

Children and Young People Scrutiny Committee Agenda



**9.30 am Monday, 29 October 2018
Committee Room No. 1 Town Hall
Darlington DL1 5QT**

Members of the Public are welcome to attend this Meeting.

1. Introductions/ Attendance at Meeting
2. Declarations of Interest
3. To approve the Minutes of the meeting of this Scrutiny Committee held on 10 September 2018 (Pages 1 - 6)
4. Appointment of Co-opted Member –
Report of the Managing Director
(Pages 7 - 8)
5. Darlington Safeguarding Children Board Annual Report 2017/18 –
Report of the Director of Children and Adults Services
(Pages 9 - 60)
6. Children and Young People's Plan 2017-2022 - Progress Report –
Report of the Director of Children and Adults Services
(Pages 61 - 76)
7. Special Educational Needs Strategy and Funding –
Report of the Director of Children and Adults Services
(Pages 77 - 112)
8. Special Educational Needs Home to School Transport –
Report of the Director of Children and Adults Services

(Pages 113 - 126)

9. Work Programme –
Report of the Managing Director
(Pages 127 - 138)
10. SUPPLEMENTARY ITEM(S) (if any) which in the opinion of the Chair of this
Committee are of an urgent nature and can be discussed at this meeting
11. Questions



Luke Swinhoe
Assistant Director Law and Governance

Friday, 19 October 2018

Town Hall
Darlington.

Membership

Councillors C Taylor, L Hughes, Crudass, Mrs Culley, Curry, Kelly, Lister, Mills, Storr and M Wright

Statutory Co-optees

M Frank and P Rickeard

Non Statutory Co-optees

J Armitage, T Fisher, N Lindsay, M Regan, G Harrison, S Miah and J Woodcock

If you need this information in a different language or format or you have any other queries on this agenda please contact Allison Hill, Democratic Officer, Resources Group, during normal office hours 8.30 a.m. to 4.45 p.m. Mondays to Thursdays and 8.30 a.m. to 4.15 p.m. Fridays email: allison.hill@darlington.gov.uk or telephone 01325 405997

ITEM NO 3

CHILDREN AND YOUNG PEOPLE SCRUTINY COMMITTEE

10 September 2018

PRESENT – Councillor C Taylor (in the Chair); Councillors Curry, Crudass, L. Hughes, KE Kelly, Lister, Mills and Storr. (7)

APOLOGIES – Councillors Crumbie, Mrs Culley and Wright; M Regan, N Lindsay, T Fisher, Jane Kochanowski and Joanne Stoddart.

ABSENT – None (0)

STATUTORY CO-OPTees – None. (0)

NON-STATUTORY CO-OPTees – (0)

OFFICERS IN ATTENDANCE – Rachel Osbaldeston, Public Health Portfolio Lead; Martin Graham, Head of Quality Assurance and Practice Improvement; and Allison Hill, Democratic Officer.

ALSO IN ATTENDANCE – Councillor C Hughes, Cabinet Member with the Children and Young People Portfolio.

CYP9. DECLARATION OF INTERESTS – There were no declarations of interest reported at the meeting.

CYP10. MINUTES – Submitted - The Minutes (previously circulated) of the meeting of this Scrutiny Committee held on 2 July 2018.

RESOLVED – That the Minutes be approved as a correct record.

CYP11. PERFORMANCE INDICATORS QUARTER 1 2018/19 – The Director of Children and Adult Services submitted a report (previously circulated) to provide Members with an update on performance against key performance indicators.

The submitted report provided Quarter 1 (April to June) performance information in line with an indicator set agreed by Monitoring and Coordination Group and subsequently by each individual Scrutiny Committee.

The submitted report highlighted where Children and Young People were performing well and where there was a need to improve.

It was highlighted that 94.2 per cent of contacts were completed within 24 working hours and 0.5 per cent within 72 hours which equates to an increase by 19.5 per cent compared to Quarter 1 2017/18; 94.1 per cent of children in Quarter 1 had a Review Health Assessment completed; 98 per cent of initial Child Protection Conferences were held within 15 working days; 100 per cent of Child Protection Reviews had been completed within the required timescales; 100 per cent of children involved with Child

Protection and Looked After had been allocated a Social Worker; and 100 per cent of Looked After Reviews were completed within timescale in Quarter 1.

