parts of the Council.

We will also work with Health Visitors and Schools Nurses to ensure a consistent approach to supporting healthy weight, nutrition and increased physical activity for children and families.



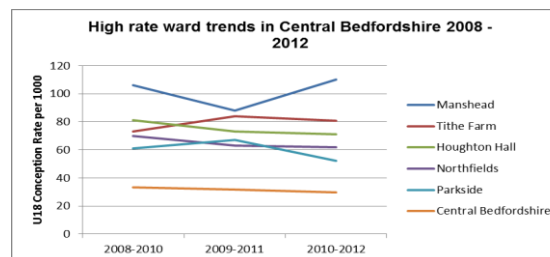
Teenage Pregnancy

Why this is important

Teenage conception rates have stabilised or fallen in 4 out of 5 of the higher rate wards in Central Bedfordshire, but we will continue to work in areas where conception rates are disproportionately high, for example, in the Manshead ward.

What are we doing about it?

We are working to increase access to contraceptive and sexual health services (CASH) for young people where they are most needed. We expect to extend our local work with young people to raise self-esteem and aspirations for young people who are at increased risk of teenage pregnancy. We are also working to ensure that all schools in areas where teenage pregnancy rates are high are supported to provide high quality Sex & Relationships Education and take up the full School Nursing Service offer.



Building Resilience and Reducing Risk

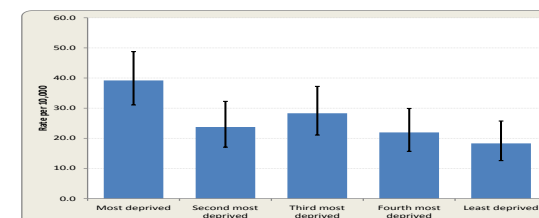
Why this is important

Resilience is the capacity to 'bounce back' from adversity; however those who face the most adversity are least likely to have the resources necessary to build resilience. This is illustrated by levels of self-harm, which are most common in areas of higher deprivation.

What are we doing about it?

We will continue to develop and promote the School Nursing Service that provides immediate support for pupils and their families. We will also work with schools to encourage a whole school and community based approach to promoting emotional wellbeing and resilience. We want to understand more about emotional health and wellbeing and we will also commission a survey to better understand the detail and trends around issues affecting young people locally.

This will help us as we continue to work with children and adolescent mental health services to develop and promote clear pathways for those who need support and treatment.



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Central Bedfordshire Council

CHILDREN'S SERVICES OVERVIEW & SCRUTINY COMMITTEE

18 August 2015

Central Bedfordshire's Five Year Plan 2015-20

Advising Officers: Deb Broadbent Clarke, Director of Improvement and Corporate Services (deb.broadbent-clarke@centralbedfordshire.gov.uk)
Georgina Stanton, Chief Communication Officer
(georgina.stanton@centralbedfordshire.gov.uk)

Purpose of this report

1. To invite feedback from the Committee on the emerging five year plan for Central Bedfordshire Council.

RECOMMENDATIONS

The Committee is asked to:

1. Consider and provide feedback on the proposed framework for the plan including high level outcomes and proposed programmes of work.

Issues

Corporate Planning within Central Bedfordshire

1. The election of a new Administration in May 2015 creates an opportunity to review of the Council's existing priorities.
2. These were articulated in the Council's previous Medium Term Plan and were collectively designed to ensure Central Bedfordshire remains a great place to live and work.
3. Activity in pursuit of these priorities has been rigorously monitored and performance is reported quarterly to the Executive under the three categories of People, Place and Making it Happen (organisational development).
4. Progress on Place measures – has included:

Securing the funding and support for major infrastructure developments including the A5-M1 link road, roll out of superfast broadband, development of the economy through the growth of existing companies and relocation of new businesses within the area.

Development of new community based services including a new Leisure Centre in Flitwick, major refurbishment of Leisure and Library services in Dunstable and investment in independent living schemes across Central Bedfordshire.

5. Progress on People measures has included:

A growth in customer satisfaction with the Council (from a baseline of 35% to 73%), which is likely to have been influenced by enhanced perceptions of Value for Money.

Improved educational outcomes for children and young people in Central Bedfordshire and increasing levels of dignity, choice and control for vulnerable adults as services become less institutional and more personalised.

6. Progress on organisational development measures has included:

A drive for efficiency in order to maintain front line services from reductions and protect council tax payers from increases in their charges for Central Bedfordshire Council services. More than £80m has been saved through efficiency measures since the Council was created.

A New Five Year Plan

7. In order to build on the progress the Council has achieved in the past and maintain the momentum of improvement, a process for developing a refreshed five year plan is proposed..
8. Attached at (Appendix A) is a set of slides which outline the approach for the development of the plan which includes:
9. The purpose of the plan
10. The context for its development
11. Provisional outcomes related to community resilience, jobs and prosperity, education and skills, character of place, protecting the vulnerable, health and housing, value for money and becoming a more responsive Council.
12. Proposed refinement of these outcomes and core programmes of activity.

Developing the Plan

13. Members of the Committee are invited to contribute to the development of the plan in giving their feedback on the proposed approach.
14. Other stakeholders who will be engaged are:
15. Central Bedfordshire Council staff – a representative sample of employees from all services and at all levels will be invited to participate in a series of engagement sessions on the plan.
16. Partners including Town and Parish Councils, neighbouring local authorities, the NHS, business community, emergency services and advocacy groups will also be engaged through either individual or group meetings.

Finalising the Plan

17. Following the engagement exercise, it is expected that a revised and more fully developed plan will be considered by Executive on 6 October and recommended to Full Council for approval on 19 November 2015.

Council Priorities

18. In 2012, the Council confirmed its priorities within the previous corporate plan.

These were:

- Enhancing Central Bedfordshire – creating jobs, managing growth, protecting our countryside and enabling businesses to grow.
 - Improved educational attainment.
 - Promote health and wellbeing and protecting the vulnerable.
 - Better infrastructure – improved roads, broadband reach and transport.
 - Great universal services – bins, leisure and libraries.
 - Value for money – freezing council tax.
19. The election of a new Council in May 2015, has prompted a review of progress against the plan and these priorities. Subject to further engagement and consultation with Members and stakeholders, the revised plan will include amended priority outcomes. Were this to be approved by Council they would replace those listed above.

Corporate Implications

Legal Implications

20. There are no legal implications in developing the five year plan.

Financial Implications

21. Once a refreshed plan is adopted, the future Medium Term Financial Plan will become the financial expression of what the Council aspires to achieve through the priorities and targets set out in the five year plan.

Equalities Implications

22. Public authorities have a statutory duty to promote equality of opportunity, eliminate unlawful discrimination, harassment and victimisation and foster good relations in respect of nine protected characteristics; age disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation.

Conclusion

23. The development of the next five year plan is an important process. It will allow the Council to clearly articulate what it is seeking to achieve between now and 2020. It will form the basis of our core programme of activity against which performance will be measured.

24. The Council will be held accountable by its success or failure to deliver against the plan by the public, stakeholders and staff.

Appendices

The following Appendix is attached:

Developing our vision for the next five years – 2015 – 2020
Powerpoint Presentation

Background Papers

1. The following background papers, not previously available to the public, were taken into account and are available on the Council's website:

Delivering our Priorities – the previous Medium Term Plan of Central Bedfordshire Council.

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Developing our vision for the next five years

Overview and Scrutiny Committees
August 2015

Purpose of the Plan

- To articulate the work that is most important for us to deliver – our priorities
- To shape the activity plans we will deliver – our programmes
- To allow us to measure and monitor how effective we are – our performance measures

So that we can be held to account by our customers and stakeholders.

It needs to be clear, concise and focused.

Key Drivers:

- Demographics – the growing and changing nature of our population
- Customer feedback – perceptions of the Council and the area
- Technology – potential for our organisation and our communities
- Economics – the continuing drive for efficiency and effectiveness
- Legislation – changing responsibilities and opportunities

Early thinking on outcomes:

<p>For our communities:</p>	<ul style="list-style-type: none"> • Building resilience • Jobs and prosperity • Character of place 	<p><i>Our communities will be sustainable and resilient places.</i></p> <p><i>We'll have thriving local economy, supported by great infrastructure, so that all our residents can enjoy prosperity.</i></p> <p><i>The character of Central Bedfordshire will have been preserved alongside positive progress and development.</i></p>
<p>For our customers:</p>	<ul style="list-style-type: none"> • Education and skills • Protecting the vulnerable • Health and housing 	<p><i>Our residents, regardless of their age or life stage, will have opportunities to learn, develop and flourish.</i></p> <p><i>Those who are vulnerable no matter what their age, health or wellbeing, will have the care, support and protection they need.</i></p> <p><i>The wellbeing of residents will be improved by their access to good housing and health services</i></p>
<p>For the Council:</p>	<ul style="list-style-type: none"> • Value for money • A responsive Council 	<p><i>Our customers will feel that the Council offers them value for money because of its continuing focus on cost effectiveness and efficiency.</i></p> <p><i>We will enhance the way the Council works to improve customer experience and satisfaction.</i></p>

Developing our approach:



Developing our approach:

Outcome:	Programmes:	Focus:
Resilient Communities	Resilience	<ul style="list-style-type: none"> • Community Infrastructure and Action • Volunteering • Devolution
Prosperous and Well Educated Residents	<p>Tackling Barriers to Prosperity</p> <p>Education, Skills, Business Growth and Prosperity</p>	<ul style="list-style-type: none"> • Transport/Childcare/Skills • Delivering our vision for education • Supporting new and existing businesses
Sustainable Growth and Heritage	<p>Transport and Infrastructure Plan</p> <p>Growth/Heritage</p>	<ul style="list-style-type: none"> • Road/Rail/Broadband • Enabling Development including: • Market towns • Commercial and retail sites • Countryside and heritage

Developing our approach:

Outcome:	Programmes:	Focus:
Sustainable Growth and Heritage	Development Delivery	<ul style="list-style-type: none"> • Priority deliverables for: • Chiltern Vale • Ivel Valley • Leighton Buzzard • Mid Beds
Taking Care of the Vulnerable and Promoting Independence	<p>Independent Lives</p> <p>Healthy Lives</p> <p>Reducing Childhood Vulnerability</p> <p>Reducing Adult Vulnerability</p>	<ul style="list-style-type: none"> • Info & Advice/Care and Support/Housing • Prevention • Early identification • Effective management • Targeted early interventions: • Poor parenting • Exploitation • Abuse • Safeguarding and early interventions • All vulnerable groups including those who are poor, marginalised and isolated.

Developing our approach:

Outcome:	Programmes:	Focus:
Efficient and Responsive Council	Customer Insight and Satisfaction	<ul style="list-style-type: none"> • Channel improvement and shift • Culture • Resident behaviour change • Council systems and staff behaviours
	Value for Money	<ul style="list-style-type: none"> • Commercialisation (trading, fees and charges, NNDR) • Collaboration
	Mobile, Flexible and Paperless	<ul style="list-style-type: none"> • Technology • Accommodation • Flexible working

Key Issues:

- Are the we focusing on the right things:

Priorities?

Programmes?

What next?

- Consideration of all Overview and Scrutiny Committees
- Engagement with key stakeholder groups
- Revised presentation to Executive - October
- Full Council consideration – November
- Delivery programme under development to launch once approved.

Central Bedfordshire Council

Children's Services Overview and Scrutiny Committee 18 August 2015

SPECIAL EDUCATIONAL NEEDS AND DISABILITIES CAPITAL PROGRAMME 2015/16

Report of Cllr Mark Versallion, Executive Member for Education and Skills
(mark.versallion@centralbedfordshire.gov.uk)

Advising Officers: Sue Harrison, Director of Children's Services
(sue.harrison@centralbedfordshire.gov.uk)
Helen Redding, Assistant Director, School Improvement, Children's Services
(helen.redding@centralbedfordshire.gov.uk)

This report relates to a Key Decision

Purpose of this report

1. This report seeks approval to commence capital expenditure on projects to provide specialist provision for hearing impaired pupils at Parkfields Middle and Toddington St George Church of England School, and for pupils requiring social, emotional and mental health provision at Oak Bank School. The schools and specialist provisions referred to within the report serve all Wards in Central Bedfordshire.

RECOMMENDATIONS

The Committee is asked to:

1. **Consider the Executive report attached as Appendix A and indicate support for the recommendation set out within it.**

Council Priorities

2. The report supports Central Bedfordshire's Medium Term Plan: Delivering your priorities – Our Plan for Central Bedfordshire 2012-2016 and the specific priority of Improved Educational Attainment.

Corporate Implications

Legal Implications

3. As set out in the Legal Implications section of the report attached as Appendix A.

Public Health

4. Extended Services around School and Early Years settings will be further developed as a result of growing school populations. The range of extended services that may be provided in schools includes:

Parenting and family support officers.

Transition support for pupils, schools and families.

Combined clubs and after school activities.

Holiday activities.

Support for vulnerable pupils and families i.e. siblings group and young carers.

Extended Services around School and Early Years settings will be further developed as a result of growing school populations.

Sustainability

5. Whilst there may be additional costs in order to meet sustainability objectives for new build and/or expansion of existing schools, these will be contained within the costs identified for each individual project within the programme. These measures would contribute to reduced running costs through better energy and resource efficiency, alongside creating a better learning environment for the pupils.

Financial Implications

6. As set out in the Financial Implications section of the report attached as Appendix A.

Equalities Implications

7. As set out in the Equalities Implications section of the report attached as Appendix A.

Risk Management

8. The proposals, project governance arrangements and allocation of related capital investment outlined in this report for the commissioning of the new school places at Oak Bank School implements the identified need to manage demographic growth and mitigates the risk on the Council of failing in its statutory duty to provide sufficient school places.
9. The proposals, project governance arrangements and allocation of related capital investment outlined in this report for the specialist provision for Hearing Impairment at Toddington St George Church of England School and Parkfields Middle School ensures that children

who are deaf or have significant hearing impairments who require specialist provision continue to have their needs met in Central Bedfordshire, thus mitigating the risk of out of authority placements.

Key risks include:

- Failure to discharge legal and statutory duties/guidance.
- Failure to deliver the Council's strategic priorities
- Reputational risks associated with the non delivery of required school places.
- Inability of schools to recruit suitable additional staff
- Failure to secure planning consents
- Financial risks, including the potential for overspend on any project within the programme

Appendices

Appendix A – Executive Report 6 October 2015 – Special Educational Needs and Disabilities Capital Programme 2015/16

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Appendix A

Central Bedfordshire Council

EXECUTIVE MEETING:

6 October 2015

TITLE OF REPORT Special Educational Needs and Disabilities Capital Programme 2015/16

Report of: Cllr Mark Versallion Executive Member for Education and Skills
(mark.versallion@centralbedfordshire.gov.uk)

Advising Officer: Sue Harrison, Director of Children's Service
(sue.harrison@centralbedfordshire.gov.uk)

Key Decision

Purpose of this report

1. This report seeks approval to commence capital expenditure on projects to provide specialist provision for hearing impaired pupils at Parkfields Middle and Toddington St George Church of England School and for pupils requiring social, emotional and mental health provision at Oak Bank School.

RECOMMENDATIONS

1. **Approve the commencement of capital expenditure as outlined within the report, to provide specialist provision for hearing impaired (HI) pupils at Parkfields Middle and Toddington St George Church of England School and for pupils requiring social, emotional and mental health provision (SEMH) at Oak Bank School.**

Children's Services Overview and Scrutiny

2. This report was presented to Children's Services Overview and Scrutiny Committee at its meeting on the 18 August 2015 and the Committee was asked to indicate its support for the recommendation set out within the report. The views of the Committee will be reported to Executive at its meeting.

Pupil Forecasting and Capital Planning for Special Educational Needs and Disabilities

3. Significant work has been undertaken over the past year to further develop and refine the Council's forecasting methodology for pupils

Appendix A

with special educational needs and disabilities. This has been essential for the planning of services and school places in an area of significant demographic growth but also to better understand trends within specific categories and complexities of need.

4. To date the analysis has illustrated an increase in the prevalence of autistic spectrum condition and social communication difficulties (but no formal diagnosis) and social, emotional and mental health difficulties. We have also seen a rise in the number of children with very low incidence disabilities such as severe visual impairment, and a rise in the number of children with hearing impairments.
5. When the forecasts are complete, the outcome will inform the Council's Vision for Special Educational Needs and Disabilities that is currently being developed with stakeholders. This will itself inform a capital programme reflecting the challenge of making appropriate future provision for places in special schools and specialist provisions based in mainstream schools. It is anticipated that a further report reflecting this work will be brought to the Council's Executive in December 2015.
6. In the interim a number of feasibility studies have been undertaken on specialist provisions that the Local Authority currently commission from schools in Central Bedfordshire. Support has also been given to academies seeking to expand capacity, or address suitability issues through applications to the Education Funding Agency (EFA) Condition Improvement Fund. Further support has been provided to maximise other opportunities for capital funding as they arise, including the anticipated EFA Post 16 demographic growth capital fund.
7. If subsequently identified as priorities, a coherent capital programme could seek to further reduce the number of out of county placements and residential provision, address the need to commission Post 16 provision for young people with SEND through to the age of 25 as well as addressing the inefficiencies of existing split site arrangements, specifically at the Ivel Valley and Chiltern Area Special Schools.
8. Further development of these services also offers an opportunity to improve the revenue efficiency of the High Needs Block of Dedicated Schools Grant and also to the Council in respect of transport costs.
9. Local Authorities do not receive any capital grant from Government for core specialist provision required as a result of demographic growth but officers are currently developing proposals with a technical sub group of Central Bedfordshire's Schools Forum that could provide for a rolling programme of investment funded through Dedicated Schools Grant (DSG).
10. Ahead of the outcome of that proposal, on 26 January 2015, Schools Forum agreed to transfer any unspent balance of DSG from the High Needs Block allocation in 2014/15 and unspent reserves from previous

Appendix A

years, totalling £1,581m, to support capital development in specialist provisions in 2015/16.

11. The Schools Forum decision was subject to approval by the Secretary of State. Approval of the Council's application for a disapplication of the School and Early Years Finance Regulations to allow the use of this Dedicated Schools Grant for the capital purposes set out in this report has now been received.

Central Bedfordshire's Services for Children with Hearing Impairments

12. The Council commissions specialist services for children with hearing impairments through a contract with Harlington Area School Trust (HAST). This includes specialist provision based at Toddington St George Church of England School, Parkfields Middle School, and Harlington Upper School which were in existence under the former County Council. The service and performance measures are defined within the current contract which commenced in April 2012 and was amended and extended in April 2014.
13. Parkfields Middle School is a Foundation School and both Toddington St George Church of England School and Harlington Upper School are Academies.
14. The current contract secures school based provision within these 3 schools for 20 pupils with statements of special educational needs or education, health and care plans and it also provides an outreach peripatetic service from birth/identification for Central Bedfordshire.
15. School based provision for hearing impaired pupils is not an "add-on" but a fully integrated provision operating within mainstream education. Pupils with hearing impairments are encouraged to participate in all aspects of the life of each school, alongside their hearing peers enabling them to access the National Curriculum as well as broader learning opportunities, and achieve their full potential.
16. Children with hearing impairments often have a complex range of additional emotional and physical needs including mobility disabilities. Some subjects may be taught in normal timetabled lessons and some in one to one and smaller groups, depending on the pupil's needs. Breakfast, break and lunchtime sessions need to be supported appropriately and space for pastoral support and for specialist teaching staff and teaching aids are essential. As a result both Toddington St George and Parkfields have dedicated space available to support the specialist provision.
17. The Council's contract with HAST requires that the service is continually reviewed and improved with a particular focus on communication, efficiencies, environment equalities and quality standards.

Appendix A

18. Since 2014 accommodation on both school sites has been reviewed by the Council. This is as a result of the removal of a temporary unit at Parkfields that had reached the end of its design life, and a building condition report on a similar unit at Toddington St George that is uneconomical to repair and also now requires replacement.
19. Existing specialist accommodation at Parkfields has also become increasingly unfit for purpose as a result of a number of factors including:
- the diverse location of the main areas now used specifically for special educational needs and disabilities which impacts on the teaching and learning of vulnerable pupils and communication between the school's specialist staff
 - an increase in the additional needs of hearing impaired pupils
 - varied group sizes from 1:1 up to 1:5 needing teaching space at the same time
 - an increase in access requirements
 - the suitability of the main areas used specifically for special educational needs and disabilities which have poor acoustics and are undersized
 - Pressure on facilities and the ability for the site to meet the welfare needs of the pupils and staff
 - Pressures on non specialist teaching space within the school which is undersized and adds generally to site overcrowding

Demographic growth in Central Bedfordshire is also forecast to require an increase in specialist provision, including services for hearing impaired learners.

20. Working with their appointed education capital consultants and with support from the Council, each school has commissioned feasibility studies to develop cost estimated design proposals. These reference Building Bulletin 102 which provides specific information and guidance about designing schools for disabled children and children with special educational needs. An analysis of the suitability and capacity of existing provision on each site has also been undertaken to identify deficiencies that can be addressed through capital investment to future proof each for potential growth.
21. Parkfields Middle School has now secured planning approval for a new fully accessible classroom block comprising of classrooms, group and staff rooms. The feasibility study for Toddington St George has concluded the need for a new building that is broadly equivalent in floor area and use to that provided in the existing temporary unit that is now in need of replacement.
22. Parkfields and Toddington St George are adjacent school sites and if these projects are progressed on a similar timescale could offer a good

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opportunity for a joint procurement exercise which the schools, with the support of its professional advisors and of the Council, have indicated they intend to take forward.

23. The governance of each project will be provided through a board that will include Council officers from the School Organisation & Capital Planning Team who will control the release of funding aligned with the achievement of key project milestones.

Oak Bank School (Academy)

24. Oak Bank School is the Council's commissioned school for children with social, emotional and mental health difficulties (SEMH). It has recently been judged as 'Outstanding' by Ofsted (July 2015).
25. The Council currently commissions 66 places from Oak Bank School. Historically pupil numbers fluctuate throughout the academic year, being at their lowest at the start of the autumn term increasing through to the end of the summer term in the next calendar year.
26. Oak Bank will start the autumn term in September 2015 with at least 66 pupils on roll, an increase of approximately 16 pupils at the same point in previous years. Current forecasts suggest that the school will be accommodating approximately 80 pupils by the end of the summer term 2016, increasing in subsequent years to 90 pupils in 2019.
27. With reference to Building Bulletin 102 an analysis of the suitability of existing provision on the school's site has been undertaken to identify deficiencies in model accommodation requirements for Oak Bank School based on forecast student numbers of 90.
28. Working with the school's appointed education capital consultants and with support from the Council, feasibility studies have been commissioned by the school that focus on delivery of a range of additional teaching spaces, specialist science and design technology classrooms, improved sports and dining provision and additional toilets.
29. Significant elements of this range of new and refurbished provision to expand the school's existing facilities and floor space to address overcrowding and a lack of specialist facilities have been included in recently approved planning applications submitted by the academy as part of its fully costed, but unsuccessful application to the Education Funding Agency (EFA) for funding through the 2015/16 DfE Condition Improvement Fund (CIF).
30. Limited funding has meant that most successful applications for 2015/16 CIF funding were awarded by the EFA to projects that address building condition issues including refurbishing or renewing roofs, windows or toilet areas and/or compliance issues such as fire protection systems, electrical upgrades or asbestos removal.

Appendix A

31. As a result of the design work undertaken for the planning applications the school and its consultants are aware of the affordability of the range of provision that can be achieved within the capital funding available.
32. The school intend, with the support of the Council, to directly procure the project through a design and build contract which will be governed through a project board that will include Council officers from the School Organisation & Capital Planning Team who will control the release of funding to the achievement of key project milestones.

Reasons for decision

33. The proposed projects in this report support the Council's Policy Principle of investment in successful schools as all three are rated as outstanding by Ofsted.
34. Completion of the 3 projects outlined within this report will enable the Council to continue to comply with its legal obligation to secure sufficient primary and secondary school places to provide appropriate education for pupils in its area.
35. Feasibility study estimates have indicated that the 3 projects outlined in this report are affordable within the total capital funding available. The governance arrangements for each project will ensure that financial and non financial risks are managed locally but overseen by Council officers who will hold an overarching contingency sum.

Council Priorities

36. The report supports Central Bedfordshire's Medium Term Plan: Delivering your priorities – Our Plan for Central Bedfordshire 2012-2016 and the specific priority of Improved Educational Attainment.

Legal Implications

37. Section 14 of the Education Act 1996 places a duty on Councils to secure sufficient primary and secondary school places to provide appropriate education for pupils in its area. Under this section, the schools will not be regarded as sufficient unless they are sufficient in equipment to provide the opportunity of appropriate education for all pupils. The section also contains a duty to have regard to the need for securing that special educational provision is made for pupils who have special educational needs.
38. S14A of the Education Act 1996 imposes a duty to consider representations about the exercise by local authorities of their functions from the parents of qualifying children in relation to the provision of primary and secondary education. Qualifying children include all those of compulsory school age or under.

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39. The Education and Inspections Act 2006 gives Councils a strategic role as commissioners, of school places and includes duties to consider parental representation, diversity and choice, duties in relation to high standards and the fulfilment of every child's educational potential and fair access to educational opportunity.
40. Under the Equality Act 2010, the Local Authority has a duty to make reasonable adjustments to prevent discrimination against people with protected characteristics such as a disability; it also imposes a duty on Councils to prepare written accessibility strategies to increase disabled pupils' access to the school curriculum and buildings.
41. Following the School Organisation (Prescribed Alterations to Maintained Schools) (England) Regulations 2013, governing bodies of all categories of mainstream school can now agree to an enlargement of premises without following a formal statutory process. As a foundation school, the governors of Parkfields Middle School will be able to make this change. Toddington St George's School and Oak Bank School, as Academy schools, will need to seek approval of the Secretary of State for any enlargement of their premises.
42. It is noted that Secretary of State's approval has been obtained for the Schools Forum decision to use the Dedicated Schools Grant for capital purposes.

Financial Implications

43. The Council has secured approval from the Secretary of State to its application for a disapplication of the School and Early Years Finance Regulations to allow the use of Dedicated Schools Grant for the capital purposes set out in this report.
44. This implements the decision of the Schools Forum on 26 January 2015, to transfer any unspent balance of Dedicated Schools Grant from the High Needs Block allocation in 2014/15 and unspent reserves from previous years, totalling £1,581m, to support capital development in specialist provisions in 2015/16. There is no net capital cost to the Council of the projects outlined in this report.
45. In year, the Council's constitution enables Executive to approve expenditure on Capital Schemes such as those within this report that have not previously been included in the Capital Programme, but which were included in the Reserve list approved by Council when setting the Capital Programme or are schemes with gross expenditure budgets exceeding £499,999 which are to be funded in full from external sources.
46. Approval is subject to the production of Outline and Detailed Business Cases and confirmation that the revenue cost of such schemes can be

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accommodated from within the approved revenue budget for the Capital Programme in the relevant financial year, as confirmed by the Chief Finance Officer and the Executive Member for Corporate Resources.

47. The day to day running costs of specialist school provision is met through revenue funding which is made available on commission by the Council to each school as part of the High Needs Block of the Dedicated Schools Grant (DSG). The Council applies for increases in this revenue funding required as a result of growth in commissioned places through its annual data return to the EFA.
48. The Hearing Impairment service contract price is currently based on 20 children placed within the specialist provisions. Increases in the number of children admitted above that number with agreement of the Council and the HAST Board are funded through the High needs Block of the DSG.
49. This capital expenditure is subject to the Council's Code of Financial Governance and the projects outlined in this report are combined within an approved outline and detailed business case, as required by the Council's constitution.

Equalities Implications

50. Public authorities have a statutory duty to promote equality of opportunity, eliminate unlawful discrimination, harassment and victimisation and to foster good relations in respect of the following protected characteristics: age, disability, gender re-assignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation.
51. This statutory duty includes requirements to:
 - i. Remove or minimise disadvantages suffered by people due to their protected characteristics.
 - ii. Take steps to meet the needs of people from protected groups where these are different from the needs of other people.
 - iii. Encourage people from protected groups to participate in public life or in other activities where their participation is disproportionately low.
52. As commissioner of the new school places that will be provided through the proposed expansion of Oak Bank School the Council has considered that there are no discrimination issues that arise from the change being proposed.
53. The proposals to enhance specialist provision for hearing impaired pupils will help to promote equality of opportunity and improve outcomes for a vulnerable pupil group.

Appendix A

Risk Management

54. The proposals, project governance arrangements and allocation of related capital investment outlined in this report for the commissioning of the new school places at Oak Bank School implements the identified need to manage demographic growth and mitigates the risk on the Council of failing in its statutory duty to provide sufficient school places.
55. The proposals, project governance arrangements and allocation of related capital investment outlined in this report for the specialist provision for Hearing Impairment at Toddington St George Church of England School and Parkfields Middle School ensures that children who are deaf or have significant hearing impairments who require specialist provision continue to have their needs met in Central Bedfordshire, thus mitigating the risk of out of authority placements.
56. Key risks include:
 - Failure to discharge legal and statutory duties/guidance.
 - Failure to deliver the Council's strategic priorities
 - Reputational risks associated with the non delivery of required school places.
 - Inability of schools to recruit suitable additional staff
 - Failure to secure planning consents
 - Financial risks, including the potential for overspend on any project within the programme

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Central Bedfordshire Council

CHILDREN'S SERVICES OVERVIEW AND SCRUTINY 18 August 2015

CHILDREN'S TRUST ANNUAL REPORT

Report of Councillor Carole Hegley Executive Member for Social Care and Housing and Lead Member for Children's Services

Advising Officers: Sue Harrison Director of Children's Services
sue.harrison@centralbedfordshire.gov.uk

Karen Oellermann, Assistant Director, Commissioning and Partnerships
karen.oellermann@centralbedfordshire.gov.uk

Purpose of this report

1. To provide an annual update on the progress made in delivering the priorities in the Children and Young People's Plan (June 2013 – March 2015).

RECOMMENDATIONS

The Committee is asked to:

1. Consider and comment on the Annual Report (Appendix A) and progress made in 2014/15.
2. Record any questions or comments for Children's Trust Board consideration.

BACKGROUND

2. The Children's Trust Annual Report sets out progress made in delivering the priorities within the Children and Young People's Plan (June 2013 – March 2015):
 - Improved educational attainment
 - Protecting vulnerable children
 - Early help and improving life chances
 - Being healthy and positive
3. This is the last Annual Report for the Children and Young People's Plan (June 13– March 15).

4. A refreshed Children and Young People's Plan was agreed by the Trust Board at its meeting of 3 March 2015. Children's Services Overview and Scrutiny Committee considered the refresh of the Plan at its meeting of 20 January 2015.
5. The following is included with this report:
 - **Appendix A** - Annual Report June 2015;
 - **Appendix B** - Children and Young People's Voice report June 15 (which forms part of the Annual Report);
 - **Appendix C** - Quarter 4 Performance Report; and
 - **Appendix D** - Refreshed Children and Young People's Plan (March 15 – March 17).

MONITORING THE PRIORITIES WITHIN THE CHILDREN AND YOUNG PEOPLE'S PLAN

6. Overall performance has been fairly stable through 2014/15.

Improved Educational Attainment

7. Quarter 4 2015 (January – March) performance shows:
 - Central Bedfordshire has gone up 42 places in the ranking of English local authorities (from 114/151 in 2013 to 72/151 in 2014) for the percentage of pupils achieving 5 or more A*-C grades at GCSE or equivalent including English and Maths.
 - The percentage of young people not in education, employment or training (NEET) remains low - Central Bedfordshire (3.7%) performs better than the Regional average (4.5%) and National average (4.7%). Annually calculated NEET measure.
 - As at 31 March 2015, 84% of Central Bedfordshire schools are good or better - the Statistical Neighbour average was 82% and England 82%.
8. Challenges include:
 - Making sure every child has the best start in life and is 'ready for school'. The percentage of children assessed as having a good level of development in Central Bedfordshire (2014) is 57%. This is an improvement of 8% from 2013 but the rate of improvement has been matched nationally. Central Bedfordshire remains in the 3rd Quartile.
 - Improving attainment across Key Stages 2, 4 and 5.
 - Narrowing the gap and improving the attainment of vulnerable and disadvantaged children and young people.

Protecting Vulnerable Children

9. Quarter 4 2015 (January – March) performance shows:
- Child protection reviews completed within timescales continue to achieve the 100% target.
 - 84.5% of referrals have led to the provision of a social care service - achieving the 75% target.
 - The ambitious 90% target for assessments completed within 45 days has been achieved, with a Quarter 4 figure of 96.2%.
 - Young people becoming first time entrants to the criminal justice system has continued to reduce (13.3% decrease - Quarter 4).
10. Challenges include:
- Tackling the challenges of domestic abuse, substance misuse and mental health for children and families.
 - Engaging vulnerable young people within education, employment and training including children with special educational needs and disabilities, looked after children, care leavers and young offenders.

Early Help and Improving Life Chances

11. Quarter 4 2015 (January – March) performance shows:
- There is continued good performance in terms of the percentage of early years and childcare settings judged by Ofsted to be Outstanding or Good (non domestic childcare: 94%, childminders 89%).
 - Supporting Families (Troubled Families Programme) has met the target set by the Department for Communities and Local Government (DCLG) for identifying and turning around 305 families during Phase 1 of the programme. Payment by results claims were subject to an annual external audit, the outcome of which was very positive.
 - 657 disadvantaged 2 year olds have been placed in early education / childcare. Whilst there is a risk that the final target will not be met it should be noted that take up is still improving.
 - In December 2014 there were 137,300 people in employment in Central Bedfordshire of a total working age population (aged 16-64) of 168,300 - 81.6%. This rate is higher than all comparator areas - and is in line with the target of maintaining performance at 5% above the national rate, increasing the difference between local and national to 9.1%.

12. Challenges include:

- Strengthening and improving the integrated approach to providing better health services across health visiting, children's centres, education and social care.

Being Healthy and Positive

13. Quarter 4 2015 (January – March) performance shows:

- There has been an ongoing, downward trend in the under-18 conception rate in Central Bedfordshire since 2010, with the greatest reductions seen in the under-16s. There has been a 25.5% reduction in the under-18 conception rate in Central Bedfordshire from 2012 – 2013, which is below both the national and regional rates. However, whilst rates have stabilised or fallen in 4 out of the 5 teenage pregnancy 'hotspot wards', there has been an increase in Manshead ward (see challenges below).
- Breastfeeding rates in Central Bedfordshire in Quarters 1, 2 and 3 2014/15 show an improvement on 2013/14, although the proportion of mothers both initiating, and continuing to breastfeed at 6-8 weeks dropped slightly in Quarter 3 (latest data). Ongoing, effective support for mothers from Midwifery Services, Health Visitors and Children's Centres - working in partnership across the antenatal and postnatal pathway - needs to continue to strengthen. For 2015/16 Midwifery Services will have an additional target to maintain breastfeeding rates at 5 days (75%), and Health Visitors will be contacting mothers on day 6 post delivery to offer additional breastfeeding support and advice.
- Delivery of the new prevention/Tier 1 work in the Children & Young People's Drugs & Alcohol Services has seen a positive increase in Tier 2 interventions in 2014/15, and a decrease in the demand for Tier 3 services. The percentages of young people reporting a reduction in drug and/or alcohol usage 3 months following discharge from both Tier 2 & Tier 3 services remain high.

14. Challenges include:

- Reducing teenage pregnancy rates in the Manshead ward (the 'hot spot' ward where the latest data suggests rates have increased).
- Improving young people's self esteem and emotional health and well being – identified as an emerging issue in the Schools Health Education Unit (SHEU) Health Related Behaviour and Perceptions Survey report 2014.

- Increasing breastfeeding rates at 6-8 weeks through strengthened, integrated working between Midwifery Services, Health Visitors and Children's Centres.

15. Further detail of performance is included in the Children's Trust Board Quarter 4 Performance report (Appendix C).

Children and Young People's Voice

16. The Children's Trust Board is committed to listening and involving children and young people as a means of ensuring the right services are being provided, needs are being met, and outcomes improved. The Children and Young People's Voice report is included as Appendix B (forming part of the Annual Report). The report will also be considered by the Central Bedfordshire Safeguarding Children's Board 'Voice of the Child' sub group.

Council Priorities

17. The Children and Young People's Plan supports the Council in delivering the following priorities:

- Improved educational attainment.
- Promote health and wellbeing and protecting the vulnerable.

Corporate Implications

Legal Implications

18. There are no specific legal implications in respect of this report.

Financial Implications

19. Prevention and early intervention are key drivers of the plan which are expected to deliver efficiencies in the long term. Work continues with partners to deliver services together in a more integrated way, with all priorities and actions developed within partners' current resources.

Risk Management

20. Areas of ongoing under performance are a risk to both service delivery and the reputation of the Council. Regular quarterly monitoring of performance against the priorities within the Children and Young People's Plan supports effective risk management.

Staffing

21. Not Applicable.

Equalities Implications

22. The priorities within the Children and Young People's Plan include a number of strategic actions which identify children and young people who are not achieving, who are excluded or in vulnerable circumstances.

Public Health

23. The Children and Young People's Plan sets out the vision of wanting every young person to be 'prepared to take their full place in society as a healthy, happy, contributing and confident citizen'. This is underpinned by priorities and actions aimed at improving children's emotional and physical health.

Community Safety

24. The Council has a statutory duty to ensure that across all of its functions it does all that it reasonably can to reduce crime and disorder. The review of performance may indicate community safety concerns for children and young people that the Council needs to address.

Conclusion and Next Steps

25. There has been improvement in some key priorities as outlined above and the challenges identified are being addressed by the Children's Trust Board through a number of focused deep dives including:

- School readiness
- Attainment of disadvantaged children
- Under 18 Conceptions - Deep dive analysis in high rate wards
- Mental health, self harm and self esteem issues
- Domestic abuse
- Work experience opportunities

26. Members are asked to consider the Annual Report and to make comments in relation to the progress of partners in delivering the priorities in the plan.

Appendices

The following Appendices are attached:

Appendix A - Annual Report June 2015;

Appendix B - Children and Young People's Voice June 15 (which forms part of the Annual Report);

Appendix C - Quarter 4 Performance Report; and

Appendix D - Refreshed Children and Young People's Plan (March 15 – March 17)

Background Papers

None

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**Central Bedfordshire
Children's Trust**

Annual Report:

Children and Young People's Plan

June 2013 – March 2015

June 2015

Welcome to the Annual Report of the Central Bedfordshire Children and Young People's Plan (June 2013 – March 2015)



The Annual Report provides details as to the progress made against the four priorities within the Children and Young People's Plan:

- Improved educational attainment
- Protecting vulnerable children
- Early help and improving life chances
- Being healthy and positive

It is the last Annual Report in respect of the June 2013 – March 2015 Plan.

The importance of ensuring that the voices of children and young people are listened to and taken into account with service development is key and I am pleased that a 'Children and Young People's Voice' report also forms part of the Annual Report.

2014/15 has seen the Board engage on a wide range of topics across all four priorities, with challenge and performance monitoring resulting in a number of areas of focus including making sure every child has the best start in life and is ready for school.

2015 will see us continuing to work together to improve outcomes and respond to challenges - particularly for those children and young people who are vulnerable and not doing so well. This is reflected in the refreshed Children and Young People's Plan.

The new year also brings with it a new Children's Trust Board Chairman (Sue Harrison – Director of Children's Services) and Vice Chairman (Councillor Carole Hegley – Executive Member for Social Care and Housing and Lead Member for Children's Services). I look forward to continuing to work with them as a Member of the Board and all our partners to improve outcomes for all our children and young people.

Cllr Mark Versallion
Chairman, June 2011 – June 2015
Central Bedfordshire Children's Trust Board

Introduction

This is the Annual Report of the Central Bedfordshire Children and Young People's Plan (CYPP) June 2013 – March 2015. Progress against key priorities is set out in the pages that follow – with more detailed performance information available within the Trust Board's Quarter Four 2014/15 Performance Monitoring Report.

The Children's Trust Board recognises that listening to children and young people's voices plays an essential part in determining the progress made in delivering the priorities with the Children and Young People's Plan. An update on key 'children and young people's voice' initiatives is included as Appendix B and forms part of Children's Trust Board Annual Report.

Improved educational attainment

Outcomes

Improved achievement and progress

The right skills to be work ready

Excellent behaviour

Well led and managed schools

Outstanding teaching and learning

**Cross Cutting: Early help for all who need it
Put children at the centre of everything we do**

Multi-agency learning and shadowing opportunities to promote shared understanding of work

What difference have we made?

- More than 90 per cent of children starting school across Central Bedfordshire in September 15 have been granted their first preference.
- The new School Places Programme has created over an additional 3320 school places (in 'Good' or 'Outstanding' schools) in Central Bedfordshire to meet the increasing need for school places since 2011. Between 2014-15 over 2700 places were created.
- Performance of Central Bedfordshire schools judged by Ofsted to be 'Good' or 'Outstanding' is good and remains above the National and Statistical Neighbour Average (84% as at 31 December 2014 – above the Statistical Neighbour average 81%, and the National average 81%).
- Performance in respect of children achieving 5 or more A* - C grades at GCSE or equivalent including English and Maths has improved as Central Bedfordshire is now in the 2nd Quartile having moved up 42 places in the ranking of English local authorities (from 114/151 in 2013 to 72/151 in 2014).
- The proportion of 16 and 17 year olds recorded as participating in apprenticeships has increased from (4.8%) December 2013 to (6.4%) December 2014 - higher than East of England (4.7%) and England (4.2%) December 2014.
- The percentage of young people not in education, employment or training (NEET) remains low and Central Bedfordshire continues to perform well at 3.7% - better than the national average 4.7% and the regional average 4.5%.
- Run exciting library events for youngsters such as Harry Potter themed events and a number of Go Wild workshops where children get to meet a range of different animals including lizards, rabbits and tortoises.
- Delivered a successful Summer Reading Challenge in partnership with local schools reaching 5,151 children who read over 60,000 books.
- In October 2014 the Central Bedfordshire Personal, Social and Health Education (PSHE)/Sex and Relationships education (SRE) Partnership Network was launched. The network was developed by Public Health in collaboration with The Teaching School, service providers and commissioners to offer support and information to all CBC schools in the delivery of their PSHE and SRE curriculum.

Challenges

- Making sure every child has the best start and is 'ready for school'.
- Early Years Foundation Stage (good level of development) and attainment at Key Stages 2, 4 and 5.
- Narrowing the gap and improving the achievement of vulnerable and disadvantaged children and young people.
- Introduction of Progress 8 and Attainment 8 measures, and assessments without levels at Key Stages 1 and 2.
- Commission good quality school places in Central Bedfordshire to ensure sufficient places are provided in the areas where they are most needed.
- School exclusions (there has been some improvement but Central Bedfordshire is below the National and Statistical Neighbour average for 2012/13 – latest published data).
- School attendance (the latest published data for 2013/14 shows improvement but authorised absence needs to remain an area of focus).

Protecting vulnerable children

Outcomes

Children are happier and safer as a result of help received

Children in care have safe and stable homes

Young people are diverted from offending and anti-social behaviour

Cross Cutting: Early help for all who need it
Put children at the centre of everything we do
Multi-agency learning and shadowing opportunities to promote shared understanding of work

What difference have we made?

- The Access and Referral Hub was launched in April 2014 - offering support and advice to anyone worried about a child. Providing a 'one front door' approach is proving a success and supports more joined up service provision for families.
- For the three-year period ending 31 March 2014, the council took an average of 542 days to place a child with an adoptive family after they entered the care of the local authority. That is 86 days less than the national average and ranks Central Bedfordshire in the top quarter of authorities nationwide.
- Central Bedfordshire Council has joined forces with Luton Borough Council and Hertfordshire County Council to encourage individuals and couples from the LGBT community to consider adopting or fostering a child.
- Improved information sharing through the new Central Bedfordshire Safeguarding Children Board website which contains up to date information and guidance in one place for professionals, parents and carers, children and young people and the voluntary sector.
- Helped to keep children safe on line by supporting the NSPCC's Share Aware, to give parents of 8 to 12 year olds simple, no-nonsense advice about internet safety.
- Worked together to make children and their parents alert to the signs of child sexual exploitation – e.g. by launching a local campaign to coincide with National Child Sexual Exploitation Awareness Day.
- The National Working Group completed a Child Sexual Exploitation (CSE) review.
- The launch of the Academy of Social Work and Early Intervention (The Academy) provides a programme for all newly qualified social workers who have to be assessed and supported through their first year in order to become fully fledged social workers. This has supported the reduction in social worker vacancies from 54% January 14 to 29% April 15. The programme has been endorsed by the College of Social Work. The Academy has also achieved the national matrix standard for Information, Advice and Guidance (IAG) service. The matrix is an international quality standard for organisations that deliver IAG.
- A small number of Looked after Children have been supported by a CBC Workforce initiative offering a trial of traineeships.