It was also highlighted that 93.2 per cent of statutory visits of Looked After Children in Quarter 1 were completed within timescale which was above the target of 90 per cent; 9.6 per cent of Looked After Children had three or more placement moves within the last 12 months which was an improvement of 6.3 per cent compared to the end of Quarter 1 2017/18 and in line with the statistical neighbours at 9.5 per cent and the national average at 10 per cent; 100 per cent of Return Home Interviews had been completed in Quarter 1 with 92.5 per cent completed within 72 hours of the child being returned home after the missing episode; and 27.5 per cent of Care Leavers were not in employment, education or training (NEET) which was better than the target of 33 per cent and is a reduction of 4.7 per cent when compared with 2017/18 year end figure.

The areas highlighted that required improvement in Quarter 1 were the percentage of assessments completed within 45 working days which was below the target of 90 per cent at 83.5 per cent but above the England average of 83 per cent; 48.7 per cent of dental health checks had been completed at the end of Quarter 1 and progress against this indicator continues to undergo close scrutiny; and although the percentage of Looked After Children who have been in their current placement for two or more years has improved compared to Quarter 1 2017/18 and is now at 63.1 per cent has still not reached the Council's target of 65 per cent.

Members highlighted the performance indicator for Care Leavers in unsuitable accommodation which was 5.9 per cent and wanted some clarification on the assessment of 'unsuitable accommodation'. The Head of Quality Assurance and Practice Improvement advised Members that 5.9 per cent in reality will only equate to one or two young persons and being in custody would be recorded as unsuitable accommodation. Members requested that future reports provide further detail on why the Care Leaver has been recorded in unsuitable accommodation so that the Committee can be assured that this does not mean the Care Leaver is living in danger or in poor conditions.

Members also expressed their concerns that some indicators were slipping; and the percentage of Looked After Children still remained high and agreed that the performance report for the next quarter needed to provide Members with reasons for this slippage and the impact caused.

Regarding the number of assessments in Quarter 1 that had not been completed within 45 working days Members agreed that they needed assurances and evidence that if an authority is not meeting their deadlines what was being done to address this.

RESOLVED – That the performance information provided for Quarter 1 2018/19 be noted.

CYP12. INDEPENDENT REVIEWING OFFICER ANNUAL REPORT 2017/18 – The Director of Children and Adult Services submitted a report (previously circulated) to provide Members with the Annual Report of the Independent Reviewing Officer for 2017/18.

The Independent Review Officer (IRO) service is set within the statutory framework of the IRO Handbook (2010), linked to revised Care Planning Regulations and Guidance which was introduced in April 2011. The IRO has a key role in relation to the improvement of Care Planning for Looked After Children (LAC) and for challenging drift and delay.

The submitted report outlined the role of the Independent Reviewing Officers and the statutory functions that the service is responsible for; detailed the staffing levels and the management of caseloads; and provided statistical information relating to the number of Children Looked After, demographics and Looked After Reviews at 31 March.

The submitted report referred to Performance Planning and Adoption; the Dispute Resolution Process to resolve problems arising out of the Care Planning process; and the requirement under Regulation 29 (The Fostering Services Regulations 2001) to review the approval of foster carers at least once a year.

The submitted report also highlighted Child Protection Activity; management of the IRO service; and scheduled action for 2018/19.

The Cabinet Member with the Children and Young People Portfolio questioned the officer how the 'voice of the child' is captured and how did we know what the impact was. The Head of Quality Assurance and Practice Improvement advised that the Independent Review Officer's visit young people prior to their review and ensure that the child's views are recorded within the record of the meeting. The majority of children over the age of 4 years attend their reviews and directly contribute to the discussion and outcome of the meeting.

It was highlighted that some young people chose not to participate directly in their Looked After Reviews and will brief an advocate or complete a consultation form.

Where an IRO challenge is required in relation to Care Planning this will be escalated to Managers for resolution.

It was suggested that case examples of good practice would be a useful addition to next year's annual report.

Discussion also ensued on the number of children subject to a Child Protection Plan and the reasons for the plan; timeliness of Child Protection Conferences; the percentage of Subsequent Plans which was in-line with the England average but higher than the regional average and some of the reasons for this; and the good representation of parents at the Initial Child Protection Conference.

RESOLVED – That the Annual report be noted.

CYP13. CHILDREN AND YOUNG PEOPLE PUBLIC HEALTH OVERVIEW 2018 –

The Director of Public Health submitted a report (previously circulated) to provide Members with an overview of the health promoting activities in relation to children and young people and the plans to address these issues.