Challenges

- Tackling the challenges of domestic abuse, substance misuse and mental health for children and families.
- Engaging vulnerable young people within education, employment and training including children with special educational needs and disabilities, looked after children, care leavers and young offenders.

Early help and improving life chances

Outcomes

High quality early years and child care	Positive, confident parents and carers	Young carers identified and supported	High aspirations for young people and their families	Children and young people with disabilities are supported to achieve their aspirations	More families in work and fewer children living in poverty	Troubled families are supported
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Cross Cutting: Early help for all who need it
Put children at the centre of everything we do
Multi-agency learning and shadowing opportunities to promote shared understanding of work

What difference have we made?

- The Access and Referral Hub was launched in April 2014 - offering support and advice to anyone worried about a child. Providing a 'one front door' approach is proving a success and is supporting more joined up service provision for families. (1445 Early Help Assessments were completed 2014/15.)
- Increased take up of the free offer for disadvantaged two year olds early years places.
- Expanded a nursery school to help provide nursery places for those children eligible for two-year-old funding – entitling them to 15 hours of free childcare and early education each week.
- Continued good performance for early years and childcare settings judged by Ofsted to be Outstanding as at 31 December 2014 - Non Domestic Childcare: Central Bedfordshire (94%), National (86%). Childminders: Central Bedfordshire (88%), National (81%).
- Continued good performance for under 5 year olds from most deprived areas registered with children's centres (84% Quarter 4 2014/15).
- Views and experiences of young people with SEND and parent carers have helped to inform the development of the Central Bedfordshire Special Educational Needs and Disabilities Preparing for Adulthood Strategy (14-25) - to improve consistency to the planning process so that young people and their families are aware of care and support options, and choices available to them.
- Central Bedfordshire Council has employed a Young Carers Support Worker to deliver one to one support to young carers and a Children's Worker to work with families where there is a parental mental illness.
- There are 32 young carers actively taking part in delivering peer mentoring.
- Improved outcomes for troubled families – the Supporting Families Programme has met the target set by the Department for Communities and Local Government (DCLG) for identifying and turning around 305 families during Phase 1 of the programme.

Challenges

- Strengthen and improve on the integrated approach to provide better health services across health visiting, family nurses, children's centres, education and social care.

Being healthy and positive

Outcomes

<p>Children have the best start in life</p>	<p>Improved mental health for children and their parents</p>	<p>Better health outcomes for looked after children</p>	<p>Fewer young people engaging in risky behaviours</p>	<p>Children and families developing lifelong healthy lifestyles</p>
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**Cross Cutting: Early help for all who need it
Put children at the centre of everything we do**

Multi-agency learning and shadowing opportunities to promote shared understanding of work

What difference have we made?

- Teenage pregnancy rates per 1000 have fallen from 26.7 in 2012 to 19.9 in 2013 (latest available data), and rates have stabilised or fallen in 4 out of 5 teenage pregnancy 'hotspot' wards*. This demonstrates that the local teenage pregnancy strategy in Central Bedfordshire is being delivered effectively within a partnership approach, although targeted work within the 'hotspot wards needs to continue to be a priority.
 - Increased the percentage of Looked After Children who have had their Annual Health Assessments from 74.8% as at 31 March 13 to 94.7% as at 31 March 2014.
 - The Central Bedfordshire 'Smokefree Baby and Me' Programme is having a positive impact on reducing the percentage of mothers who are smoking at the time of delivery. The programme provides targeted, 1:1 support for pregnant smokers from a specialist Smoking in Pregnancy Adviser screening all pregnant women for carbon monoxide and providing them with positive health messages and information, and support to quit before the birth of their baby.
 - Rates for overweight, 'very overweight' and 'excess weight' in children in Reception Year and Year 6 in Central Bedfordshire in 2013/14 are all below the England average (Academic Year 2013/14). Downward trends need to be sustained through a strengthened, whole systems approach to tackling excess weight and physical inactivity.
 - A new sexual health website for Central Bedfordshire and Bedford Borough has been launched - www.safesexinbeds.co.uk - which includes up-to-date information on all sexual health services via a clinic-finder function, and provides information and signposting on all sexual health related issues.
 - Through the Bike It Programme*:
 - increased cycling levels by 13.6% in 12 schools in the Dunstable and Houghton Regis area over a 2 year period (2012-2014) with the numbers of pupils who report regularly being driven to school decreasing by 12.0% as more pupils choose the more active options for the journey to school.
 - Run activities such as biker's breakfasts, bike maintenance sessions, the loan of balance bikes to younger children.
 - Coordinated participation in Sustrans' Big Pedal initiative (a giant inter-school cycling competition). Across the 11 schools taking part in the Big Pedal in March 15 a total of 9,580 journeys were made, of which 4,782 were by bike and 4,053 by scooter - a 66% improvement over the previous year.
- * part of CBC's Travel Choices programme - in partnership with Sustrans. Funded through the government's Local Sustainable Transport Fund

Challenges

- Improve young people's self-esteem and emotional health and wellbeing in Central Bedfordshire, identified as an emerging issue in the Schools Health Education Unit (SHEU) Health Related Behaviour and Perceptions Survey Report (2014).
- *Reduce teenage pregnancy rates in the Manshead Ward (the 'hot spot' ward where the latest data suggests rates have increased).
- Increase the breastfeeding rates at 6-8 weeks through strengthened, integrated working between Midwifery Services, Health Visitors and Children's Centres.

Central Bedfordshire Children's Trust Board
8 June 2015
Item 7 Appendix B



Children and Young People's Voice

June 2015

**Central Bedfordshire
Children's Trust**

Introduction

Central Bedfordshire Children's Trust Board is committed to listening and involving children and young people as a means of ensuring the right services are being provided at the right time, needs are being met, and outcomes improved for children and young people growing up in Central Bedfordshire.

This report provides an update on key 'children and young people's voice' initiatives that have taken place and forms part of Children's Trust Board Annual Report.



1. Feedback and Involvement

Some of the groups helping us to improve services

Central Bedfordshire
Youth Parliament

Young
Commissioners

Youth Auditors

Asylum Seeking Children and
Young People
(Reach the Dream Group)

Children in Care
Council
And Young Voices

Young Directors
(Health Watch)

Looked after children

Young Carers

Children and Young People with Special
Educational Needs and Disabilities
including Young Researchers

Young people involved in
recruitment processes

Children on Child
Protection and Children in
Need Plans

Year 6, 8 and 10 pupils in some middle and
upper schools (including special schools)

In some cases engagement activities referred to in this report pre-date 2014/15 but have been included where updates on actions are provided.

Consultations referenced may include small sample groups



2. Children and Young People's Voice (Engagement and Activity Updates)

2.1 Youth Parliament

- 2.1.1 Central Bedfordshire Youth Parliament (CBYP) has been active since 2010. Elections are carried out on a two year term in upper schools / secondary and special schools across Central Bedfordshire along with associated youth groups. There are also elections for four young people from across Central Bedfordshire to represent Central Bedfordshire on UK Youth Parliament.
- 2.1.2 CBYP provides opportunities for young people to use their voice in creative ways to bring about social change. It helps to influence the services provided and ensure the views of young people are known and understood.
- 2.1.3 There is Youth Parliament representation on Healthwatch Central Bedfordshire, Police Independent Advisory Group, Central Bedfordshire Children's Trust Board and mental health of young people in schools forum.
- 2.1.4 The recently launched CBYP Youth Voice Manifesto 2015/16 explains how consultation takes place to determine priorities for the coming year:

'Each year, the Youth Parliament consults with young people from across Central Bedfordshire using the Make Your Mark consultation. Make Your Mark is a national, annual ballot that gives young people a say on what is debated by their Members of Youth Parliament in the House of Commons. The ballot consists of 10 issues, but young people can only vote for one issue that is of the most importance to them. Data is collected from across the country and the top five issues are debated and voted for in the House of Commons. The two issues that receive the highest votes become national campaigns that each Local Authority Youth Voice is required to adopt. In addition to this, Central Bedfordshire Youth Voice select their local campaign on the issue(s) that received the highest votes in Central Bedfordshire but did not pass as a national campaign in the House of Commons.' **CBYP Youth Voice Manifesto 2015/16**

The Make your Mark 2014 results for Central Bedfordshire are as follows:

2.1.5

Issue	Votes
Living Wage	1375
Work Experience	876
Maths & English Resits	804
Euthanasia	625
Mental Health	616
Curriculum for life	450
Votes at 16	403
Fund our Youth Services	307
Young people directly involved in making laws	285
Give young people a voice in their communities	235
Total	5976 = 23.76% of Youth Population

2.1.6 This has resulted in the following priorities for 2015/16:

- Better work experience (Local Campaign)
- Improved mental health services for young people (National Campaign)
- Living wage for all, regardless of age (National Campaign – and also the top local issue)

2.1.7 Work has already taken place in respect of these priorities for example:

- Work Experience – Alastair Burt MP has provided Youth Parliament with a breakdown of what schools in his constituency offer in the way of work experience (and Personal, Social and Health Education (PSHE)) as he was concerned with the level of variation. A survey is currently being undertaken with young people around their experiences and views on work experience.
- National Campaigns - Living wage for all, and improved mental health services. Meetings have taken place with the Leader of Central Bedfordshire Council, Executive Member for Children’s Services, Alastair Burt MP and Andrew Selous MP.
- Links have been made with MIND and Bedfordshire Clinical Commissioning Group to campaign for better mental health services, and young people are working alongside an exciting new initiative with community members who are setting up a Mental Health Forum.

2.1.8

'It's really exciting to finally launch our manifesto for the next year after everyone has worked so hard putting it together. Although we will continue to campaign for young people on a range of different issues, the manifesto focuses on our priorities for 2015/16.

The campaigns for improved mental health services for young people and a living wage for everyone are incredibly important issues in Central Bedfordshire. Out of the 5,976 votes cast across Central Bedfordshire, 1,375 voted for a living wage, making this the top issue across the area. These were closely followed by more meaningful work placements for people over the age of 16. This is really important in helping to shape future careers and give young people an idea of the qualifications they need to follow a particular path.

We are looking forward to working with as many groups as possible over the next year to ensure that young people's voices continue to be heard in Central Bedfordshire.'

Chair Ellen Burke.

Extract: Central Bedfordshire Council Press Release

2.1.9 Engagement and consultation with Youth Parliament in 2015 includes:

- Green spaces (countryside access, Wildlife Trust)
- Luton and Dunstable Hospital Services
- The road 'Safety Car' 'OSCAR' promoting road safety to young drivers throughout Central Bedfordshire
- Children and Young People's Plan (March 2015 – March 2017)

A short film on Central Bedfordshire Youth Parliament is available on YouTube (by searching 'Central Bedfordshire Youth Parliament').

2.2 Youth Auditors - Youth Audit

2.2.1 The Central Bedfordshire Youth Audit (2013) was the first in the country to examine the commissioned Youth Offer services, which are provided on behalf of and by Central Bedfordshire Council. In particular, the Youth Audit was asked to assess to what extent the Youth Offer translates from policy into practice.

2.2.2 Youth Auditors were recruited from previous Young Inspector Programmes in Central Bedfordshire, Members of the Central Bedfordshire Youth Parliament and Central Bedfordshire Young Commissioners. There are 8 members of the Youth Audit team.

2.2.3 The Youth Audit involves reviewing existing strategies, action plans, needs assessments, consultation responses and commissioning specifications. It

also involves gathering targeted questionnaires (with the help of the Corporate Consultation team), holding interviews, and involving the people who are responsible for, run and use the services.

2.2.4 The Youth Audit Action Plan – attached as Appendix A provides further detail as to recommendations and progress being made against agreed actions. It is regularly reviewed by young people and it is anticipated that a full audit of youth provision will take place in Summer 2015.

2.2.5 In 2015/16 Youth Auditors will be involved in the following:

- Information, Advice and Guidance (IAG) minimum standards focus groups in school
- Briefings for Audit Review
- Quality Assurance Information, Advice and Guidance and Volunteering
- Interviews with key Council officers and stakeholders
- Youth Audit

2.3 Young Commissioners

2.3.1 Young Commissioners are young people trained to work alongside the Youth Support Service. There are 10 Young Commissioners and they undertake the following to ensure Central Bedfordshire is able to provide the best possible provision for young people;

- Making professional judgements on what applications receive funding to provide services.
- Ensuring children and young people receive the best possible standards of participation in organisations that work with them and also have an impact on them.
- Visiting services that work with and impact upon children and young people to assess and evaluate how well they are performing against a set criteria assessment, advise on improvements and report on their findings.
- Enabling and allowing young people to have their voices heard and giving them the opportunity to shape and influence services.
- Encouraging existing services and providers to reflect on their practice and implement change.

2.3.2 Projects and tenders that young people have been involved in to date include:

- Youth work
- Information, Advice and Guidance (IAG)
- Volunteering
- Sexual health
- Substance misuse
- Mental health services

- 2.3.3** In 2015/16 Young Commissioners will be involved with the following:
- Peer Mentoring Tender
 - Youth Work Tender
 - Inspection of Corporate Parenting - a joint piece of work with existing Young Commissioners and members of the Children in Care Council

What it can mean to be involved - feedback from Young Commissioners:

"I really enjoyed it, especially the interviews. I Feel like I'm being taken seriously and I'm being listened to. This is going to look great on my cv- the fact that I have interviewed people for actual contracts as well as learning about commissioning; it could even give me a start in that direction for a career if I wanted. Thank you!"

"It has been very interesting to sit on both the Youth and Adult Panels. It has been good to know that Central Beds is valuing Young Peoples views when appointing companies to Youth Work in the area, because if Young People think the companies are going to be good for them, it can really influence what the Adult Panel finally decides. Also the fact that the marks were split near enough 50/50 with both panels meant that the Youth actually had power into who was going to get the contract."

"Overall, my experience as a youth commissioner has, so far, been both pleasant and interesting. I really appreciate being able to input in decisions such as these and representing the young people in my local area. I've learnt skills that a regular classroom environment could not teach me, like: the process of auditioning in a real situation, interacting with adults as well as other young people and arguing my opinions when I feel strongly. It has been thoroughly enjoyable and I look forward to continuing my work with the rest of the commissioners."

2.4 Young Carers

- 2.4.1** Young carers are children who look after someone in their family e.g. a person who has an illness, a disability, a mental health problem or a substance misuse problem. There are 636 young carers registered with Carers In Bedfordshire.
- 2.4.2** The Central Bedfordshire JSNA includes that 'Inappropriate levels of caring impact on a child's own emotional and physical health as well as their educational achievement and life chances' and that 'Young carers who are well supported are likely to build resilience, build support networks and develop skills that will support them into adulthood.' Views on the support offered therefore play an important part in improving outcomes.
- 2.4.3** A small number of young carers receive a one to one intervention. They complete an assessment at the end which looks at the impact of attending and also how useful and enjoyable participating has been.

2.4.4 The Children's Trust Board monitors the support offered to young carers and in Quarter 2 2014/15 (last available data) 97% of identified young carers were supported.

2.4.5 The recently refreshed Children and Young People's Plan includes the measure the 'Number of young carers identified and offered support' through which the Trust Board will continue to be updated on the support offered.

2.4.6 The Young Carers Crew (peer led steering group) will also be brought together to enable young carers to have a voice in the implementation of the young carers plan.

2.5 School Councils

2.5.1 Schools councils are a means of involving children and young people in decision making processes relevant to the running of a school, varying from choice of uniform to school meals. School councils can also be run as part of the school's citizenship or personal, social and health education programs. Many of Central Bedfordshire's schools use school councils.

2.6 Children with Special Educational Needs and Disabilities

2.6.1 Central Bedfordshire Council's Support and Aspiration Board has led on the commissioning of a strategy for the 'effective and meaningful' participation of children and young people with special educational needs and disabilities. The SEND Participation Strategy 2015 will be made available this summer. Over 180 children and young people with disabilities were consulted on the development of the Strategy.

2.6.2

Process
Central Bedfordshire Council engage with young people who have additional needs to have their say

Numbers and methodologies

Over **180** children and young people were consulted

Mix of methodologies:


- Questionnaires
- Focus groups
- Depth interviews
- Leadership and self expression workshops
- Home visits
- Music workshops

Organisations we worked in partnership with to deliver this are:

							
The Chiltern School	Weatherfield Academy	Harlington Upper School	Samuel Whitbread Academy	Central Bedfordshire College	MENCAP	Families United Network	Outside-iN

What did people tell us?

Children and young people are often **not involved** in decisions about their lives.



Children and young people want to be listened to more and would like to **be more involved** in decisions about their lives.



All children and young people can communicate, sometimes using sign-language, body-language or using pictures.




Many children and young people like to go on the computer, using a computer can be a good way to **tell people what you think**.



Ideas about how we can make it better

Children and young people can help adults make a **website and better leaflets**, to let them know activities they can do and what help they can get.



Train parents, carers and adults to learn to support children and young people with disabilities get involved in decision making.



Children and young people get **more chances to make decisions** about their lives.



Children and young people can **be young leaders** to help Central Bedfordshire Council collect ideas and decide what services the council should focus on.



2.6.3 As part of the work, and the consultation with children, young people and their families, SEND Participation Guidance has been developed which includes:

- **Let me have enough time:** *'Adults are good at listening if they have the time, it's all about people who have time for you and don't rush you.'* Often a lack of confidence or self-esteem can hold people back from expressing themselves, ensure young people have enough time to be able to do so.
- **Really get to know me:** *'I don't want just anyone helping me, make sure there are people to help me that I know and trust.'* Take time to get know the young person you are supporting, and ensure the continuity of people involved as far as possible, but especially at the start and end of projects.
- **Don't limit my aspirations:** *'I would like to create my own films but need support.'* Recognise, celebrate and respect individual skills, talents and strengths. Give people time to explore options that can help them work towards achieving their goals in a meaningful way.
- **Support and encourage me:** *'I don't know the words to say something.'* Provide support and opportunities to practice decision-making so young people build confidence; inspire young person to get involved and sincerely encourage them when they do, recognising their achievements.
- **Visit me where I am relaxed:** *'Someone should go and visit the college and find out about our views.'* Work with children and young people in environments that they are familiar with, or allow time so they can get to know a new space.
- **Talk to me in a way I understand:** *'You need to know the young people you are talking to. If someone has autism, if you knew them, you would know what to ask them, how to ask it and if you should ask.'* Adapt your approach for each person, and ensure it is right for him or her.
- **Let me use what I need to communicate:** *It is of utmost importance to use whichever communication system or approach that young people use, including Makaton, British Sign Language, PECS, Talking Mats and other augmented communication systems.*
- **Explain what you really mean:** *'Questionnaires are ok, but you really need someone to help you go through them so you really get the point.'* Some people may repeat what you say when they are unsure of how to respond, or are anxious; use different approaches and communicate clearly.
- **Let me chose:** *Working with friends or in pairs 'like we are doing now' can be a good way for some young people to gain confidence to express themselves 'not in a big group or writing things down.'* Allow young people to choose themselves the best way for them to participate.
- **Be flexible:** *Children and young people like using technology and other methods to help them express their views including iPads, computers, theatre, video and arts based activities. Keep activities simple, engaging, relevant to them and their life and most of all fun!*
- **Stick to what's agreed, or let me know if things change:** *Routine can be very important; predictable start and finish times are good. If*

plans change, it is really important to let young people know in advance so that they are prepared and less likely to become anxious.

- **Be aware of how you may come across:** *'People from the council should come and talk to us, a softer person, someone you can trust. People in suits are intimidating.'* *Be proactive and use an approach that works, it doesn't have to be complicated; most of all really listen to each person and respect their views.*

2.6.4 Next steps will include the creation of a young people's forum to take forward the development of the Local Offer which gives children and young people with SEND and their families information about what support services the local authority think will be available in their local area.

2.6.5 Other engagement activities include a recent project commissioned by Bedford and District Cerebral Palsy Society and undertaken by Bedford Creative Arts which gave a group of young people with disabilities the opportunity to design a billboard.

2.7 Children in Care Council

2.7.1 The Children in Care Council (CiCC) is a group of children and young people who are or have been in the care of Central Bedfordshire Council. The members of the CiCC work with the Corporate Parenting Panel to improve services for Central Bedfordshire Council's looked after children. There are currently 24 members of the CiCC.

2.7.2 The Children in Care council includes children aged 16-25. There is also a 'Young Voices' group which engages with younger children. There are currently 29 member of the Young Voices Group.

2.7.3 The Children in Care Council and Participation Annual Report 2014/15 provides a summary and evaluation of the work of the Children in Care Council. Details can be found in the report on the Children's Trust Board website www.centralbedfordshirechildrenstrust.org.uk

2.7.4 Preparation of the Annual Report 2014/15 included asking members of the CiCC what had been achieved over the past year - their response follows:

Members of the Children in Care Council were asked 'What has the CiCC achieved over the last year?'

- *The Awards – This was the biggest event to date with 108 young people receiving their award on the night.*
- *Recruitment Involvement – CiCC members took part in the recruitment of the Director of Children's Services, the Chair of the Local Safeguarding Board, 9 managers across Children's Services, 2 personal advisers working for the Youth Support Team and 6 days of Assessed and Supported Year in Employment (ASYE) social worker recruitment.*
- *The Frontline Programme – CiCC members organised training for 120 social work students and were asked to return to be part of another day*

as part of the training placement for the students.

- *Working with the Commissioning Service – CiCC members were involved from the outset with the tendering processes for supported accommodation for leaving care young people and the advocacy and independent visitor contracts.*
- *Shadowing the Chief Executive – one member of the CiCC spent the afternoon shadowing the Chief Executive, Richard Carr at the Senior Management Team meeting.*
- *Children’s Commissioner Participation Group – 2 members of our CiCC attend this group.*
- *Summer Activities – 36 young people aged 8 – 15 year, and 19 over 16’s attended one activity day.*
- *Peer Mentors – CiCC have continued to mentor younger looked after children.*
- *Training Days for Assisted and Supported Year of Employment – CiCC have developed and received accreditation for the training they delivered.*
- *Consultation on ‘Our approach to Corporate Parenting in Central Bedfordshire Council 2014 – 2017’ – A group of young people including members of CiCC were consulted to make comments on the policy and action plan*
- *Consultation Booklets – new consultation booklets have been redesigned and reworded with the involvement of the CiCC.*
- *Development of a Passport to Independence – This was an idea from the CiCC members to help prove that they are ready to move to independent living.*

2.8 Children on Child Protection and Children in Need Plans

2.8.1 A consultation exercise was carried out between July and September 2014 with young people on Child Protection and Child in Need Plans. The aim was to empower young people to discuss their experiences independently and to establish common threads and recommendations for change to improve services for children subject to plans.

2.8.2 Approximately, 30 families were nominated for consultation and 15 young people were successfully contacted and consulted with. The detailed findings and recommendations from the consultation exercise were considered by Central Bedfordshire Safeguarding Children Board (CBSCB) at its meeting in March 2015. CBSCB is committed to hearing children and young people’s voices and this is reflected in their priorities for 2015/16. In addition the structure of CBSCB has recently been reviewed - resulting in the formation of a new ‘Voice of the Child’ sub- group.

2.8.3 The questions asked were concluded with the young people being asked whether they had a message for Children’s Services about the Child Protection, Child in Need process or other needs.

- 2.8.4** The messages from young people were then focused into 3 areas; relationship building, consistency and communication.
- 2.8.5** Collectively there is a clear message from the young people that they feel if they had an established relationship with their social worker it would enable them to express their wishes and feelings, reduce stigmas and empower them to have a voice that is listened to.

Quotes from children on child protection and children in need plans include:

- *'A social worker helps you work through stuff.'*
- *'Make sure social workers explain why they're there. It's not just to take them away.'*
- *'Social workers should get to know us as individuals so everyone in the family is different and feels differently.'*
- *"Be consistent. Don't start a case if you can't follow it through.'*
- *'Stop quitting.'*
- *'Social workers need better training. They (social worker) need to explain to us why they are at their (young person) home, then tell them what they are going to do after the visit and when they will next be round.'*
- *'Don't be in a place you're not happy. Speak to your social worker and if they don't listen talk to someone else who will.'*
- *'Meetings that take place should be child friendly instead of formal, even if it means getting the young person to draw or colour what they feel.'*

2.9 Looked After Children

2.9.1 Children and young people living in residential children's homes (St Christopher's Fellowship) – May 2013 update

- (i) Young people living in St Christopher's homes were given the opportunity to participate in interviews about life in their homes and most did so. 100% felt safe, and the majority said they were happy in their homes. They had good placement stability and felt that they were receiving a good level of support with their education.
- (ii) Most young people were happy with the support they were receiving from care workers, who made them feel cared for. Relationships with staff contributed to young peoples' sense of stability.
- (iii) Issues identified included that some young people felt left out of

opportunities to participate in the life of the home, and few had close friends within it or a sense of optimism about their future (identified as stemming from gaps in transition planning as young people moved towards independence).

- (iv) The findings have contributed to revised performance monitoring of St Christopher's placements which capture young people's journeys and progress in greater detail. This evaluation also informed the retendering of the contract in 2014 and the development of new approaches to independence planning for Central Bedfordshire Looked After Children through the 'Passport to Independence' working group.

2.9.2 Looked After Children in out of area residential placements – December 2013 update

- (i) Looked After Children placed outside Central Bedfordshire were contacted through their registered homes managers and were offered the opportunity to be interviewed about their placement. A small number of children accepted.
- (ii) 100% felt safe and 75% felt happy in their homes. They had high attendance at school, better results and GCSE-level and post-education outcomes than young people placed with the commissioned provider at the time. Whilst their placements were less stable and emotional wellbeing measures poorer, this improved the longer they remained in placement. Like St Christopher's service users, they occasionally felt shut out of care and transition planning, and were unsure of how to have their say through organisations like the National Youth Advocacy Service (NYAS). They had developed good friendship networks within their homes, but felt that family contact could be an issue (especially for those placed some distance away).
- (iii) This evaluation informs a number of work streams e.g. Sufficiency Plan, ongoing monitoring and quality assurance of out of area placements, and the potential development of new residential provision within Central Bedfordshire to meet the needs of vulnerable young people closer to home.

2.9.3 Looked After Children receiving a service from Child and Adolescent Mental Health Services (CAMHS) - April 2014

- (i) Over a 4-month period, Looked After children and young people who were receiving a service from CAMHS were asked to complete an anonymous survey about their experiences. If they wanted to, they could also take part in a follow-up interview to explore their responses in more depth. Parents and carers were also surveyed.
- (ii) 83% of young people found this service helpful, and all had a good relationship with their key professional. For some, this therapeutic alliance was the best thing about CAMHS. Younger children were more likely to be satisfied with the service than (older) young people, and art therapy was service users' preferred delivery model. Greater outreach was needed and very few children, parents or carers were aware of the service prior to

referral by a social worker, so it could be difficult for them to know where to turn for issues around Looked after Children's mental and emotional wellbeing.

- (iii) The contract was retendered in 2014, with young people participating in the evaluation panel to commission a service that better meets their needs.

2.9.4 Children placed with in-house foster carers - January 2015

- (i) Children over the age of 4 placed with in-house foster carers were invited (with their social worker's consent) to give their feedback on being fostered either by attending a half-term activity session, or, with support, filling in a paper or online questionnaire.
- (ii) Initial findings indicate that all children who responded felt safe and happy in their placements. A key impact of this service was placement stability, which carers helped children achieve through good parenting routines and boundaries, broadening horizons and a sense of normal life. The majority were engaging well in education and had improved health and wellbeing. When asked what they would improve, most children responded with bigger, better foster homes, and more technology and takeaways! Some provision gaps were identified around older children's academic attainment (particularly at Key Stage 4) and preparation for independence.
- (iii) Once finalised the recommendations from this evaluation will be used to develop an action plan for ongoing improvement within the Fostering service, particularly around engaging children, young people and under-represented groups of carers in further participation opportunities and embedding their voices in service delivery.

2.9.5 Asylum Seeking Children and Young People

- (i) A group has been developed representing unaccompanied asylum seekers. Details below:

'Reach the Dream'* a group of young people representing unaccompanied asylum seekers

Regular Meetings with Unaccompanied Asylum-Seeking Children – We started meeting in November and now meet every 6 weeks. 10 young people join in with interpreters. The manager and other workers come along as well.

Discussions – we talk about any problems we may have and workers explain how they can help

Consultation – ask about what we need like learning independence skills,

support with education, joining the gym, attending church in London.

Achievements – *we passed cycling proficiency tests and have had football coaching. A Personal Adviser from the Youth Support team talked to us about improving our grades. We go to church regularly. A teacher is now helping new learners with English. Some of us are going to start independence classes. A lady will be coming to talk to us about safe sex. The meetings are helpful.*

*'Reach the Dream' is the name given by young people for the group.

2.10 Children and supervised contact (Action for Children) – November 2013

2.10.1 Supervised Contact is a statutory provision often ordered by the courts against families' wishes. Due to its nature, it proved difficult to engage children and parents directly in an evaluation of this service. An alternative approach was sought where the provider collated data from service user feedback forms.

2.10.2 The evaluation found this service to be highly regarded by children and young people – 93% looked forward to their contact sessions. The majority liked their contact room and key workers, who were kind and helpful and made them feel safe. However, they wanted better venues, more time with parents and more contact with extended family members, as well as better games, more to do in contact centres and more age-appropriate activities.

2.10.3 The results of the evaluation informed the retendering of Supervised Contact provision in 2013, particularly the development of a clear outcomes framework for measuring families' progress. The new provider now delivers the service from two specially-purposed centres that have been refurbished in accordance with children's needs, wishes and feelings. Contact arrangements are also reviewed regularly, and children's wishes and feelings about contact are sought from social workers at these reviews.

2.11 Children who have used a National Youth Advocacy Service (NYAS) advocate or were matched with an Independent Visitor - April 2014

2.11.1 Advocates support young people in getting their views heard. They do not work for the Local Authority. Independent Visitors are volunteers who want to support and help children in care. They are there to listen and encourage young people to succeed in all aspects of their life.

2.11.2 Over a 4-month period, children and young people who had used a NYAS advocate or who were matched with an Independent Visitor were asked to complete an anonymous survey about their experiences. They could also

take part in a follow-up interview to explore their responses in more depth (none opted to take part in a follow-up interview).

2.11.3 Findings included:

- Less than a quarter of young people surveyed knew about NYAS before they were referred – hence none knew that they had a statutory right to this service and could also self-refer.
- All young people said it was easy to get an Independent Visitor once they were referred, but few said the same about advocates.
- That having a professional who would listen to them was the best thing about having an advocate, and that Independent Visitors helped broaden horizons, access the community and have fun. This had in turn improved confidence. Some gaps were identified in the Independent Visitor service – there were some difficulties in maintaining relationships when Looked After Children moved between placements.
- Young people also wanted the service to carry on post-18, and the opportunity to do more expensive activities with their visitors.

2.11.4 This report informed the retendering of the service in 2015 and the implementation of a new outcomes framework to capture children's journeys and the impact of the service in more detail. The new service specification also includes a duty on the provider to make all CBC Looked After Children are aware of their right to access this provision.

2.12 Children at risk of teenage pregnancy/risky sexual behaviours - January / February 2015

2.12.1 Young people (identified through schools) were asked to participate in interviews about using the Brook service. Although none knew about this provision before they were referred by a teacher, all participants had found the service helpful and would recommend it to a friend. The evaluation found that this provision was meeting a crucial need by giving young people someone to talk to about sexual and relationship issues independent of their school/home context. By forming a trusting relationship with a key professional, young people were given space to reflect on their situations and make positive changes, and were empowered to seek information and advice in the future from Brook's universal provision. This will inform the retendering of this contract in 2015/16.

2.13 Health related behaviour and perception survey - Schools Health Education Unit (SHEU) Survey

2.13.1 In Spring 2014 a health related behaviour and perception survey was carried out from a sample of year 6, 8 and 10 children in middle and upper schools.

2.13.2 A total of 3099 pupils took part from a total of 19 middle and upper schools.

2.13.3 The resulting data provided information about young people's lifestyles and health related behaviour and perceptions.

2.13.4 The Central Bedfordshire Children's Trust Board received an update on the survey results in December 2014 where headline results were reported - which showed an increase in low self-esteem amongst young people, but a decrease in smoking prevalence.

2.13.5

Data from 'A summary of a health-related behaviour and perception survey 2014'*

Pupils in Central Bedfordshire were less likely to get high self-esteem scores compared to the wider SHEU sample:

- Year 6: 35% Central Bedfordshire vs. 42% SHEU
- Year 8: 32% Central Bedfordshire vs. 38% SHEU
- Year 10: 28% Central Bedfordshire vs. 40% SHEU

Smoking

- Year 6: 97% of pupils said they have never tried smoking
- Year 8: 93% of pupils said they have never tried smoking
- Year 10: 71% of pupils said they have never tried smoking

* Report summary is available on the Children's Trust website
www.centralbedfordshirechildrenstrust.org.uk



3. Complaints and Compliments

3.1 A small number of complaints were received by Central Bedfordshire Council from Looked After Children. The young people who complained were concerned about their wishes and views being heard, the care and support they received.

3.2 The importance of hearing complaints directly from young people is recognised. Customer Relations and Corporate Parenting Service are working together to review and improve complaints practice including access for young people.

3.3 This work will include:

- raising awareness of the access to/value of complaints from young people
- engagement with young people, foster carers, partners and staff

including meeting with members of the Children in Care Council to review young people's experiences of the complaints procedure and seek views on how to improve.

- 3.4 Information on how to give feedback (compliments and complaints) will be on a new website for children in care.

What it can mean to be involved - feedback from a young care leaver

A young care leaver was recently invited to attend the Looked After Children Health Improvement Group, to give her experiences and views on the range of health services she had encountered. Her feedback, which centred around mental health services was well received by the group and will help to inform future actions. The young care leaver also gave feedback on her experience of attending the group via a Leaving Care Personal Advisor. The young person was extremely positive saying she felt that all of the professionals in the meeting really cared and were passionate about working with young people and developing services to best meet the needs of Looked After Children. She also stated that it made her think about her own experiences and better understand why certain decisions were made on her behalf realising that professionals do in fact care and "it's not just a job to some people".



4. Challenges and key issues identified

- 4.1 Key issues identified include:

- The importance of children on child protection and children in need plans having an established relationship with a social worker to enable them to express their wishes and feelings, reduce stigmas and empower them to have a voice that is listened to.
- The importance of building friendships and opportunities to participate in the life of residential homes.
- Support - transition to independent living.
- Importance of maintaining relationships when Looked After Children change placements, and the important role that placement stability plays in emotional wellbeing.
- Awareness raising of mental and emotional wellbeing services for Looked After Children (and wider universal provision).
- Self esteem issues identified through the SHEU survey.
- Ensuring join up and co-ordination of mental health services across schools.
- Awareness raising of independent visitor and advocates services.
- Raising awareness of the access to the complaints service.
- The importance of providing feedback to those who take the time to provide their views. (The Children in Care Council have on occasions

- not received feedback when completing consultations.)
- Determining how outcomes have been improved through the use of school councils.

4.2 Challenges include:

- Hearing children and young people's voices on sensitive issues such as domestic abuse, sexual abuse and bullying.
- Obtaining feedback from very young children.



5. Conclusion and Next Steps

5.1 Work is currently taking place on the development of an Active Participation Strategy. Active participation refers to children and young people having opportunities to have their voice heard but also opportunities to have real influence in decision-making and being empowered to make decisions for themselves.

5.2 In addition to the Active Participation Strategy, other pieces of work will enable children and young people's voices to be heard include:

- In October 2015, all schools will be invited to take part in a health related behaviour survey for children in years 4, 6, 8, 10 and 12 focusing on their emotional health and wellbeing. Results will be collated into individual schools' reports and an overall Central Bedfordshire report which will help to shape future interventions.
- In October 2016, a general health survey will be made available to all schools with years 6, 8 and 10 which will enable trends to be identified in children and young people's perception of their own health related behaviours.
- The school nursing service will be capturing children and young people's views of their service throughout 2015/16. These views will be collated and used to improve the development of the service to meet pupils' and families' needs.

YOUTH AUDIT ACTION PLAN – REVIEW (April 2015)

INTRODUCTION

While youth involvement and participation have been priorities for young people's services for quite some time, more recently the government's 'Positive for Youth' (2013) policy has established the need for all local authorities to evidence the active involvement of young people in assessing the quality of local provision. As part of this approach, the government expects every local area to have a body of young people that is able to represent the views of local young people and audit the delivery and quality of local services.

The Central Bedfordshire Youth Audit (2013) was the first in the country to examine the commissioned Youth Offer services, which are provided on behalf of and by Central Bedfordshire Council (CBC). In particular, the Youth Audit was asked to assess to what extent the Youth Offer translates from policy into practice. That they are the first to complete such efforts is testament to their abilities, as well as to CBC's commitment to making genuine youth involvement a reality.

In August 2014, the Youth Audit Team reviewed a number of agreed action plans arising from the original audit process. This included work delivered by Central Beds Council but also from externally commissioned providers. The findings and response to this review will be reflected in the updates below. It is anticipated a full audit of youth provision will take place in Summer 2015.

The level of partnership attained is demonstrated by the commitment of the Council to respond to the findings of the Youth Audit in a timely manner, and this action plan is the first step towards not only realising the aspirations of the young people taking part, but also to lay the foundations for future and further participative efforts. The following actions highlight the intentions of CBC to work with its partners in response to the Youth Audit.

RECOMMENDATIONS

Recommendation One: Information, Advice and Guidance (IAG) minimum standards adopted in all middle and upper schools

Issues:

- Current provision appears limited and needs to be more structured, preventative, uniformed and consistent.

- The Council's response to NEETs is good but more work is needed to identify potential NEETs earlier and prevent young people from becoming NEET in the first place;
 - 4YP is commissioned by CBC to deliver to post-16s when young people are already NEET
 - The pre-16 schools based (and schools-commissioned) provision is not universally delivered across all schools
 - The majority of people interviewed felt that IAG needed to be more structured, preventative, uniformed and consistent.

Actions

1. Promote schools responsibility to secure impartial IAG services in all middle and upper schools.
2. Promote the Risk of NEET Indicator (RONI) tool for use in all middle and upper schools
3. Engage all middle and upper schools and all relevant providers in establishing a minimum standard for IAG, based on DfE and Ofsted findings, particularly informed by the Inspiration Vision Statement.
4. Support all middle and upper schools to sign up to this minimum standard.

Recommendation Two: Expand the apprenticeship programme to be available to all young people

Issues:

- The targets that inform the efforts of schools often do not accommodate the efforts of the local authority – in particular, schools-based targets often focus on the attainment of GCSEs, while CBC is tasked with identifying those young people at risk of becoming NEET – which may result in CBC and schools applying their limited resources on different young people, which could work against a coordinated approach to the educational needs of the youth population.
- 60% of young people who are NEET reside in the Houghton Regis, Dunstable and Leighton Buzzard areas (identified as NEET 'hotspots').
- Systems in place to identify and support young people who are NEET are generally effective. However, maintaining current performance criteria when compared to regional, statistic and national performance measures remains challenging

Actions

1. Expand the LAC apprenticeship scheme to be more widely available to 16-24 year olds
2. Develop the RONI tool to identify those pre-16 young people who may be reluctant to participate in academic opportunities post-16, and promote apprenticeships to these young people

Recommendation Three: Positive Sexual and Relationship Education embedded from years 5/6

Issues:

- Facilities to promote Sex and Relationship Education (SRE) provision are becoming limited – particularly the work with young men
- A focus on early provision of emotional wellbeing support will encourage children and young people to increase their aspirations and contribute, and expect more from, their relationships
- Provision of Sex and Relationship Education (SRE) 'needs to be better' including from years 5/6 (Tier 1)
- Central Government have acknowledged the need for SRE provision to be updated and are happy for schools to engage with service providers ('experts') to develop services appropriate to their needs. In particular, the Sex Education Forum, the PSHE Association and Brook (a local provider in Central Bedfordshire) will soon be releasing new guidelines around teaching SRE
- As with many areas of preventative provision, it is difficult to definitively identify those young people at risk of being affected by teenage pregnancy (both as mothers and fathers). However, it is recognised that issues of low aspiration are common amongst those 'at risk'.
- It is felt that services are not delivered in a way that promotes confidentiality and this could increase the risk of teenage pregnancies
- Young people whose parents were themselves teenage parents are more likely to become teenage parents themselves

Actions

1. Review the priorities for SRE provision (YST and the Commissioning Team)
2. YST, the Commissioning Team, Public Health and schools to review current provision (the curriculum) of SRE and consider the forthcoming new recommendations
3. YST and the Commissioning Team to work with Brook and schools to identify ways of promoting confidentiality in the delivery of SRE – this may include online booking systems for young people and improved signage/promotion.

Recommendation Four: Provide a wider variety of personalised and matched volunteering opportunities, including a balance of long term, short term and one day opportunities

Issues:

- The opportunity to volunteer should be better promoted to ensure the maximum number of young people are able to benefit from this positive activity

Actions

1. Gather testimonials of young people who have volunteered with the existing Volunteering providers – CVS in the north and VCA in the south of the Central Bedfordshire area.
2. Include a volunteering target in all new contracts (as applicable) with commissioned providers. For example, this could be a target of 3 young people per year involved in a substantive volunteering opportunity (e.g. V10 or V50); applicable contracts would include – not exclusively - youth work

Recommendation Five: Improved and wider promotion of drug and alcohol services

Issues:

- There is a need to improve the promotion of provision in order to deliver better access to support and advice for those who need it.

Actions

1. Assess the quality and appropriateness of current promotional materials
2. Work with the Commissioned Services team to review current provision

Recommendation Six & Seven: Increase in accessible housing for homeless young people

Issues:

- The availability of appropriate beds for young people at risk of homelessness is extremely limited
- Many young people who experience homelessness also lack the skills to live independently, such as budgeting and cooking
- The recent Homeless Link report – ‘Young and Homeless 2013’ established that:
 - a. The main cause of homelessness (nearly 50%) amongst young people is family breakdown to the point that parents no longer want the child at home
 - b. Around half of homeless young people are NEET
 - c. The needs of young homeless people are becoming increasingly complex – increasing the case for early intervention and prevention of family breakdown and young people becoming NEET – particularly in an environment of increasingly scarce resources

Actions

1. Review Children’s Services (YST/Early Intervention/CSC) & Housing provision for 16 - 19 year olds deemed vulnerable
 - a. Can we define ‘sofa surfers’ as vulnerable?

- b. Understand their education, training and employment needs and identify / define their barriers to participation and feed these into joint plans
- c. Identify and track all homeless young people (including 'sofa surfers') and assess needs through YST – make referrals to commissioned providers / CSC / Troubled Families as appropriate. If developed, make referral through Partnership Triage (above) as a universal referral pathway that eradicates duplication / gaps in provision.

Recommendation Eight: Improved promotion of Youth Work and Positive Activities

Issues:

- The offer is good but poorly promoted
- Provision is focussed on the younger age group (12-14)
- Issues with poor behaviour

Actions

1. Behaviour protocols to be developed and agreed by YST/providers and young people

Recommendation Nine: Youth led young person's website and media strategy

Issues:

- Despite Central Bedfordshire having many opportunities for young people most have a lack of promotion
- Youth Audit Team suggest a stand-alone website from CBC's public website which would have age appropriate language and content
- It was recommended that the commissioned services engage with the internet and social media as a way to promote their services directly to young people

Actions

1. Update and develop the CBC section of website to include more relevant information and opportunities for young people
2. CBC Youth Voice in Youth Support to undertake social media training and identify young people to manage social networks for Youth Voice
3. Commissioned providers to use social media if not already

ACTION PLAN

The plan is monitored on a regular basis by the Youth Support Service and progress reported as requested to the appropriate boards and working groups.