The submitted report provided information about the Darlington Children and Young People's Profile 2018 and the Healthy Lifestyle Survey 2017 as a means of assessing need to plan services to improve health and wellbeing of local children and young people; and also provided information about the Darlington Childhood Healthy Weight Action Plan 2017-2022 and the Oral Health Plan 2017-2022 (also all previously circulated).

With regard to the Child Health Profile 2018 it was reported that the profile showed the health and wellbeing of children in Darlington was varied compared to the England average, with 11 of the 32 reported indicators for Darlington being significantly different when compared to England, with four significantly better and 11 significantly worse. These were mainly the high number of children admitted to hospital and this is an ongoing priority for all partners.

The areas that showed some improvement in the 2018 profile from the previous years included the percentage of children aged 5 years with decayed, missing or filled teeth which had decreased from 35.4 per cent in 2017 profile (2015/16 data) to 26.4 per cent (2016/17 data) and Darlington is now significantly similar to the England average of 23.3 per cent.

An area highlighted for improvement from the profile was childhood obesity which showed that 10.6 per cent of children in Reception, (similar to England) and 22.5 per cent of children in Year 6, (worse than England) are obese.

The Healthy Lifestyle's Survey 2017 is a further tool in understanding local need and gathers and analyses information from children and young people in Darlington about their attitudes and behaviours across a range of health related topics. Surveys had been conducted in secondary and primary schools and the key messages from the 2017 survey were attached as an appendix to the submitted report.

The Darlington Childhood Healthy Weight Plan 2017-2022 sets out a whole system approach to tackling childhood obesity and reducing inequalities by ensuring the healthy weight agenda is integrated in other relevant plans aims to increase the percentage of children leaving primary school at a healthy weight.

It was reported that although the main causes of obesity were poor diet and low levels of physical activity, environmental changes can have the most impact on reducing obesity; and tackling environmental issues requires a co-ordinated partnership approach from a wide variety of stakeholders to enable effective and sustainable environmental change.

The Darlington Oral Health Plan 2017-2022 complements the work of the Childhood Healthy Weight Plan as a high sugar diet is a risk factor in dental decay as over a third of children in Darlington aged five years old start school with the experience of dental decay. The plan proposes a 'whole system approach' to tackling dental decay, improving oral health and reducing inequalities.

Members discussion ensued on energy drinks and the caffeine drinks which young people appeared to be purchasing as an alternative; the number of young people aged

10 to 24 years admitted to hospital as a result of self-harm which remained higher than the England average; and the participation of schools in the Healthy Lifestyles Survey.

Members also discussed ways to encourage parents to walk their children to school and the 'walking train'; how to challenge parents lifestyle choices; the level of physical activity within schools and the influence that the authority can have within schools and in particular the academies; how to promote eating within schools as a social event and to address any anxieties that young people may have around eating in public; and to examine ways to restrict the number of hot food takeaways across the borough.

CYP14. DESIGNATED OFFICER ANNUAL REPORT – The Children and Adult Services submitted a report (previously circulated) to update Members on the progress and performance of the Designated Officer (DO) Service (previously known as the Local Authority Designated Officer (LADO) between April 2017 to March 2018 and to highlight the required actions for April 2018 to March 2019.

The submitted report outlined the function of the Designated Officer; local arrangements; the criterion for a Designated Officer referral; cross boundary issues; provided statistical information on the number of referrals and annual comparisons; areas of concern and the main category for referral; detailed the source of referrals by profession and employment setting; allegations by staff group; and gave detail of outcomes of cases.

The submitted report also provided performance information relating to the Designated Officer Service; freedom of information requests; service improvements and developments 2017/18; and highlighted priorities for 2018/19.

A Member questioned whether other agencies were obliged to report any concerns to the Designated Officer and the Head of Quality Assurance and Practice Improvement advised that all agencies are required to have a Child Protection Policy in place and a Management Investigation Process.

Members also agreed that it would be useful for them to have a copy of the public information available in relation to the role of the Designated Officer and other relevant safeguarding contacts. This would help Members promote children's safeguarding to faith groups and other organisations within their individual Wards.

RESOLVED –That the contents of the annual report and work undertaken during 2017/18 and the priorities of the Designated Officer service for 2018/19 be noted and agreed.

CYP15. LOOKED AFTER CHILDREN MISSING FROM CARE WHO HAVE AUTISM OR ANOTHER DISABILITY – Pursuant to Minute CYP5/Jul/28, the Director of Children and Adult Services submitted a report (previously circulated) to provide Members with further information regarding the number of children who are Looked After with autism or another disability, who experience missing from home episodes.

It was reported that there were no children or young people missing from home with a recorded disability including autism throughout the reporting year of 2017/18; however

There has been one missing episode for one young person with autism in the current reporting year of 2018/19 and this young person left his foster placement in the early evening but was located and returned home within the hour.

Councillor Mills acknowledged that the report received provided information on the children who are already diagnosed with autism or another disability however, she still had concerns about how un-diagnosed children could be picked up from incidents of going missing as this could be the first sign of a potential issue with the young person.

Members agreed that they would like to examine a copy of the Return Home Interview Pro-forma with a view to disability or health issues being recorded on it and to include a criteria to recognise potential issues related to autism.

RESOLVED – That the report be noted.

CYP16. WORK PROGRAMME – The Assistant Director Law and Governance submitted a report (previously circulated) to provide an update on the current work programme for this Scrutiny Committee.

The work programme has been reviewed and revised for the Municipal Year 2018/19 and has been linked to performance indicators from the Performance Management Framework to provide robust and accurate data for Members to use when considering topics and the work they wish to undertake.

Councillor Mills advised the Committee that she was leading on the review of Autism Provision at Hurworth School and will be notifying Members of an initial meeting date in due course.

The Chair advised the Committee that, along with the Chair of Health and Partnerships Scrutiny Committee he was to meet with Ken Ross, Public Health Principal to discuss progressing the outstanding issues on the Joint Review of Child Healthy Weight and Oral Hygiene including mental health links.

The Chair also advised the Members that a report on Educational Landscape was being presented to the next meeting of this Scrutiny Committee and he envisaged a further review as a result of that report.

RESOLVED – That the current status of the work programme be noted.

APPOINTMENT OF CO-OPTED MEMBER

Matter for Consideration

1. To advise Members of an appointment of a co-opted representative and a deputy on this Scrutiny Committee.

Background

2. Members will be aware that Kate Chisholm, Head Teacher of Skerne Park Academy was appointed to be the Primary School Forum representative of this Scrutiny Committee on 2 July 2018.
3. Due to her work commitments Kate is now unable to continue this role and a representative to replace her has been sought.
4. John Armitage, the Head of Rydal Academy, has volunteered to attend future meetings of this Scrutiny Committee as a Co-opted Member to represent the Primary School Forum.
5. Helen Tarokh, Head of Heathfield Primary School, has also volunteered to deputise for John Armitage when he is unable to attend.

Recommendation

6. Members are requested to note the appointment of John Armitage as a Non-Voting Co-opted Member of this Scrutiny Committee representing the Primary School Forum and the appointment of Helen Tarokh to act as his deputy.

**Paul Wildsmith
Managing Director**

Background Papers

No Background papers were used in the compilation of this report.
Allison Hill : Extension 5997

**DARLINGTON SAFEGUARDING CHILDREN BOARD ANNUAL REPORT –
2017/2018**

SUMMARY REPORT

Purpose of the Report

1. The purpose of this report is to enable the Children and Young People Scrutiny to receive and comment upon the Annual Report of the Darlington Safeguarding Children Board (DSCB) for the period 2017/18.

Summary

2. Local Safeguarding Children Boards are required to produce an Annual Report which should account for the Board's activities over the previous year and make an assessment of the effectiveness of multi-agency safeguarding arrangements within the local area.
3. The Annual Report for 2017/18 is based on the DSCB's 3 Strategic Priorities:
 - **Priority 1** - ensure effective arrangements are in place that enable children, young people and their families to access appropriate Early Help support when first identified and this support is well coordinated
 - **Priority 2** - ensure effective arrangements are in place to protect children from neglect, abuse and child sexual abuse.
 - **Priority 3** - ensure partners work together to protect children from harm and ensure the voice of the child is evident in all multi-agency work.
4. It is recommended that:
 - (a) The Children and Young People Scrutiny note and comment on the DSCB Annual Report for 2017/18 which will be published on the DSCB website.