Recommendation 1	IAG minimum standards adopted in all middle and upper schools <i>Youth Offer Theme – Information, Advice and Guidance</i>			
Actions	Lead	Deadline	Progress and Next Steps	RAG Rating
Promote schools responsibility to secure impartial IAG services in all middle and upper schools	James Dove & Rachel Felton	Sept 2014 (Upper schools)	<p>Promotion of the new Statutory Guidance (April 2014) has been delivered through the NEET Strategy Group (May 2014) and will be disseminated to all schools via the minutes. Revised guidance (April 15) will be promoted in due course.</p> <p>A new CEIAG network is being developed with schools and partners in order to develop and share best practice. This will be in place from June 2015 onwards.</p>	Green – Completed
Promote the Risk of NEET Indicator (RONI) tool for use in all middle and upper schools	James Dove & Rachel Felton	June 2014	<p>All Upper schools are aware of the RONI and have received a data set to inform interventions/support. This has been replicated in 2015.</p> <p>The next stage of development will be to expand this to all Middle/Secondary schools & academies to ensure an accurate profile of young people in Years 7/8. This could inform more tailored careers advice to these age groups</p>	Green – Completed
Engage all middle and upper schools and all relevant providers in establishing a minimum standard for IAG, based on DfE and Ofsted findings, particularly informed by the DfE Inspiration Vision Statement	James Dove & Rachel Felton	April 2014	IAG minimum standards have now been finalised and have been circulated to all Secondary/Upper schools. This process was delivered in partnership with school and academies.	Green – Completed

Support all middle and upper schools to actively sign up to this minimum standard.	James Dove & Rachel Felton	Sept 2015 (Revised)	Focus has been on getting Upper / Secondary schools on board and as of Feb 2015 the majority are now on board. Focus groups to take place between May and July 2015 with young people in schools to establish their understanding of minimum standards and measure their satisfaction with IAG	Amber – Ongoing
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Recommendation 2		Expand the apprenticeship programme to be available to all young people <i>Youth Offer Theme – Information, Advice and Guidance</i>		
Actions	Lead	Deadline	Progress and Next Steps	RAG Rating
Expand the LAC apprenticeship scheme to be more widely available to 16-24 year olds	CBC HR & CS/AS Workforce Development	Sept 2014	The CBC Apprenticeship Scheme offers a guaranteed interview for Looked After Children but is widely accessible by all Young People. Our Workforce Development teams continue to promote a range of Apprenticeship and Traineeship opportunities for all Young People around Care professions.	Green – Completed
Develop the RONI tool to identify those pre-16 young people who may be reluctant to participate in academic opportunities post-16, and promote apprenticeships to these young people	Rachel Felton & Robert Higginson	June 2014	As outlined in response to Recommendation 1	Green – Completed

Recommendation 3		Positive Sexual and Relationship Education embedded from years 5/6 <i>Youth Offer Theme – Thematic Youth Support</i>		
Actions	Lead	Deadline	Progress and Next Steps	RAG Rating
Review the priorities for SRE and positive relationship education provision	CBC Public Health, Paula Fleming & Lisa	April 2014	The provision of SRE for years 5 and 6 is not compulsory and so delivery is inconsistent and patchy – with some schools and academies not delivering this at all to this age group.	Green – Completed

	Wright		CBC Public Health continues to facilitate a PSHE Network for all schools and academies in order to develop SRE / PSHE in schools. This includes promotion of national resources from established bodies such as the Sex Education Forum.	
YST, the Commissioning Team, Public Health and schools to review current provision (the curriculum) of SRE and consider the forthcoming new recommendations from The Sex Education Forum, the PSHE Association and Brook – when published	CBC Public Health, Paula Fleming & Lisa Wright	June 2014	Please see above	Green – Completed
YST and the Commissioning Team to work with Brook to identify ways of promoting confidentiality in the delivery of SRE – this may include online booking systems for young people and improved signage/promotion	CBC Public Health, Paula Fleming & Lisa Wright	June 2014	<p>For school based Sex and Relationship provision delivered by Brook, it has not been possible to change the locations/times of clinics due to limits on physical space and timetables delivered across different schools. However, Public Health will now be looking at whether young people have an appropriate level of confidential access to Sexual Health services. This research will be taking place shortly and YSS will request views of the audit team and young people are considered in full.</p> <p>There is also an acknowledgement that services should continue to be delivered in schools as this makes them accessible to some of the most vulnerable young people who could perhaps struggle to access off-site services (perhaps due to transport or other issues). This is also seen as a way of challenging the stigma often associated with SRE services.</p>	Green – Completed

Recommendation 4	Provide a wider variety of personalised and matched volunteering opportunities, including a balance of long term, short term and one day opportunities <i>Youth Offer Theme – Youth Work and Positive Activities</i>			
Actions	Lead	Deadline	Progress to date and next steps	RAG rating
Include a volunteering target in all new contracts (as applicable) with commissioned providers. For example, this could be a target of 3 young people per year involved in a substantive volunteering opportunity (e.g. V10 or V50); applicable contracts would include – not exclusively - youth work	James Dove and CVS	March 2015	The requirement to support volunteers has been included in all new YSS commissioned services. The new volunteering service for Young People also has clearer requirements to generate volunteering opportunities for disengaged young people.	Green – Completed
Gather testimonials of young people who have volunteered with the existing Volunteering providers – CVS in the north and VCA in the south of the Central Bedfordshire area	James Dove and CVS/VCA	Sept 2014	Case studies are already provided as part of the quarterly monitoring process and can be shared on request.	Green – Completed

Recommendation 5	Improved and wider promotion of drug and alcohol services <i>Youth Offer Theme – Thematic Youth Support</i>			
Actions	Lead	Deadline	Progress to Date and Next Steps	RAG Rating
Assess the quality and appropriateness of current promotional materials	CBC Public Health, Paula Fleming, CAN YP and James Dove	Sept 2014	The main drugs and alcohol commission has been awarded to CAN YP with a re-focus on Tier 1 delivery in schools to promote preventative education. This includes a requirement to develop new promotional materials/packs which have been developed.	Green – Completed
Work with Commissioned	CBC Public	Sept 2014	The main drugs and alcohol commission has been awarded	Green – Completed

Services to review current provision	Health, Paula Fleming, CAN YP and James Dove		to CAN YP with a re-focus on Tier 1 delivery in schools to promote preventative education. The existing contract runs till March 2016 and is currently being reviewed.	
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Recommendation 6 & 7		Increase in accessible housing for homeless young people and the Council to recognise sofa surfers as vulnerable young people Youth Offer Theme – Targeted Youth Support		
Actions	Lead	Deadline	Progress and Next Steps	RAG Rating
Review Children’s Services (YST/Early Intervention/CSC) & Housing provision for 16 - 19 year olds deemed vulnerable <ul style="list-style-type: none"> • Can we define ‘sofa surfers’ as vulnerable? • Understand their education, training and employment needs and identify / define their barriers to participation and feed these into joint plans • Identify and track all homeless young people (including ‘sofa surfers’) and assess needs through YSS – make referrals to commissioned providers / CSC / Supported Families as appropriate. If developed, make 	James Dove and Access & Referral Hub Manager	July 2015	Work on housing and homelessness has been slow to develop. However, the following work has taken place; <ul style="list-style-type: none"> • The YSS are working with Signposts in Dunstable to support up to 10 young people who are homeless. This support is focused on enabling young people to take ownership of their lives and access Employment, Education and Training • The Housing and Mediation Service work with young people aged 14 and above who are at risk of becoming or who are homeless. This service works closely with Social Workers to help the most vulnerable young people. They are currently making some changes to what they do and they would welcome a visit as part of the next youth audit 	Red – Ongoing

referrals through Partnership Triage ('The Hub') (above) as a universal referral pathway that eradicates duplication / gaps in provision				
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Recommendation 8				
Improved promotion of Youth Work and Positive Activities				
Youth Offer Theme – Youth Work and Positive Activities				
Actions	Lead	Deadline	Progress to Date and Next Steps	RAG Rating
Behaviour protocols to be developed and agreed by YSS/Providers and young people	James Dove, Lisa Wright and Providers	Sept 2014	Providers have now developed behaviour protocols. The YSS will continue to monitor through the inspection and monitoring systems	Green – Completed

Recommendation 9				
Youth led young person's website and media strategy				
Actions	Lead	Deadline	Progress and Next Steps	RAG Rating
Update and develop the CBC section of website to include more relevant information and opportunities for young people	James Dove	Sept 2014	The CBC website has been updated but is not an appropriate platform to share details of services for Young People. A new communications strategy for the YSS is being developed which will include a web presence and social media platform	Red – Ongoing
CBC Youth Voice in Youth Support to undertake social media training and identify young people to manage social networks for Youth Voice	Lisa Wright	Sept 2014	Staff and young people have undertaken training with CBC Communications, social media platforms active are Twitter, Instagram, Facebook and You Tube, and a WordPress BLOG. In the main posts to these platforms are managed by trained young people but content is overseen and regularly checked by a named member staff.	Green – Completed
Commissioned providers to use social media if not already	Lisa Wright and Providers	Nov 2014	Most providers are actively using Twitter and Facebook and interact with each other to promote and share opportunities and information with young people.	Green – Completed

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Children's Trust Board Summary of CYPP indicators Quarter Four 2014/15

Priority 1: Improved educational attainment											
Ref.	Title	Good is	Outturn			Target 14/15	Q1	Q2	Q3	Q4	RAG rating
			National 13/14	Group 13/14	CB 13/14						
1.	% of children achieving a good level of development at the Early Years Foundation Stage	H	52% 2013 60% 2014	56% 2013 62% 2014	49% 2013 57% 2014	New Target: 64%	2014 (reported Q2) 57%				R
		<p>The percentage of children classed as having a good level of development in Central Bedfordshire (2014 provisional results) is 57%. This is an improvement from 2013 of 8% however this rate of improvement has been matched nationally. Central Bedfordshire ranking has moved from 95 to 107 out of the 152 Local Authorities – keeping Central Bedfordshire in the 3rd Quartile.</p> <p>Our Statistical Neighbour group has changed since 2013. Central Bedfordshire is now ranked 11/11.</p>									
2.	% achieving 5 or more A*-C grades at GCSE or equivalent including English and Maths	H	2013 reported Q3 2014:		38/151	2014 reported Q3 2015				R	
			Central Bedfordshire: 57.7% England Average 59.2% Central Bedfordshire (National ranking position) 114/151			Central Bedfordshire: 57.1% England Average 53.4% Central Bedfordshire (National ranking position) 72/151					
		<p>Final 2014 results show that 57.1% of young people achieved 5 or more A* - C grades at GCSE or equivalent including English and Maths. Whilst this is a decrease of 0.6% compared to last year there has been improvement as Central Bedfordshire has gone up 42 places in the ranking of English local authorities (from 114/151 in 2013 to 72/151 in 2014). The England Average was 53.4%. The highest average within our statistical neighbours group is 61.5% and the lowest is 54.0%. The statistical neighbour average was 58.0%. Within this grouping Central Bedfordshire is ranked 7 out of 11, an improvement of 3 places.</p> <p>Two LA maintained schools received direct support and challenge through the School Intervention Strategy in 2013/14. Student progress data to date in 1 school demonstrated that the actions taken by this school had a positive impact on improved outcomes in 2014. Sandy Upper School was the most improved school in the country 2014 for achievement of 5 or more A* - C grades at GCSE or equivalent including English and Maths.</p> <p>The Secretary of State for Education announced two major reforms that would affect calculations of the 2014 KS4 performance measures data; the introduction of an early entry policy to only count a pupils first attempt at a</p>									

Priority 1: Improved educational attainment

Ref.	Title	Good is	Outturn			Target 14/15	Q1	Q2	Q3	Q4	RAG rating
			National 13/14	Group 13/14	CB 13/14						
			<p>qualification and the implementation of Professor Alison Wolf's Review of Vocational Education recommendations. These should be taken into consideration when looking at the latest results alongside previous years.</p> <p>Future GCSE reforms will include the introduction of new headline performance measures called 'Progress 8' and 'Attainment 8', which will start to come into effect in the 2016 performance tables. However school will be given the opportunity to opt in to the new system one year early in 2015, therefore historical comparisons will not be viable.</p>								
3.	% disadvantaged pupils achieving 5 or more A*-C grades at GCSE or equivalent including English and Maths	H	2013 reported Q3 2014 Central Bedfordshire: 31.1% SN Average: 35.9% England Average: 40.9%			At or Above the national average	2014 reported Q3 2015 Central Bedfordshire: 28.4% SN Average: 32.7% England Average: 36.7%				R
			<ul style="list-style-type: none"> The 2014 percentage point gap between Central Bedfordshire disadvantaged pupils and other Central Bedfordshire pupils achieving 5+ A*-C including English and Maths is 33.6 pts; 2 percentage points wider than last year (31.6 pts). The 2014 percentage point gap between Central Bedfordshire disadvantaged pupils and all other pupils Nationally achieving 5+ A*-C including English and Maths is 35.8 pts; 1.2 percentage points narrower than last year (37.0 pts) <p>The intention is to compare 'pupils eligible for the pupil premium locally' with 'pupils not eligible for the pupil premium nationally' (i.e. the second bullet point above) because that is what we should all be expecting for these pupils in order to demonstrate the impact of this additional resource.</p>								
4.	% of young people who are not in education, employment or training (NEET) Calculated annually using the average value for the months of November, December and January combined.	L	5.3%	5.1%	4.3%	In top 25% of local authorities (i.e. In the top 38 local authorities)	N/A	N/A	N/A	3.7% Annually calculated (Average Nov, Dec Jan 14/15)	A
			Annually calculated NEET measure: The percentage of young people not in education, employment or training (NEET) remains low and Central Bedfordshire continues to perform well at 3.7% - better than the national average								

Priority 1: Improved educational attainment											
Ref.	Title	Good is	Outturn			Target 14/15	Q1	Q2	Q3	Q4	RAG rating
			National 13/14	Group 13/14	CB 13/14						
		4.7% and the regional average 4.5%. An Amber rating has been given as the target of being in the top quartile has been missed by 0.2% (or 17 young people). Central Bedfordshire remains in the 2 nd quartile of all Local Authorities and is currently 42 nd out of 152 Authorities. To be in the top quartile Central Bedfordshire needs to be in the top 38 performing authorities.									
	% of young people who are not in education, employment or training (NEET) Quarterly Measure	L	Q4 14/15 4.8%	Q4 14/15 5.0% (Regional)	N/A	N/A	4.5%	4.2%	3.7%	3.6%	N/A
	Comment	Quarterly NEET Measure: Central Bedfordshire continues to perform well in Quarter 4 (3.6%) and is performing well compared to both regional (5.0%) and national (4.8%) averages.									
5.	% of schools and colleges judged by Ofsted to be Outstanding/Good	H	N/A	N/A	Q4: 83%	Improving trajectory – every school a good school	86%	87%	84%	84%	G
6.	Young Inspector's Survey	(Replaced by 'Children and Young People's Voice' Report)									N/A

Priority 2. Protecting vulnerable children

Ref.	Title		2013/14			Target 14/15	2014/15				RAG rating
			National	Group	CB		Q1	Q2	Q3	Q4	
7.	Average time in days between a child entering care and moving in with its adoptive family, for children who have been adopted	Target (Good is Low)	N/A	N/A	547	487 days	532	517	502	487	R
		Actual	N/A	N/A	542		541	523	512	592	
	Comment	<p>The target continues to reduce reflecting the national aspiration for shorter adoption timescales. Our average time has increased due to adoptions taking place after extended intervals that were very much in the best interests of the child and family. Despite this increase, timeliness of adoption in Central Bedfordshire has remained better than our Statistical Neighbour average. There are a number of adoption order applications in process, and these are expected to lead to adoptions in the near future, which will have a positive impact on this indicator. However, the new Court of Appeal Guidance in Adoption cases has led to birth parents responses being considered in more detail and delays impact on this measure too.</p> <p>Our performance close to the threshold demonstrates that children are placed in their permanent home without undue delay which is particularly important in enabling very young children to form positive emotional attachments.</p> <p>This indicator was introduced by the Department for Education (DfE) based on a rolling 3 year cohort. Targets are set nationally by the DfE. Because this is a rolling 3 year average the figure includes activity from previous years.</p>									
8.	Percentage of children's social care assessments within 45 working days of start (N14 variant) (cumulative).	H	N/A	N/A	Q4 84.4%	90.0%	92.8%	93.6%	94.8%	96.2%	G
9.	% of child protection cases which should have been reviewed during the year that were reviewed.	H	N/A	N/A	100%	100%	100%	100%	100%	100%	G
10.	Percentage of referrals of children leading to the provision of a social care service (cumulative)	H	N/A	N/A	72.5%	75%	81.7%	81.1%	82.6%	84.5%	G

Priority 2. Protecting vulnerable children

Ref.	Title		2013/14			Target 14/15	2014/15				RAG rating
			National	Group	CB		Q1	Q2	Q3	Q4	
11.	% of cases where children became subject to a child protection plan for a second or subsequent time where domestic violence was a factor	L	N/A	N/A	Q4: 62%	Year on year reduction from 64%	84% 11/13	0% 0/4	55% 5/9	83% 10/12	R
	Comment	<p>Data relates to the incidence of domestic abuse (either currently or historically within the family context) included by the Conference Chair in their summary of concerns. As such domestic abuse is not the only, nor necessarily the precipitating factor leading to the child becoming subject to a child protection plan on a second or subsequent occasion. Therefore the data needs to be treated with caution in respect of demonstrating performance in relation to the success of interventions.</p> <p>This quarter's incidence is high and off target, but it should be noted that low numbers do lead to greater fluctuation in percentages.</p> <p>The annual figure is 68% - just missing the 14/15 target . This is an increase of 2% from last year.</p> <p>All children made subject to repeat plans are audited by team manager and chair.</p> <p>The Council is currently developing a Strategy for domestic abuse that will help to further improve its response to domestic abuse issues faced by children and adults alike. SafeLives, previously CAADA, is supporting the Council with this work. The initial stage will involve a cross directorate workshop within the Council to develop its strategic objectives, and following this, a partnership workshop is planned to discuss and test the new strategic objectives agreed by the Council with key local partner organisations.</p>									
12.	Reduction in the number of first time entrants to the youth justice system aged 10-17	H	TBC	TBC		-5%	25% reduction	12.5% increase	46.2% decrease	13.3% decrease	G
	Comment	Young people becoming first time entrants to the criminal justice system has continued to reduce, resulting in a figure of 13.3% (13 FTEs Q4 14/15 compared to 15 FTEs Q4 13/14).									
13.	% of young people receiving a conviction in court who are sentenced to custody	L	TBC	TBC		5%	3.13%	5.26%	6.67%	0%	G
	Comment	32 Sentencing episodes (CBC 10 – 17 yr old population 24,800) in Q4 with no custodial sentences or remand episodes.									
14.	Reoffending rates amongst young					TBC			Update		

Priority 2. Protecting vulnerable children

Ref.	Title		2013/14			Target 14/15	2014/15				RAG rating			
			National	Group	CB		Q1	Q2	Q3	Q4				
	people								below					
		<p>Re-offending data reporting period Jan 2012 – Dec 2012 YJB Data Overall Binary figure for this reporting period for Central Bedfordshire – 31.5% compared to 31.6% in 2010 The overall cohort for 2012 is 143 with 45 young people reoffending compared to the cohort in 2010 of 285 with 90 reoffending Proven re-offending cohorts must allow for a 12 mth follow-up period and then a further 6 mth waiting period.</p> <p>Awaiting update via YJB PNC data</p>												
15.	% of young offenders in employment, education or training (ETE)	H	N/A	N/A	N/A	80%	86.67%	54.55%	64.71%	50%	R			
		<p>Performance data for quarter 4 has reduced in comparison to quarter 3 in relation to Central Bedfordshire</p> <table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td>Central beds data</td> </tr> <tr> <td>50%</td> </tr> <tr> <td>9/18 = NEET</td> </tr> </table> <p>The BYOS ETE Performance data context has been analysed giving a greater understanding to the figures and a narrative of the data presented in this quarter KPI's. This is broken down below.</p> <p>Overriding trends for CBC include:</p> <ul style="list-style-type: none"> • Reduced/adapted timetables for young people with behavioural issues or additional needs (3/18) • Young people absconding with warrants • Young people wanting to find employment rejecting training options • Mental health issues • Drug use concerns obstructing any interventions • Young people engaged within ETE therefore they do not register as 0 hours but fall below 16 hours • One training provider started the course later than expected causing one young person to record as 0 hours whilst they are waiting for the start date. • Young person leaving CBC before Order ended, therefore transferred to another YOS. <p>Of these 18 young people, 6 have been identified as being NEET.</p> <p>Post Order end, 1 of the 6 has since found paid employment and a further 1 young person, has accessed a full time training course with YOS support. A more in-depth report will be provided at the next YOS Management Board. 29.06.15</p>										Central beds data	50%	9/18 = NEET
Central beds data														
50%														
9/18 = NEET														
16.	Difference in the rate (per 10,000 population) of emergency hospital	Low	N/A	N/A	20.32 (2011/12)	Year on year					N/A			

Priority 2. Protecting vulnerable children

Ref.	Title	2013/14			Target 14/15	2014/15				RAG rating
		National	Group	CB		Q1	Q2	Q3	Q4	
	admissions caused by injuries in children from the 20% most deprived and the 80% least deprived areas			4.78 (2012/13) 20.0 (2013/14)	reduction from baseline of 28 in 2010/11	8	N/A	N/A	See Commentary	
	Comment	Due to national governance arrangements, the LSOA (Lower Super Output Area) and MSOA (Middle Layer Super Output Area) codes have been removed from hospital data with effect from August 2014. This has restricted how data can be broken down re: hospital admissions caused by injuries in children from the 20% most deprived and the 80% least deprived areas. The latest available data is for Q1 until an agreement has been reached nationally. Latest hospital admissions data for local authorities is to be published by Public Health England in June 2015.								
17.	Children's and families views about the difference that key professionals have made, how well they have been treated and how this has fed into the development of the service	N/A	N/A	N/A	N/A	N/A	See Children and Young People's Voice Report			N/A

Priority 3: Early help and improving life chances

Ref.	Title	Good is	Outturn			Target 14/15	2014/15				RAG rating
			National 13/14	Group 13/14	CB 13/14		Q1	Q2	Q3	Q4	
18.	The number of disadvantaged 2 year olds placed in early education/childcare	H	N/A	N/A	N/A	Revised target 913 by July 2015	481	N/A	647	657	A
	Comment	<p>Data available termly.</p> <p>Figure reported in Q1: 481 relates to the period 1 April 13 – 31 July 14 Figure reported in Q3: 647 relates to period 1 April 13 – 30 November 14 Figure reported in Q4: 657 relates to period 1 April 13 – 31 March 14</p> <p>Changes to information sharing arrangements (from the DWP) have improved the way in which contact can be made with families through Children's Centres. This enables a higher number of parents to be reached. The initial impact of this change was seen in Quarter 3 – with performance levelling off in Quarter 4.</p> <p>It should be noted that take up is still improving with performance better than Statistical Neighbours.</p> <p>This work has also resulted in improved transition (take up) for 3 year olds.</p>									
19.	% of identified young carers supported	H	N/A	N/A	Q4: 96%	New Measure	96%	97%	N/A	N/A	N/A
		<p>This measure is currently under review and due to the change we are unable to report in q4. We have identified 24 young carers this quarter and we have a total of 636 young carers registered with Carers In Bedfordshire.</p>									
20.	% of children with identified disabilities supported	H	N/A	N/A	N/A	New measure	N/A	N/A	N/A	N/A	N/A
		<p>Data for SEND is now being addressed through the Support and Aspiration Board with the outcome of meeting the required data set to evidence the new planning processes. It should be noted that children are being supported by a number of services across the Council.</p>									