Reasons

6. The recommendations are supported by the following reasons:
- (a) Children and Young People Scrutiny have an understanding of the Board's work to date.
 - (b) To challenge and scrutinise the work of the DSCB and raise any challenges as appropriate with the Independent Chair.
 - (c) To have assurance that the Safeguarding Children Board is effectively coordinating multi-agency safeguarding practice in Darlington and promoting the welfare of children.
 - (d) The DSCB was a member of the Children's Service's Improvement Board until the time of the re-inspection and has continued to work with all statutory agencies to strengthen safeguarding arrangements in Darlington.

Suzanne Joyner
Director of Children and Adults Services

Amanda Hugill
Ext 6450

Background Papers

Safeguarding Children Board Annual Report – 2017/2018

S17 Crime and Disorder	All children at risk of crime and disorder are a priority within this report. DSCB works alongside Youth Offending Services to help reduce crime and first time entrants into the criminal justice system.
Health and Well Being	The health and wellbeing of all children in Darlington are a priority within this report. DCSB works alongside all organisations to promote the health and wellbeing of children and their families.
Carbon Impact	There are no implications arising from this report.
Diversity	DSCB works to ensure that all groups are considered within their safeguarding agenda.
Wards Affected	All
Groups Affected	All
Budget and Policy Framework	N/A
Key Decision	N/A
Urgent Decision	N/A
One Darlington: Perfectly Placed	The work of the Safeguarding Children Board complements the priorities in One Darlington Perfectly placed.
Efficiency	N/A
Impact on Looked After Children and Care Leavers	This report has not impacted on Looked After Children or Care Leavers.

MAIN REPORT

Information and Analysis

7. Darlington Safeguarding Children Board (DSCB) Annual Report – 2016/2017

- (a) The DSCB is a multi-agency partnership with the statutory objective to coordinate and ensure effectiveness of how agencies work together to safeguard and promote the welfare of children in need of help and protection in Darlington.
- (b) DSCB meets bi-monthly, which has an Independent Chair and is supported by subgroups to deliver the Board's strategic business plan. The subgroup supporting the work are:
 - policy and procedure development
 - quality assurance and performance monitoring
 - serious case reviews
 - child death reviews
 - training and communications
- (c) The Annual Report reflects on the work of DSCB against its four strategic priorities and six Ofsted recommendations.
- (d) The priorities for 2017-18 have been determined based on the learning from the previous year, Ofsted recommendations, the view of the quality of services and areas of interest identified by the Children's Services Improvement Board:
 - (i) The effectiveness of Early Help
 - (ii) Access to CAMHS
 - (iii) Continue to develop and consolidate multi-agency work with regard to Child Sexual Exploitation, Children who are missing from home and children missing from education
 - (iv) Multi-agency arrangements on e-safety and actively promoting safer internet use and staying safe online
 - (v) Engagement and communication
 - (vi) Developing an effective multi-agency performance and audit framework
 - (vii) Proposals for new Multi-Agency Safeguarding Audit (formally section 11 Children Act)
 - (viii) Ensuring positive developments in Case Review processes to provide greater sustainability and consolidation of changes in practice
 - (ix) Further strengthening connectivity across the Strategic Partnerships



Annual Report

2017-18

VERSION CONTROL (INTERNAL USE ONLY)		
Editor	Version	Date
Amanda Hugill/Marian Garland	V1	10/07/2018
CG/PR/MG/MGa	V1.2	30/07/2018
MG/MGa/AH	V1.3	03/09/2018
JK/MG	V1.4	24/09/2018

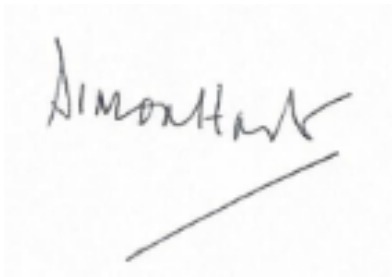
Contents:

- 1. Introduction from the Independent Chair**
- 2. About this Annual Report**
- 3. About Darlington**
- 4. The Health and Wellbeing of Children and Young People**
- 5. Analysis of effectiveness of Safeguarding Children**
- 6. Governance arrangements and Strategic Partnership Links**
- 7. What has been achieved**
- 8. Achievements and Challenges against Boards Priorities**
- 9. Professional challenge and impact of the Boards work**
- 10. What we plan to do next**
- 11. Appendix 1 – Membership**
- 12. Appendix 2 – Sub Group Achievements**
- 13. Appendix 3 – Revenue**
- 14. Appendix 4 – Glossary of Terms**

Introduction from the Independent Chair

To be inserted by SH

Simon N Hart, (Interim) Independent Chair, Darlington Safeguarding Children Board

A handwritten signature in black ink on a light background. The signature reads "Simon N Hart" in a cursive style, with a long horizontal line underneath it.