Priority 3: Early help and improving life chances

Ref.	Title	Good is	Outturn			Target 14/15	2014/15				RAG rating
			National 13/14	Group 13/14	CB 13/14		Q1	Q2	Q3	Q4	
21.	Proportion of children who live in relative low income	L	As at 31 Aug 2011 % of children in low income families 12.6%			10% by 2020	As at 31 August 2012 % of children in low income families 12.4%				A
		31 August 2012 data published December 2014. CBC figures have come down in line with the national measure. Note the 2 year+ delay in the publication of the data trend.									
22.	The number of people in employment (aged 16-64)	H	71.4%		Sept 13: 125,200 (76.1%) 4.7% Above National Employment Rate (71.4%)	5% above national average	March 14: 128,300 (77.4%) 5.5% Above National Employment Rate (71.9%)	June 2014 131,300 (78.9%) 6.7% Above National Employment Rate (72.2%)	Sept 14 133,900 (80.4%) 7.9% Above National Employment Rate (72.5%)	Dec 14 137,300 (81.6%) 9.1% Above National Employment rate (72.5%)	G
23.	% of under 5 year olds from most deprived areas registered with Children's Centres	H	N/A	N/A	Q4: 74%	65%	81%	90%	81.12%	84%	G
24.	Troubled families programme is achieving annual payment by results	H	N/A	N/A	N/A	To achieve 100% PBR	49/305 families	54/305 families	245/305 Families	305/305 families	G

Priority 3: Early help and improving life chances

Ref.	Title	Good is	Outturn			Target 14/15	2014/15				RAG rating
			National 13/14	Group 13/14	CB 13/14		Q1	Q2	Q3	Q4	
	(PBR) targets					for 305 families worked with by April 2015	16%	18%	80%	100%	
	Comment	<p>Supporting Families has met the target set by the Department for Communities and Local Government (DCLG) for identifying and <i>turning around</i> 305 families during Phase 1 of the programme. Payment By Results (PBR) claims were subject to an annual external audit, the outcome of which was very positive. Due to a very strong return, no further action was required.</p> <p>The second (Expanded) phase of the programme started in April 2015. Central Bedfordshire Council has been set a target of identifying and turning around 1090 families over the next five years. CBC has signed up to make <i>significant and sustained progress</i> with 150 families in the first year (2015/16). The first PBR claims are likely to be in January 2016 (due to evidencing intervals relating to sustained progress). The claim windows have reduced to two per annum.</p> <p>A team of nine Family Partners has been recruited and HR are working through the reference / DBS processes. An Employment Advisor is on an initial 12 month secondment from the Department for Work and Pensions (DWP) to work alongside the Supporting Families team in identifying barriers to work and to support claimants to make progress towards continuous employment.</p>									
25.	% of early years and childcare settings judged by Ofsted to be Outstanding/Good	H	N/A	N/A	90%	Improving trajectory – every setting a good setting	Non domestic childcare				G
					90%		90%	93%	94%		
			N/A	N/A	85%		Childminders				
						87%	88%	88%	89%		
		<p>Inspections as at 23/03/2015. Ofsted publish a similar measure – latest comparative data below:</p> <p>Ofsted Data View figures (as at 31/12/2014): Non domestic childcare: LA:94% SN Group:87 % Nat:86%</p> <p>Childminders: LA:88%</p>									

Priority 3: Early help and improving life chances

Ref.	Title	Good is	Outturn			Target 14/15	2014/15				RAG rating
			National 13/14	Group 13/14	CB 13/14		Q1	Q2	Q3	Q4	
		<p>SN Group:84% Nat:81%</p> <p>DfE have updated the Children Service's Statistical Neighbours benchmarking tool using more recent information from the 2011 Census. For Central Bedfordshire LA, this has resulted in Hertfordshire and Solihull being replaced with West Sussex and Worcestershire.</p>									
26.	% of participants reporting improved aspirations and self esteem		N/A	N/A	Q4: 85%	New measure	N/A	100%	N/A	N/A	N/A
27.	% of parents reporting improved parenting skills		N/A	N/A	Q2: 92%	New Measure	N/A	N/A	N/A	N/A	N/A
		We are unable to report on this measure this quarter. We are currently reviewing our evaluation processes across the Parenting Team and the new processes will be established for the next year.									
28.	Young carers feel supported	H	N/A	N/A	N/A	New measure	N/A	N/A	N/A	100%	N/A
		This measure refers to the one to one element of support offered to young carers. The figure relates to a small number of cases that have been closed in this quarter.									
29.	Children with disabilities views about the support they have received		N/A	N/A	N/A	New Measure		See commentary:			N/A
		<p>Workstream 2 of the Support and Aspiration Project Plan continues to provide the framework for the engagement and involvement of child and young people with Special Educational Needs and Disabilities (SEND).</p> <p>The project in workstream 2 had four key stages: Project Management; Research Phase; Development Phase; Validation Phase:</p> <p>Over 180 children and young people with SEND have either completed an on-line survey themselves or with varying degrees of support depending on the needs of the child/young person. Both qualitative and quantitative data will be reported back from this work in the final project report.</p> <p>The first steering group meeting took place on the 28th October 2014. This was supported by a specialist organisation with additional input from a young people's advocacy group from another authority. The work stream</p>									

Priority 3: Early help and improving life chances

Ref.	Title	Good is	Outturn			Target 14/15	2014/15				RAG rating
			National 13/14	Group 13/14	CB 13/14		Q1	Q2	Q3	Q4	
		<p>leads for Support and Aspiration attended some of the day to participate in activities and to hear feedback from children and young people about how they wanted to be involved in shaping the services they use.</p> <p>There are a number of documents available which set out the work to date:</p> <p>SEND Project Plan SEND Participation Strategy SEND Implementation Plan</p> <p>These will be available from June 2015 on the Central Bedfordshire Local Offer Website.</p> <p>Further detail of the participation is also featured in the Central Bedfordshire Children's Trust Children and Young People's Voice report.</p> <p>Further work will take place over the coming months to coproduce a children and young person's version of the Local Offer.</p> <p>For further information on the project contact ken.harvey@centralbedfordshire.gov.uk</p>									

Priority 4: Being healthy and positive

Ref.	Title	Good is	Outturn			Target 14/15	2014/15				RAG rating
			National 13/14	Group 13/14	CB 13/14		Q1	Q2	Q3	Q4	
30.	% of mothers smoking at time of delivery	L	11.5%	11.3% East of England	12.6% (BCCG) BHT: 12% L&D: 19.4% Other: 6.9%	13% BCCG	12.1% BCCG BHT: 9.1% L&D: 23% Other: 10%	10.5% BCCG Q2 Hospital data not yet published	11.2% BCCG Q3 hospital data not yet published	N/A	G
	Comment	<p>Data for this indicator is reported nationally at CCG level so locally, data for Central Bedfordshire resident deliveries at individual hospital trusts is monitored and reported, with a particular focus on reducing the rates of smoking at the time of delivery at the L&D – where rates are significantly higher for Central Bedfordshire mothers. Data broken down by Acute Hospital Trust has not yet been published for Q2 or Q3, but local intelligence suggests that rates are levelling at 17% for both of those quarters.</p> <p>A new targeted intervention has been set up in Houghton Regis to run alongside a maternity clinic, where every woman who smokes will attend a focus group session with the CBC SIP Advisor to gain insight into why women continue to smoke and how the service can be re-designed to support their needs. This includes screening for carbon monoxide and providing positive health messages and information.</p> <p>The referral route for teenage pregnancies (up to under 20s) has been strengthened to ensure those who smoke will now be referred, contacted and supported within the Smokefree Baby and Me Programme. Referrals from this age group have previously been limited and this should increase numbers to the service. Evidence shows that this age group is 6 times more likely to smoke than older mums-to-be. This pathway will be strengthened further through The Family Nurse Partnership which was launched in Central Bedfordshire in March.</p> <p>In 2014/15 (Q1 & Q2) The 'Smokefree Baby and Me' programme achieved a conversion rate of 54.3% - from attending the first appointment to quitting. (Previous conversion rate - prior to the programme - was 32%). In Q1 & Q2 there were a total of 31 referrals, with 16 quits. Of those that set a quit date, 80% (13) were validated quitters.</p>									

Priority 4: Being healthy and positive

Ref.	Title	Good is	Outturn			Target 14/15	2014/15				RAG rating
			National 13/14	Group 13/14	CB 13/14		Q1	Q2	Q3	Q4	
31.	% of mothers initiating breastfeeding	H	73.9% 2012/13*	74% NHS England Area Team 2013/14	77.5% (LA) BHT: 79.2% L&D 75.3% Other: 78.4%	80%	BHT: 80.2% L&D: 77.1% Other: 79.0% (LA data only published annually)	BHT:80.9% L&D: 75.5% Other excluding MK: 81%	BHT:77.1% % L&D: 73.0% Other: N/A	N/A	A
	Comment	<p>2013/14 data shows that breastfeeding initiation in Central Bedfordshire is better than both the national average (*latest national published data is for 2012/13, due to low data coverage in 2013/14) and the Area Team average, although there has been a slight decrease in Q3 in both hospitals. Work needs to continue on the progression to full Baby Friendly Initiative Accreditation in both Bedford Hospital and Luton and Dunstable Hospital to ensure the skills are in place and support is delivered consistently.</p> <p>Scoping of further integrated working between hospitals, community midwives and Children's Centres is taking place to ensure an early introduction to Children's Centres as a place for support and to ensure effective use of the breastfeeding skills that Children's Centre staff have acquired through training. The provider service (SEPT) lead on ensuring that information is shared and consistent messages are delivered.</p>									
32.	% of mothers still breastfeeding at 6-8 weeks	H	47.2% (2012/13)*	46.6% East of England (2012/13)*	44.6% (LA) (2013/14)	50% (NHS England Area Team)	48.8% (LA)	46.9% (LA)	45.6% (LA)	N/A	A
		<p>* The national and regional breastfeeding prevalence rates @ 6-8 weeks have not been published for 2013/14 due to the number of children with no recorded breastfeeding status @ 6-8 weeks being greater than 5% of all children. Q1, Q2 and Q3 rates in CBC for 2014/15 show an improvement on 2013/14. The proportion of mothers continuing to breast feed at 6-8 weeks has dropped slightly in Q3, as has the proportion of mothers who initiate breastfeeding. This requires effective and strengthening support for mothers from Midwifery Services, Health Visitors and Children's Centres across the antenatal and postnatal pathway. As part of the new Maternity Services Contract for 2015/16, both hospital trusts now have an additional target for breastfeeding rates of 75% @ 5 days. The Health Visiting Service, which now includes 50 wte (whole time equivalent) Health Visitors is now contacting mothers 6 days after delivery (in addition to the 10 days New Birth visit) to offer additional breastfeeding support at an earlier point.</p>									

Priority 4: Being healthy and positive

Ref.	Title	Good is	Outturn			Target 14/15	2014/15				RAG rating
			National 13/14	Group 13/14	CB 13/14		Q1	Q2	Q3	Q4	
33.	Year R (ages 4-5) to achieve a 0.1% year-on-year reduction in the prevalence of children who are very overweight (obese) from the 2011/12 baseline of 7.4% (derived from child postcode)	L	9.5% Acad Year 13/14	8.5% Acad Year 13/14 East of England	8.2% Acad Year 13/14	7.2% Acad Year 13/14 7.1% Acad Year 14/15	N/A	N/A	8.2% Acad Year 13/14	N/A	R
	Year R (ages 4-5) to achieve a 0.2% year-on-year reduction in prevalence of children who are overweight from the 2012/13 baseline of 13.1% (derived from child postcode)	L	13.1% Acad Year 13/14	13.0% Acad Year 13/14 East of England	11.9% Acad Year 13/14	12.9% Acad Year 13/14 12.7%* 14/15	N/A	N/A	11.9% Acad Year 13/14	N/A	G
	Year R (ages 4-5) to achieve a 0.3% year-on-year reduction in the prevalence of excess weight from the 2012/13 baseline of 19.7% (derived from child postcode)	L	22.5% Acad Year 13/14	21.5% Acad Year 13/14 East of England	20.0% Acad Year 13/14	19.4% Acad Year 13/14 19.1% Acad Year 14/15	N/A	N/A	20.0% Acad Year 13/14	N/A	A
		<p>Data on the National Child Measurement Programme (NCMP) for Year R and Year 6 are published annually in December (Q3). Very Overweight (Obese) Although the target for 2013/14 has not been achieved, this target was set low due to an extremely low prevalence recorded in 2011/12. This was a very ambitious target and did not account for the year-on-year variance on statistical significance. However, the 2013/14 prevalence is significantly lower than the England average.</p> <p>Overweight</p>									

Priority 4: Being healthy and positive

Ref.	Title	Good is	Outturn			Target 14/15	2014/15				RAG rating
			National 13/14	Group 13/14	CB 13/14		Q1	Q2	Q3	Q4	
		<p>The target for 2013/14 has been achieved.</p> <p>There is a downward trend over a 6-year period from 2008 for both 'overweight' and 'very overweight' rates, indicating that progress is moving in the right direction.</p> <p>Excess weight (Overweight and Very Overweight combined) The target for 2013/14 has not quite been met; however, the target was set low due to an extremely low prevalence of 'very overweight' ('obese') children recorded in 2012/13 which appears to have been a 'blip' in the data. Prevalence is significantly lower than the England average.</p> <p>This is the first year that targets have been set specifically in relation to 'overweight' and 'excess weight' and, as such, commissioned interventions were expanded to include overweight towards the end of 2012 to support this new target. The impact of this may not have been fully realised to date.</p>									
34.	Year 6 (ages 10-11) to achieve a 0.1 % year-on-year reduction in the prevalence of children who are very overweight (obese) from the 2011/12 baseline of 15.8% (derived from child postcode)	L	19.1% Acad Year 13/14	17.2% Acad Year 13/14 East of England	16.2% Acad Year 13/14	15.5% (Acad Year 13/14) 15.4% Acad Year 14/15	N/A	N/A	16.2% Acad Year 13/14	N/A	A
	Year 6 (ages 10-11) to achieve a 0.2% year-on-year reduction in the prevalence of children who are overweight from the 2012/13 baseline of 13.6% (derived from child postcode)	L	14.4% Acad Year 13/14	13.9% Acad Year 13/14 East of England	13.6% Acad Year 13/14	13.4% Acad Year 13/14 13.2% Acad Year 14/15	N/A	N/A	13.6% Acad Year 13/14	N/A	A
	Year 6 (ages 10-11) to achieve a 0.3 % year-on-year reduction in the prevalence of excess weight from the 2012/13 baseline of 28.2% (derived	L	33.5% Acad Year	31.1% Acad Year	29.8% Acad Year 13/14	27.9% Acad Year 13/14	N/A	N/A	29.8% Acad Year 13/14	N/A	A

Priority 4: Being healthy and positive											
Ref.	Title	Good is	Outturn			Target 14/15	2014/15				RAG rating
			National 13/14	Group 13/14	CB 13/14		Q1	Q2	Q3	Q4	
	from child postcode)		13/14	13/14 East of England		27.6% Acad Year 14/15					
	Comment	<p>Very Overweight (Obese) Prevalence in Central Bedfordshire is significantly lower than the England average.</p> <p>Overweight There has been a downward trend across a 6-year period from 2008 indicating progress in the right direction.</p> <p>Excess weight (Overweight and Very Overweight combined) Prevalence in Central Bedfordshire is significantly lower than the England average.</p> <p>Rates achieved in all 3 indicators for Year 6 are all within 10% of meeting the targets.</p> <p>This is the first year that targets have been set specifically in relation to 'overweight' and 'excess weight' and, as such, commissioned interventions were expanded to include overweight towards the end of 2012 to support this new target. The impact of this may not have been fully realised to date.</p>									
	<p>Developing/Planned Actions (Year R and Year 6):</p> <ul style="list-style-type: none"> Re-procurement of lifestyle weight management services for children, young people and families – Tier 1 & Tier 2 Services – from September 2015. Increased capacity in the Health Visiting Service (full staffing establishment by 31.03.15) will enable increased early identification and intervention re: healthy weight, healthy nutrition and physical activity, at each of the 7 key touch points from conception to Reception: 1) Antenatal (28-32 wks.); 2) New Baby Review (by 14 days); 3) 6-8 Weeks Assessment; 4) 3-4 Months Assessment; 5) 9-12 Months Assessment; 6.) 2/2½ Year Integrated Review; 7) handover to School Nursing Service and schools by 4½ years. School Nurses will now have a more proactive role in the National Child Measurement Programme (NCMP) – contacting the parents/carers directly of children who are identified as overweight or very overweight in YrR & Yr6, to offer support, advice and referral to commissioned services. Targeted support for school communities (Public Health and School Nursing Service) in preventing, and tackling excess weight issues through a whole-school approach. Public Health will fund a 'Bike It' officer and administrator from September 2015, to continue the promotion of biking and scooting to school and outside school. (Currently running through the Travel Hub). A successful pilot programme of Change 4Life clubs for Yr6 pupils has been running in a targeted area identified from data from NCMP. Schools will now be using some of their Physical Activity (PA) funding to run 6 week courses of PA for pupils whose parents/carers receive a letter advising that the child is overweight or very overweight. 										

Priority 4: Being healthy and positive

Ref.	Title	Good is	Outturn			Target 14/15	2014/15				RAG rating
			National 13/14	Group 13/14	CB 13/14		Q1	Q2	Q3	Q4	
35.	Reduction in the number of conceptions per 1,000 teenage girls (aged 15-17).	Low	24.5 2013 (ONS)	21.0 2013 East of England (ONS)	19.9 2013 (ONS)	<23.2 2013	N/A	N/A	19.9 (2013 ONS)	N/A	G
		The latest, national under-18 conception rate (ONS 2013) is the lowest since 1969 and the under-18 conception rate in CBC is below both the England and East of England rate, and similar to statistical neighbours. The under-18 conception rate per 1000 in CBC fell from 26.7 in 2012 to 19.9 in 2013, with 33 fewer actual conceptions, resulting in a 25.5% reduction. Within the 5 TP 'hotspot' wards in CBC, rates have stabilised or fallen in 4 out of 5 wards, but there has been an increase in rates in Manshead ward (based on latest ONS ward level data for 2010-12). Public Health has now established a Multi-Agency Group to implement an Action Plan to drive further progress in the Manshead Ward.									
36.	% of children and young people reporting a reduction in alcohol and drugs usage 3 months following the end of an intervention	H	N/A	N/A	N/A	Baseline to be set in 2014/15	80%	75%	60%	50%	N/A
	Comment	<p>Over 2014-15 referrals from schools and target groups (LAC, YOT) to the CAN YP (Children and Young People's Drug and Alcohol Services Provider) Service have increased as CAN YP have been delivering new prevention/ Tier 1 work and training. This has led to an increase in Tier 2 interventions and a decrease in the more intensive Tier 3 treatment services – the outcomes of which are currently measured and reported here. Figures reported relate to increasingly low numbers which leads to greater fluctuation in percentages.</p> <p>In Quarter 4 there were 23 young people referred to CAN YP (Tier 2 service) from Central Bedfordshire. 20 of these commenced work with the service. 100% of young people discharged from Tier 2 interventions reported a reduction in Q4, in drug and or alcohol usage 3 months post discharge.</p> <p>In Quarter 4 a total of 1,825 young people in Central Bedfordshire received information, advice and guidance from CAN YP – Tier 1.</p>									
37.	Improved mental health early intervention services measures by the Strengths and Difficulties (SDQ) scores for children and young people receiving	H	N/A	N/A	Q4:79%	75%	N/A	76.9%	N/A	74%	A

Priority 4: Being healthy and positive											
Ref.	Title	Good is	Outturn			Target 14/15	2014/15				RAG rating
			National 13/14	Group 13/14	CB 13/14		Q1	Q2	Q3	Q4	
	a direct intervention by the CHUMs service										
38.	% LAC who have had their annual health assessment (rolling year)	H			94.7%	100%	97.3%	94.8%	97.8%	97.8%	G
		This performance remains good and is above national and SN average. Partnership with the LAC Health Team is strong and the current performance is expected to improve.									
39.	% Looked After Children up to date on immunisations / vaccinations	High	83.2% 12/13	88.4% 12/13	90.2% 12/13	100%	2013/14 Outturn (Reported Q1 14/15) 87.6%				R
		We are tracking all annual health assessments that are completed on a monthly basis. All immunisations are recorded on Frameworki. Any medicals undertaken with this information absent are discussed at the Lac Health monthly meeting to ensure that we improve on completion for this area of health.									
40.	Improved mental health for LAC as measured by SDQ score (average SDQ score)	L			14.2 13/14	13	15.8	15.5	14.6	14.3	R
	Comment	<p>It was confirmed that SDQ completion rate was 100.0% by the end of March 2015.</p> <p>There was a slight decrease in SDQ score in March 2015. This remains a very complex area with multi-systemic issues. We continue to work very closely with CAMHS, the Virtual School and Fostering Teams, Independent Fostering Agencies and Residential Placement Providers to reduce the score, these multi-agency inputs are key. The clinical psychologist is now in post and this will provide the expertise support needed to try to reduce the score.</p>									
41.	Looked After Children say that health services are meeting their needs	H	N/A	N/A	N/A	New measure	See Children and Young People's Voice report				N/A
42.	Health and wellbeing of children and young people as measured through the Schools & Students Health Education Unit (SHEU) Health Related Behaviour & Perceptions Survey (Balding Survey) -2014 (Biennial Survey)		N/A	N/A	N/A	New measure	N/A	Reported as detailed below Q2	N/A	N/A	G

Priority 4: Being healthy and positive

Ref.	Title	Good is	Outturn			Target 14/15	2014/15				RAG rating
			National 13/14	Group 13/14	CB 13/14		Q1	Q2	Q3	Q4	

The report on the results of the 2014 Central Bedfordshire Health Related Behaviour and Perceptions Survey has been shared with all schools and key partners. The survey was completed by 3,099 children in years 6, 8 and 10 within 19 schools across Central Bedfordshire. Headline results show an increase in low self-esteem amongst young people, but a decrease in smoking prevalence. Schools participating:

Special Schools (Years 6, 8 & 10):
Ivel Valley; Oak Bank School; The Chiltern School; Weatherfield Academy.