About the Annual Report

The Darlington Safeguarding Children Board (DSCB) annual report provides a transparent overview and assessment on the effectiveness of safeguarding and the promotion of child welfare in Darlington. DSCB has a particular focus on child protection and seeks to ensure all children and young people in Darlington are protected from physical injury, emotional abuse, neglect, sexual abuse or exploitation or harm caused by witnessing violence or abuse.

DSCB Mission

'Safeguarding is everyone's business and everyone works together to protect children and young people from harm and promote their welfare which allows them to become confident adults'

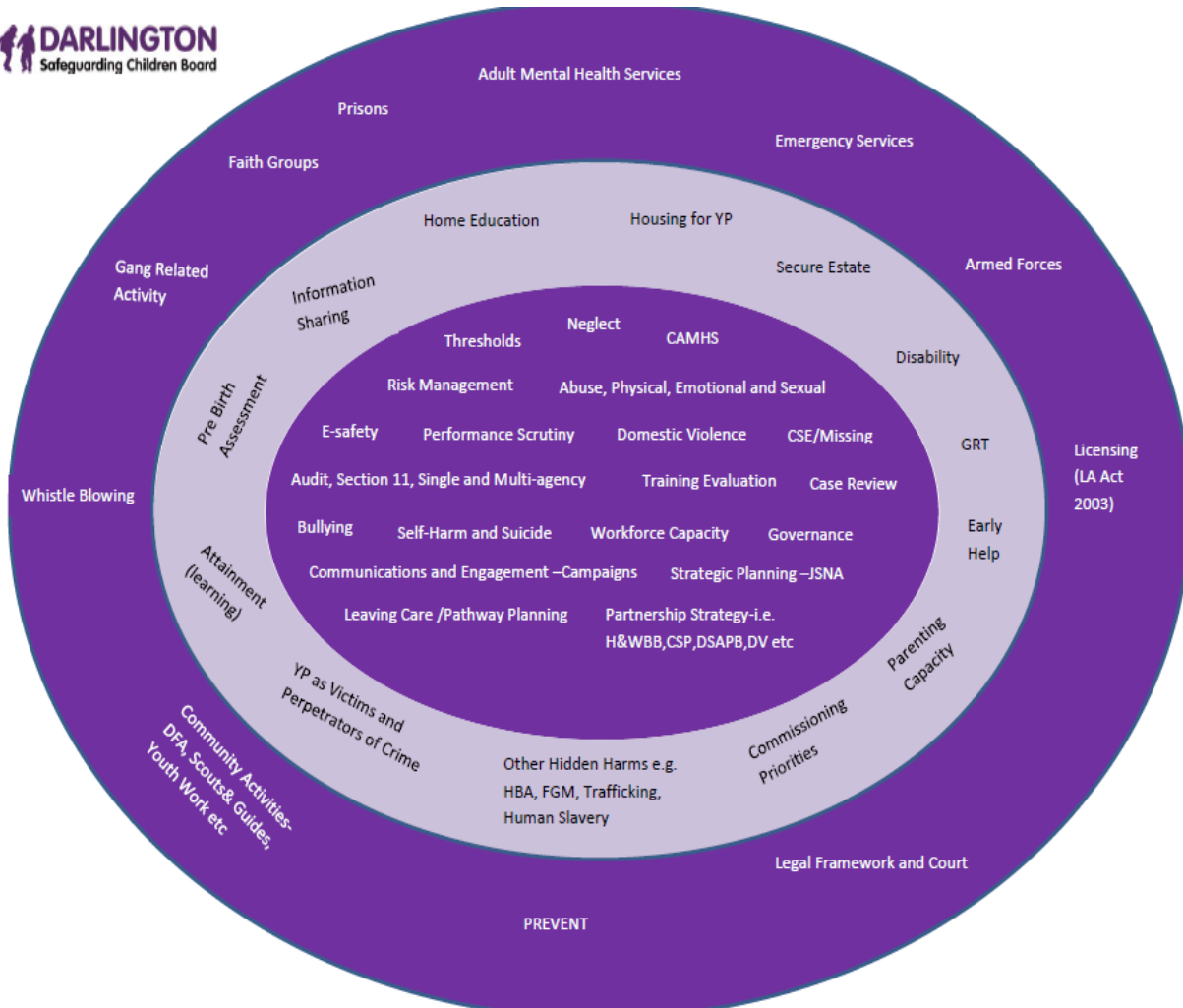
DSCB identified three strategic improvement priorities:

- **Priority 1** - ensure effective arrangements are in place that enable children, young people and their families to access appropriate Early Help support when first identified and this support is well coordinated
- **Priority 2** - ensure effective arrangements are in place to protect children from neglect, abuse and child sexual abuse.
- **Priority 3** - ensure partners work together to protect children from harm and ensure the voice of the child is evident in all multi-agency work.