Middle Schools (Years 6 & 8):
Alameda Middle School; Gilbert Inglefield Academy; Henlow CofE Academy; Biggleswade Academy; Parkfields Middle School; Robert Bloomfield Academy; Sandye Place Academy; Streetfield Middle School; Woodland Middle School Academy.

Upper Schools (Year 10):
Cedars Upper School; Queensbury; Redborne Upper School & Community College; Sandy Upper School; Stratton Upper School; Vandyke Upper School.

Following the survey, CBC Public Health has set up an inclusive PSHE Partner Network available to all schools to provide up-to-date reliable information, guidance and support for schools on all health and wellbeing aspects of PSHE.

The Survey will be repeated in Central Bedfordshire in 2016.



Children and Young People's Plan

March 2015 - March 2017

**Central Bedfordshire
Children's Trust**



Welcome to the Children and Young People's Plan for Central Bedfordshire

(March 2015 – March 2017)

Our vision for children and young people growing up in Central Bedfordshire is:

We want every child in Central Bedfordshire to enjoy their childhood and have the best possible start in life. We want every child to do well in education, make friends and build strong relationships with their family. As young adults, we want every young person to have the knowledge, skills and qualifications that will give them the best chance of success, so that they are prepared to take their full place in society as a healthy, happy, contributing and confident citizen.

This plan sets out our shared vision for children, young people and their families and shows how we plan to achieve it. We know that most children and young people in Central Bedfordshire enjoy their childhood and go on to be confident and successful young adults – we want to make sure that we maintain this and improve the outcomes for those vulnerable children and young people who are not doing as well.

This Plan sets out those issues we want to work on together with our partners and which we think are critical to achieving our vision. There are more detailed strategies and plans which support the priorities in this plan. There is further information available at www.centralbedfordshirechildrenstrust.org.uk

Our thanks to all those that have helped in the development of the plan. In particular the young people who told us what they think is important. Their ideas and priorities have helped to shape this plan. We look forward to working with children, young people and their families.

Cllr Mark Versallion
Chairman - Central Bedfordshire Children and Young People's Trust

*Bedfordshire Clinical Commissioning Group
Bedfordshire Fire and Rescue
Bedfordshire Police
Bedfordshire Probation
Bedfordshire Youth Offending Service
Catholic Diocese of Northampton
Central Bedfordshire College
Central Bedfordshire Council
Central Bedfordshire Local Safeguarding Board
Diocese of St Albans
Lower, middle, upper and special schools
Voluntary Organisations for children, young people and families (VOCyfp)
Youth Parliament*

Improved educational attainment and progress

Outcomes

Improved achievement and progress

The right skills to be work ready

Excellent behaviour

Well led and managed schools

Outstanding teaching and learning

Cross Cutting: Early help for all who need it
Put children and young people at the centre of everything we do
Multi-agency learning and shadowing opportunities to promote shared understanding of work
Children and young people with special educational needs and disabilities fulfil their aspirations and potential

The way we will do this

Partners will work together to:

- develop and deliver the school readiness partnership plan and give every child a good start in communication, language and literacy skills
- actively promote health and wellbeing through a whole school approach
- narrow the gap and improve the achievement of vulnerable and disadvantaged children and young people – especially those receiving Free School Meals and those who are looked after
- achieve top results in key stage tests, including GCSE (or equivalent) results including English and Maths
- ensure assessment without levels and new datasets are understood by schools and inform practice
- provide early high quality independent career advice and work experience opportunities so that young people understand what their career options and choices are
- give young people the right opportunities to continue in education or training until they are 18, including apprenticeships and traineeships, so that employers feel young people have the skills they need for work
- help those aged 13-16 at risk of becoming NEET and those aged 16-19 who have become NEET to get the education, training and employment they need
- actively promote the participation of all young people in the development, delivery and evaluation of services – including targeted youth work, volunteering opportunities and careers information, advice and guidance
- commission school to school improvement to raise standards, build capacity and develop world class governance
- spend £103m building new schools with inspirational learning environments and spaces for community use
- make sure the education workforce is robust in identifying and responding to safeguarding issues and that successful leadership development and support is provided where it is needed

Measuring our success	Targets
• Percentage of children achieving a good level of development at the Early Years Foundation Stage	64%
• Attainment of underachieving groups, and narrowing the gap for disadvantaged pupils*	*
• Top quartile for the percentage achieving 5 or more A*-C grades at GCSE or equivalent including English and Maths (target reflects rank out of 151 local authorities)	38
• Percentage of schools and colleges judged by Ofsted to be Outstanding/Good	90% 124/138 Every school a good school
• Pupil absence and exclusion*	*
• Percentage of young people who are not in education, employment or training (NEET)	In top 25% of local authorities
• Percentage of care leavers in education, training or employment (ETE)	Narrow the gap
Children and young people's voice	
• Annual Report showing children and young people's engagement and participation in the shaping of services	Narrative shows improvement

*Measures and targets to be detailed in Children's Trust Board Quarterly Performance Framework

Protecting vulnerable children and young people

Outcomes

Happier and safer as a result of help received

Children and young people in care have safe and stable homes

Young people are diverted from offending and anti-social behaviour

Cross Cutting: Early help for all who need it
Put children and young people at the centre of everything we do
Multi-agency learning and shadowing opportunities to promote shared understanding of work
Children and young people with special educational needs and disabilities fulfil their aspirations and potential

The way we will do this

Partners will work together to:

- make sure children and young people get the right help at the right time and that key early help and safeguarding services are working well together, improving locality working with schools and link workers
- target our resources on effective outcomes at the earliest possible stage of the child's process through the child protection system
- provide safe and stable homes for children and young people when parents are unable to look after them and where appropriate help children and young people to be adopted as quickly as possible
- focus on tackling the issues with children in dangerous settings and families where domestic abuse, substance misuse and mental health are safeguarding issues
- implement the recommendations of the Child Sexual Exploitation review and agree a set of performance measures
- reduce youth offending and help young people to get back on track
- co-ordinate, monitor and challenge safeguarding work through the Safeguarding Children Board
- learn from the outcomes of serious case reviews, multi agency case reviews and audits and change our practice as necessary
- ensure we have a stable and sufficient children's workforce which is confident in, and alert to, identifying and responding to safeguarding issues and children with Special Educational Needs and Disabilities
- make sure that social workers have the skills and knowledge to achieve the best possible outcomes for children and young people in line with social work reforms

Measuring our success	Targets
• Percentage of referrals that led to assessments	75%
• Percentage of children's social care assessments within 45 working days of start	90%
• The percentage of looked after children aged under 16 who had been looked after continuously for at least 2.5 years, who were living in the same placement for at least 2 years, or are placed for adoption	70%
• Percentage of cases where children became subject to a child protection plan for a second or subsequent time where domestic violence was a factor	Year on year reduction from 64%
• Percentage of assessments which have Domestic Violence as a factor	No target
• Reduction in the number of first time entrants to the youth justice system aged 10-17	-5%
• Re-offending rates amongst young people	TBC
• Average time in days between a child entering care and moving in with its adoptive family, for children who have been adopted	Achieve National Target
• Percentage of looked after children adopted	15%

Children and young people's voice

- Annual Report showing children and young people's engagement and participation in the shaping of services

Narrative shows improvement

Early help and improving life chances

Outcomes

High quality early years and child care	Positive, confident parents and carers	Young carers identified and supported	High aspirations for young people and their families	Children and young people with disabilities are supported to achieve their aspirations	More families in work and fewer children living in poverty	Troubled families are supported
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Cross Cutting: Early help for all who need it
Put children and young people at the centre of everything we do
Multi-agency learning and shadowing opportunities to promote shared understanding of work
Children and young people with special educational needs and disabilities fulfil their aspirations and potential

The way we will do this

- Partners will work together to:**
- reduce the numbers of children living in low income households by implementing our child poverty strategy
 - give every child the best support and interventions to be 'ready for school' in Year R
 - make sure there are enough good quality early years childcare providers to offer the 15 hour free entitlement for 3 and 4 year olds and meet the needs of working parents
 - assist Gypsy and Traveller parents with their children's' development through outreach work in Children's Centres
 - provide more early and integrated support for children through the improved use of the Early Help Assessment, evidence based programmes and by working together in virtual locality hubs
 - develop Education, Health and Care Plans to support children and young people with Special Educational Needs and Disabilities, ensuring access to a range of local opportunities and support as they move into adulthood
 - identify and support young people as carers and prevent inappropriate and excessive levels of caring
 - deliver parenting support programmes to improve parents' skills, confidence and family relationships
 - support teenage parents through the local Teenage Pregnancy Support Pathway and the Family Nurse Partnership Programme
 - analyse gaps and work with parents on the co-production of services for children with disabilities (aged 0-25)
 - tackle the following issues in families as part of the Supporting Families Programme: antisocial behaviour or crime; poor school attendance; workless adults or young people NEET; and families with Children in Need plans or Child Protection plans in place; domestic violence or abuse in a household; long term (mental or physical) health problems including substance misuse, or known to Early Help.
 - know our vulnerable local communities and families and work through Children's centres to reach them and deliver services that have a positive impact
 - improve the use of the Early Help Assessment through training and address the key training priorities arising out of our focus on the child's voice and journey

Measuring our success	Targets
Percentage of children in low-income families	10% by 2020
Number of people in employment (Aged 16 to 64)	5% above national average
% of children participating in the 2 / 2½ year health review	Baseline year
Number of enquiries to the Access and Referral Hub	No target
Number of Early Help Assessments received	No target
% of children achieving a good level of development at the Early Years Foundation Stage	64%
Number of disadvantaged 2 year olds placed in early education / childcare	In line with National target
Percentage of early years and childcare settings judged by Ofsted to be Outstanding and Good	Improving trajectory – every setting a good setting
Percentage of under 5 year olds from the 40% most deprived LSOAs engaged with Children's Centres	Baseline year
Supporting Families Programme is meeting nationally set target (National Troubled Families Programme)	1090 families progressed over 5 years
Parenting Measure TBC	TBC
% of participants in the Aspire Programme reporting improved aspirations and self esteem	85%
Number of young carers identified and offered support	TBC

<p>Children and young people's voice</p> <ul style="list-style-type: none"> ● Young carers feel supported ● Annual Report showing children and young people's engagement and participation in the shaping of services 	<p>100% Narrative shows improvement</p>
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Being healthy and positive

Outcomes

Children have the best start in life

Improved mental health for children, young people and their parents

Better health outcomes for looked after children

Fewer young people engaging in risky behaviours

Children and families developing lifelong healthy lifestyles

Cross Cutting: Early help for all who need it
Put children and young people at the centre of everything we do
Multi-agency learning and shadowing opportunities to promote shared understanding of work
Children and young people with special educational needs and disabilities fulfil their aspirations and potential

The way we will do this

Partners will work together to:

- ensure a healthy start to life by: improving early access to antenatal care; identifying and addressing perinatal mental health issues; reducing smoking and obesity in pregnancy; promoting and supporting breastfeeding; promoting safe sleeping
- review the perinatal mental health pathways and implement services to ensure effective support for mothers
- reduce children and young people's smoking, alcohol and substance misuse by increasing knowledge of the harmful effects and ensuring accessible, effective interventions are in place
- ensure children have their age appropriate immunisations and vaccinations
- strengthen and develop interventions to build children and young people's resilience in schools
- reduce teenage pregnancy in all wards by continuing to increase access to sexual health services and high quality sex and positive relationship education
- ensure children and young people with special educational needs and disabilities have access to timely, high quality health assessments
- deliver prompt and timely support for children, young people and families with emerging mental health problems with a focus on self harm, including eating disorders, and ensure ongoing treatment and support where needed
- make sure that health and wellbeing services meet the needs of looked after children and care leavers
- reduce childhood excess weight through targeted, family-based intervention programmes and supporting schools to provide high quality physical activity, healthy eating guidance and implement school travel plans
- outcomes from the new mental health contract are further developed to take a whole system approach
- ensure that there are appropriate systems in place for children, young people and families to be able to feed back their views on their health and wellbeing needs, and services provided and increase participation in health and wellbeing surveys

Measuring our success	Targets
% Mothers smoking at the time of delivery	13%
% Mothers initiating breastfeeding	80%
% Mothers still breastfeeding at 6-8 weeks	50%
Perinatal mental health measure - tbc	TBC
Prevalence of excess weight in 4-5 year olds (Year R) and 10-11 year olds (Year 6)	% year on year reduction
Hospital admissions as a result of self harm (10-24 years)	TBC – based on Child Health Profile in 2015
Hospital admissions due to alcohol specific conditions (under 18)	TBC – based on Child Health Profile in 2015
Hospital admissions due to substance misuse (15-24 years)	TBC – based on Child Health Profile in 2015
Reduction in the number of conceptions per 1,000 teenage girls (aged 15-17 years)	<23.2 (2013)
% Looked After Children (LAC) who have had an annual Health Assessment	100%
% children and young people reporting a reduction in alcohol and/or drugs usage 3 months following the end of a Tier 2 or Tier 3 intervention	TBC – local services contract
LAC have better mental health, as measured by the Strengths and Difficulties Questionnaire	13
Chlamydia detection rate per 100,000 (15-24 year olds)	2,300
Children and young people's voice SHEU (Schools and Students Health Education Unit) survey self esteem score Children's views on health, lifestyles and related behaviour through the SHEU survey Annual Report showing children and young people's engagement and participation in the shaping of services	In line with comparators Narrative shows improvement

Notes...

Notes...



Central Bedfordshire Children's Trust

Contact us...

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Central Bedfordshire Council

Children's Services Overview and Scrutiny

18 August 2015

Quarter 4 (January – March) 2014/15 Performance Report

Report of Councillor Carole Hegley Executive Member for Social Care and Housing and Lead Member for Children's Services

Advising Officers:

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Purpose of this report: The report highlights the Quarter Four (January – March) 2015 performance for the Children's Services Directorate.

RECOMMENDATIONS

The Committee is asked to:

1. Consider and comment on Quarter Four performance.

1. The Council's framework for performance management supports the delivery of the Council's priorities.
2. The following provides an overview of the performance position for Quarter 4. This is supported by the detailed performance information provided in Appendix A. Details of statistical neighbours are included in Appendix B.

Quarter 4 Performance Summary

3. The percentage of young people not in education, employment or training (NEET) remains low and Central Bedfordshire continues to perform well at 3.7% - better than the national average 4.7% and the regional average 4.5%. An Amber rating has been given as the target of being in the top quartile has been missed by 0.2% (which equates to 17 young people). Central Bedfordshire remains in the 2nd quartile of all Local Authorities and is currently 42nd out of 152 Authorities. To be in the top quartile Central Bedfordshire needs to be ranked in the top 38 performing authorities.

4. The number of education and training opportunities made available during the Autumn for young people in Central Bedfordshire has increased to 5278 from 5211 in the previous year. This is a local measure (statistical neighbour and national comparison is not available).
5. Ofsted inspections show that 84% of schools and colleges are good or outstanding – this is good performance. Ofsted publish a similar indicator which does not include colleges or sponsored Academies which are yet to be inspected. This shows Central Bedfordshire compares well to statistical neighbours and national averages - as at 31 March 2015, 84% of Central Bedfordshire Schools are good or better and the Statistical Neighbour Average was 82% and the national average for England was 82%.
6. Performance data across safeguarding measures is good at the end of Quarter 4 2014/15, with three measures achieving their targets. Child protection reviews completed within timescales continue to achieve the 100% target. National and statistical neighbour comparator data for 2014/15 is expected to be available in December 2015.
7. The new Access and Referral Hub has added greater stability to the referral process. 84.5% of referrals have led to the provision of a social care service - achieving the 75% target. This indicator reflects the proportion of referrals that go on to further social care input, in most cases this will be to start an assessment. Detailed analysis of completed referrals has shown that assessments are started where needed and continue to focus correctly on the right children who need our services. This is a local measure – national and statistical neighbour comparator data is not available.
8. The ambitious 90% target for assessments completed within 45 days has been achieved. The Q4 figure of 96.2% demonstrates that performance is good. The new processes are now well established with good performance expected to continue through 2015/16. National and statistical neighbour comparator data for 2014/15 data is expected to be available in December 2015.
9. The average timescales from entering care and moving in with an adoptive family for the 3 years ending 31 March 15 was 539 days. Whilst this is 52 days above the nationally set target the timings were in the best interests of the child and the adoptive family and is 3 days lower than our 2011/14 outturn. Central Bedfordshire continues to compare well to other local authorities and children are placed in their permanent home without undue delay which is particularly important in enabling very young children to form positive emotional attachments. With more adoptions planned and shorter timescales in most cases it is expected that improvements will be apparent in the coming year. This indicator is based on a rolling 3 year cohort. National and statistical

comparator data for 2012/15 is expected to be available in December 2015.

Council Priorities

10. The quarterly performance report ensures that progress on the delivery of the Council's priorities is monitored e.g.
 - improved educational attainment
 - promote health and well being and protect the vulnerable

Corporate Implications

Legal Implications

11. This report considers a number of performance indicators against those of previous years as such there are no specific legal implications in respect of this report.

Financial Implications

12. There are a number of performance indicators within the full corporate suite that have a financial link.
13. It will be important to consider any financial implications in addressing ongoing areas of under performance.

Risk Management

14. Areas of ongoing under performance are a risk to both service delivery and the reputation of the Council. Regular quarterly monitoring of performance supports effective risk management.

Staffing (including Trades Unions)

15. Not applicable.

Equalities Implications

16. This report highlights performance against a range of indicators which seek to measure how services impact across all communities in Central Bedfordshire, so that specific areas of underperformance can be highlighted for further analysis.
17. As such it does not include detailed performance information relating to the Council's stated intention to tackle inequalities and deliver services so that people whose circumstances make them vulnerable are not

disadvantaged. The interrogation of performance data across vulnerable groups is a legal requirement and is an integral part of the Council's equalities and performance culture which seeks to ensure that, through a programme of ongoing impact assessments, underlying patterns and trends for different sections of the community identify areas where further action is required to improve outcomes for vulnerable groups.

Public Health

18. The report includes performance against measures which contribute to Council priorities including the following:
- promote health and wellbeing and protecting the vulnerable.

Community Safety

19. The Council has a statutory duty to ensure that across all of its functions it does all that it reasonably can to reduce crime and disorder. The use of this performance data by Children's Services enables us to monitor indicators that may indicate community safety concerns for children and young people that the Council needs to address.

Sustainability

20. Not applicable.

Procurement

21. Not applicable.

Appendices

22. The following Appendices are attached:

Performance Report Quarter Four 2014/15 - Appendix A
Details of Statistical Neighbours - Appendix B

Background papers and their location: (open to public inspection)

23. Executive (Quarter Four Performance Report)

Performance Report Appendix A Quarter Four 2014/15

Children's Services Overview and Scrutiny

Ref	Indicator	Performance will be reported:	Performance information being reported this quarter		
			Time period	Performance	
Improved educational attainment					
B2 MTP	Percentage of young people who are not in education, employment or training. (NEET)	Annually in Quarter 4	3 month average	↑	A
B3 MTP	Number of education and training opportunities for young people made available in the Autumn	Annually in Quarter 4	Sept – Dec 2014	↑	G
B4 MTP	Published Ofsted school and college classifications	Quarterly	Quarter 3 2014/15	↔	G
Promote health and wellbeing and protect the vulnerable					
C8a MTP	Percentage of referrals of children leading to the provision of a social care service	Quarterly	Quarter 3 2014/15	↑	G
C9a MTP	Percentage of children's social care assessments within 45 working days of start	Quarterly	Quarter 3 2014/15	↑	G
C10 MTP	Percentage of child protection cases which should have been reviewed during the year that were reviewed	Quarterly	Quarter 3 2014/15	↔	G
C11 MTP	Average time in days between a child entering care and moving in with its adoptive family, for children who have been adopted	Quarterly	Quarter 3 2014/15	↓	R

Report comparison - Depends on the nature of the indicator		Performance Judgement			
		Direction of travel (DoT)		RAG score (Standard scoring rules unless the indicator specifies alternative scoring arrangements)	
Seasonal	Compared to the same time period in the previous year	↓	Performance is reducing	R	RED - target missed / off target - Performance at least 10% below the required level of improvement
Quarter on quarter	Compared to the previous quarter	↔	Performance remains unchanged	A	AMBER - target missed / off target - Performance less than 10% below the required level of improvement
Annual	Compared to one fixed point in the previous year	↑	Performance is improving	G	GREEN - Target achieved or performance on track to achieve target

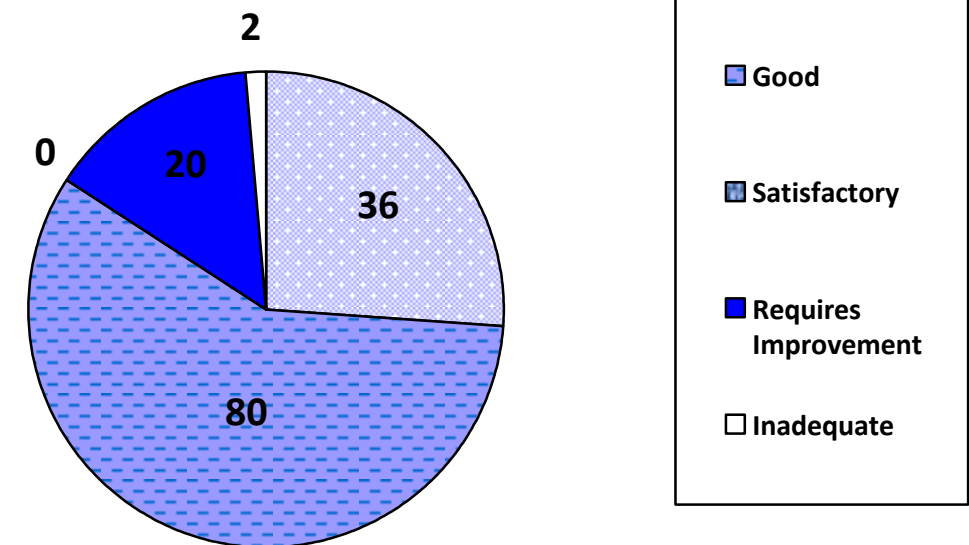
Improved Educational Attainment

B 2 MTP		The percentage of young people who are not in education, employment or training. (NEET)																		
Unit	Good is		2011 Using the average for November 11, December 11 and January 2012	2012 Using the average for November 12, December 12 and January 2013	2013 Using the average for November 13, December 13, and January 2014.	2014* Using the average for November 14, December 14, and January 2015.	Latest comparator group average	4.7% 2014 All England average	Report comparison	Seasonal	Performance Judgement	↑	A							
%	Low																			
Percentage who are NEET in Central Bedfordshire	16 to 18 population		8,407	8,471	8524	8690	Figures for this indicator are calculated annually using the average value for the months of November, December and January combined.													
	Number who are NEET**		330	390	370	320														
	Percentage		3.9	4.6	4.3	3.7														
All English authorities	Best performing		0.9	0.3	1.8	0.0														
	Average		6.2	5.8	5.3	4.7														
	Worst performing		11.8	10.5	9.8	9.0														
Target to be in the top 25% of authorities			Top quartile	2 nd Quartile	2 nd Quartile	2 nd Quartile														
<p>* Unvalidated data provided by DFE</p> <p>** Based on the adjusted NEET- which includes a proportion of the unknown young people</p> <p>Current Performance:</p> <p>Central Bedfordshire continues to perform well (3.7%) and is performing better than the national (4.7%) and regional (4.5%) averages. The number of young people who are NEET in Central Bedfordshire has continued to decrease since 2012, in line with the national trend, despite there being a steady rise in the population of 16-18 year olds.</p> <p>An Amber rating has been given as the target of being in the top quartile has been missed by 0.2% (or 17 young people). Central Bedfordshire remains in the 2nd quartile of all Local Authorities and is currently 42nd out of 152 Authorities. To be in the top quartile Central Bedfordshire needs to be in the top 38 performing authorities.</p> <p>Planned Actions:</p> <p>The following actions will be taken in order to secure further improvements/reductions in NEET performance;</p> <ul style="list-style-type: none"> Restructure of the Youth Support Service to increase our capacity to identify and track young people Doing more data analysis and work to match the needs/aspirations of the NEET group in relation to training, current provision and direct commissioning More effective dissemination of Education, Employment and Training (EET) opportunities to NEET young people in a way that best meets their needs (including a new social media strategy) Supporting improvements in impartial information, advice and guidance both pre and post 16 Home visits to target those NEET's that do not currently want support from the commissioned provider Early identification of young people at risk of becoming NEET (Key Stage 2 or earlier) to ensure support can be provided via our targeted youth work provision 																				

B 3 MTP		Educational and training opportunities for young people													
Unit	Good is		2011/12 Reported Qu4 2011/12	2012/13 Reported Qu4 2012/13	2013/14 Reported Qu 4 2013/14	2014/15 Reported Qu 4 2014/15	2015/16 Reported Qu 4 2015/16	B 3	Latest comparator group average	N/A	Report comparison	Annual	Performance Judgement	↑	G
Number	High														
B3 MTP - Number of education and training opportunities made available during the Autumn		Target	N/A	5169	5169	5211									
		Actual	N/A	5169	5211	5278									
<p>Comment: The number of education and training opportunities made available during Autumn 2014 for Young People in Central Bedfordshire for 16/17 year olds has increased to 5278. The figure of 5278 relates to school sixth form and further education institutes funded by the Education Funding Agency (EFA). The figures include opportunities accessed outside of the Local Authority area (which account for 42% of opportunities accessed by young people).</p> <p>The following statistics are for January 2015 and relate to a wider group of Central Bedfordshire young people (in academic years 12-14) accessing EFA funded education and training opportunities and apprenticeships;</p> <ul style="list-style-type: none"> • In education – 5684 • In employment with training – 701 (includes 645 apprenticeship placements) • In training - 35 <p>Overall, there has been an increase in the numbers of young people continuing in full-time education or taking up a full-time training or apprenticeship opportunities.</p> <p>Planned Actions</p> <p>There are challenges in ensuring the right opportunities are available for young people in Central Bedfordshire given a significant percentage access learning outside the local authority boundaries. However, there are a number of steps that can be taken to directly and indirectly influence provision;</p> <ul style="list-style-type: none"> • Developing and promoting traineeships as a stepping stone to apprenticeships for those young people who still require the functional skills and key qualifications • Using intelligence of our NEET Cohort and learners who have dropped out of provision to target resources at those who need it most • Working with colleges and providers to ensure suitable education or training opportunities for young people dropping-out of education throughout the academic year • Identifying creative and alternative routes for young people to secure equivalent to GCSE qualifications in English and Maths • Early identification of young people at risk of becoming NEET (Key Stage 2 or earlier) to ensure support can be provided and alternative routes considered as appropriate 															

B4 MTP Published Ofsted school and college classifications* (Published inspection outcomes during the quarter as shown by the figure in brackets)															
Ofsted category	Unit	2011/12	2012/13	2013/14	2014/15				Latest comparator group average	N/A	Report comparison	Quarter on quarter	Performance Judgement	↔	G
		Outturn	Outturn	Outturn	Qu 1	Qu 2	Qu 3	Qu 4 / Outturn							
Total	Number	140 (33)	Schools: 137(8) College: 1(0)	Schools: 136 (10) College: 1(0)	Schools: 137 (8) College: 1(0)	Schools: 137 (6) College: 1(0)	Schools: 137 (13) College: 1(0)	Schools: 137 (7) College: 1(0)							
Outstanding	Number	37 (3)	38 (1)	37(1)	36(0)	36(1)	37(1)	36(0)							
Good	Number	67 (16)	73 (3)	77(5)	82(6)	84(3)	79(8)	80(6)							
Satisfactory	Number	34 (13)	21 (0)	4(0)	1(0)	0(0)	0(0)	0(0)							
Requires Improvement	Number	-	5 (3)	18(4)	17(1)	17(2)	20(3)	20(1)							
Inadequate	Number	2 (1)	1 – Special Measures (1)	1 – Special Measures (0)	2 – Special Measures (1)	1 – Special Measures (0)	1-Special Measures (0) 1-Serious weakness (1)	1-Special Measures (0) 1-Serious weakness (0)							
<p>Comment:</p> <p>Overall the proportion of schools being classified as good or outstanding has remained stable over the last three years. In Quarter Four published inspection outcomes show that 84% of schools and colleges are either 'Good' or 'Outstanding'.</p>															

Published Ofsted Inspections



Promote health and wellbeing and protect the vulnerable

C8a MTP		Percentage of referrals of children leading to the provision of a social care service (Cumulative)																			
Unit	Good is	2012/13	2013/14						2014/15						Latest comparator group average	N/A	Report comparison	Quarter on quarter	Performance Judgement	↑	G
		Outturn	Target (Outturn)	Qu 1	Qu 2	Qu 3	Qu 4	Outturn	Target (Outturn)	Qu 1	Qu 2	Qu 3	Qu 4	Outturn							
%	High	New	75	N/A	N/A	49.4	72.5	72.5	75	81.7	81.1	82.6	84.5	84.5							

Comment:

On 01 April 2014 an Access and Referral Hub was created which has added greater stability to the way in which the need for services are established, it is expected that the target will be achieved through the coming year.

This indicator reflects the proportion of referrals that go on to start an assessment, which is generally indicative of further social care input. Detailed analysis of completed referrals has shown that assessments are started where needed and continue to focus correctly on the right children who need our services.

This is a local measure so no comparator information is available.

C9a MTP		Percentage of children's social care assessments within 45 working days of start (N14 variant) (Cumulative)																			
Unit	Good is	2012/13	2013/14						2014/15						Latest comparator group average	86.0 NFER (2013/14)	Report Comparison	Quarter on quarter	Performance Judgement	↑	G
		Outturn	Target (Outturn)	Qu 1	Qu 2	Qu 3	Qu 4	Outturn	Target (Outturn)	Qu 1	Qu 2	Qu 3	Qu 4	Outturn							
%	High	New	90.0	N/A	N/A	80.7	84.4	86.8	90.0	92.8	93.6	94.8	96.2								

Comment:

A high target exists for this indicator, reflecting ambitious yet realistic expectations. The introduction of the Access and Referral Hub in April 2014 has helped ensure that the right cases are promptly passed for assessment which has supported improved performance in each quarter, our target has been achieved throughout 2014/15.

The average for Statistical Neighbours in 2013/14 was 86% within 45 days, our performance has consistently exceeded this in 2014/15. The full year outturn will be finalised once the Children in Need census has been submitted to DfE at the end of July.

This indicator demonstrates that assessments are completed without delay which leads to timely identification of appropriate services for children in need.

C10 MTP		Percentage of child protection cases which should have been reviewed during the year that were reviewed																	
Unit	Good is	2012/13	2013/14					2014/15					Latest comparator group average	94.0 NFER (2013/14)	Report comparison	Quarter on quarter	Performance Judgement	↔	G
		Outturn	Target (Outturn)	Qu 1	Qu 2	Qu 3	Qu 4	Outturn	Target (Outturn)	Qu 1	Qu 2	Qu 3							
%	High	100	100	100	100	100	100	100	100	100	100	100	100						

Comment:

Performance remains on target. Reviews are a key element in delivering Child Protection Plans and effective reviews should ensure the provision of good quality interventions to keep children safe and protected. This target should remain on 100% and graphical representation is not relevant.

The full year outturn will be finalised once the Children in Need census has been submitted to DfE at the end of July.

C11 MTP		Average time in days between a child entering care and moving in with its adoptive family, for children who have been adopted															
Unit	Good is	2012/13	2013/14				2014/15				Latest comparator group average	624 NFER (2011/14)	Report comparison	Quarter on quarter	Performance Judgement	↓	R
		Outturn	Qu 1	Qu 2	Qu 3	Qu 4 / Outturn	Qu 1	Qu 2	Qu 3	Qu 4 / Outturn							
Days	Low																
Target		608	593	578	562	547	532	517	502	487							
Actual		600	539	476	548	542	541	523	512	539							

Comment:

The target continues to reduce reflecting the national aspiration for shorter adoption timescales. Our average time has increased due to adoptions taking place after extended intervals that were very much in the best interests of the child and family. Despite this increase, timeliness of adoption in Central Bedfordshire has remained better than our Statistical Neighbour average. There are a number of adoption order applications in process, and these are expected to lead to adoptions in the near future, which will have a positive impact on this indicator. However, the new Court of Appeal Guidance in Adoption cases has led to birth parents responses being considered in more detail and delays impact on this measure too.

Our performance demonstrates that children are placed in their permanent home without undue delay which is particularly important in enabling very young children to form positive emotional attachments.

This indicator was introduced by the Department for Education (DfE) based on a rolling 3 year cohort. Targets are set nationally by the DfE. Because this is a rolling 3 year average the figure includes activity from previous years.

Statistical neighbours

OFSTED statistical neighbours

In April 2006, the Department for Education and Skills (DfES) commissioned the National Foundation for Educational Research (NFER) to conduct an independent external review in order to develop a single "statistical neighbour" model. This single model aimed to combine the key elements of the different models currently available, be relevant to children and young people's services and enable local authorities to identify local authorities similar to themselves in terms of the socio-economic characteristics of their area. OFSTED use this model when considering outcomes as part of their assessment of Children's Services.

The 10 Councils that have the "closest" averages to Central Bedfordshire are considered neighbours. The neighbours were updated in autumn 2014 once the 2011 Census information became available for analytical purposes.

The view from Ofsted has been that the most appropriate comparator for each indicator needs to be selected. For the indicators that show a strong correlation with the Income Deprivation Affecting Children Index score, the statistical neighbours' comparator is used. Where no strong socio-economic relationship exists, the national comparison is used and this applies in particular to social care and some other indicators. This approach aims to recognise the effect of social and economic factors in the local authority's performance.

Statistical Neighbour

Rank (1=Closest)	Name	"Closeness"
1	Hampshire	Extremely Close
2	Warwickshire	Very Close
3	Essex	Very Close
4	Leicestershire	Very Close
5	South Gloucestershire	Very Close
6	Worcestershire	Very Close
7	Cheshire East	Very Close
8	West Sussex	Very Close
9	Bracknell Forest	Very Close
10	West Berkshire	Very Close

Regional Authorities

Local Authorities	"Closeness"
Essex	Very Close
Hertfordshire	Very Close
Cambridgeshire	Very Close
Bedford Borough	Close
Suffolk	Close
Thurrock	Close
Norfolk	Close
Southend-on-Sea	Close
Peterborough	Somewhat Close
Luton	Not Close

CIPFA Statistical Neighbours

Additionally Central Bedfordshire sometimes uses the CIPFA Nearest Neighbour model. The CIPFA Nearest Neighbour Model adopts a scientific approach to measuring the similarity between authorities taking into account a range of economic, social and physical characteristics. Central Bedfordshire's CIPFA comparator group (updated 2014) is below:

- Wiltshire
- Cheshire East
- Bedford
- Cheshire West & Chester
- Bath & North East Somerset
- Shropshire
- West Berkshire
- Herefordshire
- South Gloucestershire
- Stockport
- Solihull
- North Somerset
- Warrington
- Calderdale
- Swindon

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Children Services Overview and Scrutiny Committee

2015/16 Budget Monitoring Q1 – April to June 2015

Revenue

Key points to note (see link to the Executive report for details):

- The 2015/16 forecast outturn is to overspend by £1.5M after the use of £527K of Earmarked Reserves brought forward from 2014/15 (excluding Schools).
- Overspends in the Operations directorate included Intake & Family Support (£417k), Children in Care & Care Leavers (£375k), LAC Placement Costs (£370k), Fostering & Adoption (£265k), Quality Assurance (£34k) and AD Operations (£30k).
- Total debt for Children's Services is £882k of which £182k is debt over 61 days.

Revenue

Key points to note (cont):

The overspend is mainly due to:

- £787k use of agency staff mitigating the ASYE programme, vacant posts, maternity and sickness absences across the directorate.
- £65k Staying Put for foster placements to remain after they reach their 18th Birthday.
- £236k Leaving Care for young people aged 16 and 17 who want to live more independently.
- £118k Secure accommodation for two young people subject to Section 25 of the Children's Act 1989.
- £114k Adoption and Residential (now Child Arrangement) Orders.
- £131k Increased placements and new carer costs for in-house fostering offset by a reduction in Independent Foster Agency placements (£57k).
- £70K increased inter agency adoption costs.

Slide 2

Revenue

Key points to note (cont):

- The table below indicates the upward trajectory and pressure on the budget

	Total as at June 2015	Total as at June 2016	% Increase / Decrease
Number of LAC	272	284	3%
In-House Placements	95	107	16%
Independent Placements	100	92	-15%
Special Guardianship Orders	87	123	41%
Child Protection Plans	182	180	-1%
Children in Need	1307	1482	13%
Number of Referrals (YTD)	526	856	63%

Slide 3

Revenue Forecast Outturn

	Approved Budget	Forecast Outturn	Variance after Use of Reserves
	£'000	£'000	£'000
Director CS	412	583	0
AD – CSO	22,278	23,514	1,102
LAC Placement Costs	9,144	9,810	370
AD – Education Support Services	1,476	2,181	489
Transport	7,649	7,664	15
Partnerships	593	678	0
Sub Total	45,397	48,328	1,976
DSG Contribution to Central Support	(719)	(719)	0
ESG contribution to Central Support	(637)	(637)	0
Other Schools Budgets	0	(917)	(489)
Total Children Services	44,041	46,055	1,487
Schools Individual Budgets	87,003	87,003	0
Supported by DSG/EFA	(87,003)	(85,503)	0
Total Schools	0	1,500	0
Total Children's Services	44,041	47,555	1,487

Slide 4

Capital Position

Key points to note:

- The capital budget for 2015/16 is £31.3m (£2.7m net).
- Forecast gross expenditure outturn is to spend £29.8M, below the original budget by £1.5M due to the annual review of projects within the New School Places programme. The Council contribution of £2.1M to the New School Places Programme is no longer required for 2015/16.
- All but two projects, Schools Access and Temporary Accommodation are funded wholly by grant receipts that have no expenditure deadline.

Capital Outturn

Scheme Title	Approved Budget	Forecast Outturn	Variance
	£'000	£'000	£'000
New School Places	28,151	25,729	(2,422)
2 year old entitlement	0	0	0
Temporary Accommodation	400	400	0
Schools Devolved Formula Capital	460	460	0
Schools Access Initiative	200	200	0
Alternative Secondary Provision (Free School)			
LPSA & LAA Grant payout	0	200	200
Schools Capital Maintenance	2,100	2,790	690
Universal Infant Free School Meals (UIFSM)			
Short Breaks	0	0	0
Children's Services	31,311	29,779	(1,532)

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Central Bedfordshire Council

CHILDREN'S SERVICES OVERVIEW AND SCRUTINY COMMITTEE

18 August 2015

Work Programme 2015-16 & Executive Forward Plan

Report Author: Richard Carr, Chief Executive

Advising Officer: Paula Everitt (paula.everitt@centralbedfordshire.gov.uk)

Purpose of this report

1. The report provides Members with details of the currently drafted Committee work programme and the latest Executive Forward Plan.

RECOMMENDATIONS

The Committee is asked to:

1. Consider and approve the work programme attached, subject to any further amendments it may wish to make;
2. Consider the Executive Forward Plan; and
3. Consider whether it wishes to add any further items to the work programme and/or establish any Task Forces to assist it in review specific items.

Overview and Scrutiny Work Programme

2. The attached is the currently drafted work programme for the Committee.
3. The Committee is now requested to consider the work programme attached and amend or add to it as necessary.

Overview and Scrutiny Task Forces

4. In addition to consideration of the work programme, Members may also wish to consider how each item will be reviewed, i.e. by the Committee itself (over one or a number of Committee meetings) or by establishing a Member Task Force to review an item in greater depth and report back its findings.

Executive Forward Plan

5. Listed below are those items relating specifically to this Committee's terms of reference contained in the latest version of the Executive Forward Plan to ensure Members are fully aware of the key issues Executive Members will be taking decisions upon in the coming months. The full Executive Forward Plan can be viewed on the Council's website at the link at the end of this report.

Issue	Indicative Exec Meeting date
Determination of Proposal to Commission New Middle School Places in Leighton Linlade	6 October 2015
Determination of Proposals to Amalgamate Arlesey Nursery School and Childcare Centre with Gothic Mede Academy and The Lawns Nursery, Biggleswade with Biggleswade Academy Trust post consultation.	1 December 2015
Determination of the Proposal to Recommission Primary Specialist Provision for Autistic Spectrum Condition in Dunstable	12 January 2016
Non Key Decisions	Indicative Exec Meeting date
Fees and Charges 2016	6 October 2015
Q2 Revenue, Capital and Housing Revenue Account Budget Monitoring	1 December 2015
Q2 Performance Monitoring	1 December 2015
Treasury Management Strategy	12 January 2016
Draft Budget 2016/17 and Medium Term Financial Plan	12 January 2016
Draft Capital Programme and Housing Revenue Account 2016/17	12 January 2016
Budget 2016/17 and Medium Term Financial Plan, Capital Programme 2016/17 to 2019/20 and HRA Plan	9 February 2016
Q3 Revenue, Capital and HRA	9 February 2016

Corporate Implications

6. The work programme of the Children's Services Overview & Scrutiny Committee will contribute indirectly to all 5 Council priorities. Whilst there are no direct implications arising from this report the implications of proposals will be details in full in each report submitted to the Committee.

Conclusion and next Steps

7. Members are requested to consider and agree the attached work programme, subject to any further amendment/additions they may wish to make and highlight those items within it where they may wish to establish a Task Force to assist the Committee in its work. This will allow officers to plan accordingly but will not preclude further items

being added during the course of the year if Members so wish and capacity exists.

Appendices

Appendix A – Children’s Services Overview and Scrutiny Work Programme.

Background Papers

Executive Forward Plan (can be viewed at any time on the Council’s website) at the following link:-

<http://www.centralbedfordshire.gov.uk/modgov/mgListPlans.aspx?RPId=577&RD=0>

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Appendix A

Children's Services OSC Work Programme (2015/16)

OSC date	Report Title	Description
20 October 2015	Q1 Budget Monitoring	To receive a presentation regarding the directorate's capital & revenue budget monitoring information for the first quarter of 2015/16.
20 October 2015	Q1 Performance	To consider performance monitoring information for the first quarter of 2015/16.
20 October 2015	Excess Weight Services Strategy and Contract	To consider a report on the new strategy and contract for Excess Weight Services.
20 October 2015	Supporting Families - verbal update	To receive an update on the Supporting Families initiative.
20 October 2015	Adoption, Fostering and Private Fostering annual reports	To receive the annual report of the Adoption, Fostering and Private Fostering Panels
20 October 2015	Consultation on the Council's Admissions Arrangements for the academic year 2017/18	To receive a report regarding a consultation on the Council's admission arrangements for 2017/18
20 October 2015	Fees and Charges 2016	To receive the directorate's relevant fees and charges information.
08 December 2015	Draft Capital Programme 2016/17	To receive a presentation on the relevant quarterly performance information
08 December 2015	Public Health Annual Report	Giving Every Child the best start in life
08 December 2015	Local Safeguarding Children's Board Annual report	To receive the Local Safeguarding Children's Board Annual Report
08 December 2015	Customer Relations Annual Report	To receive an annual report regarding customer feedback in relation to the Children's Services directorate
08 December 2015	Schools Resilience Annual Report	To receive an annual report regarding Schools Resilience.
08 December 2015	Draft Budget 2016/17 and Medium Term Financial Plan	To receive a presentation on the relevant quarterly performance information
19 January 2016	Q2 Budget Monitoring Report	To receive a presentation regarding the directorate's capital & revenue budget monitoring information for the first quarter of 2015/16.
19 January 2016	Draft Capital, Revenue and Medium Term Financial Plan	To receive the directorate's relevant budget information.
19 January 2016	Fees and Charges 2016	To receive the directorate's relevant fees and charges information.
15 March 2016	School Exclusion Update	To receive an update on review of the Council's policies in relation to school exclusions
15 March 2016	Schools Visits and Journeys Annual Report	To receive the annual update

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