A three year strategic plan was developed in 2017 which describes each year how the DSCB will deliver against these three priorities. The Board will monitor and challenge the effective delivery of multi-agency safeguarding arrangements through a number of key questions:

- Does our performance framework direct us to emergent risk in Darlington?
- Is the Board agile in responding?
- Do we know that our safeguarding training is effective?
- Do the outcomes of our case reviews really influence and change practice?
- Do our policies and procedures help practitioners to do their job?
- Do we engage well with children, young people and their families?
- Do we understand what makes young people feel unsafe?

The Board’s focus can best be illustrated through the diagram below, the central area illustrates the Board’s current key focus of attention. This report outlines the key achievements and work completed by the Board over the past year; identifying the strengths and weaknesses against the above questions based on these key focus areas.



About Darlington

Local Data and Geography

Darlington is a unitary authority and covers an area approximately 200km² and sits at the western end of the Tees Valley Combined Authority area. It is bordered to the North and West by County Durham, to the South and West by North Yorkshire and to the East by Stockton Borough. The Borough is centred on the town of Darlington which contains the administrative centre including, the Town Hall, as well as main Police and Fire Services. Darlington Memorial Hospital, a district general hospital providing services such as A&E, paediatrics, inpatient and maternity services.

The current population is 105,646, rising by almost 8% since 2001. Of this 64,745 are of working age (16-64 years old). Within the working age population, 79% are economically active (in work or unemployed).

The number of children and young people under the age of 18 is 22,519 (2016 mid-year), equating to 21% of the current population. Over the last five years, birth rates have fallen from 1,357 in 2010 to 1,198 in 2016. Children and young people from minority ethnic groups account for 6% of all children living in the area, compared with 22% in the country as a whole. The largest minority ethnic groups of children and young people in the area are Asian and mixed.

The proportion of residents that identified themselves as Gypsy and Travellers in the 2011 Census was three times higher than the national average but equates to only 0.3% of the population. The Census return showed 350 individuals declaring as Gypsy or Irish Traveller locally. School Census 2017 information shows that 1.4% of the school population is from the Gypsy and Traveller community, 2.8% are Asian, 2.2% are mixed race, 0.5% are Black, and 0.3% are Chinese.

The proportion of children and young people whose first language is other than English:

- 7% in Primary schools (national average – 21%)
- 5% in Secondary schools (national average – 16%)

Approximately 22% of children are living in poverty, with the proportion of children entitled to free school meals being:

- 19% in primary schools (the national average is 14%)
- 14% in secondary schools (the national average is 13%)

The Health and Wellbeing of Children and Young People

The Health and Wellbeing of children and young people is a crucial element of our local safeguarding context, which can be affected by a range of factors from birth to adulthood. There are specific groups of young people who are more vulnerable to these factors, which can inhibit their life chances and cause inequalities for health and wellbeing. These include children in need, children subject to Child Protection Plans, children at risk of sexual exploitation, those living in poverty or caring for a parent or sibling.

It is important therefore, that the Board is able to maintain an overview of health and wellbeing and the [Darlington Children Health Profile](#) provides signals that are helpful to the Board in its assessment of risk.

Health and Wellbeing

The health and wellbeing of children in Darlington is generally below the England average, some important illustrations include:

- Infant and child mortality rates (2016/17) are similar to the England average with an annual average of 4 infants dying before the age of one. Recently there have been three child deaths (1-17 year olds) each year on average.
- The teenage conception rate in girls under the age of 18 in Darlington has historically been higher than England, although has continued to fall over a period of years and is now statistically similar (2016/17) to England at 24 per 1000 conceptions (44 girls becoming pregnant in a year).
- 16.2% of women smoke while pregnant, which is higher than the average for England (10.7%)
- Breastfeeding rates for Darlington 6-8 weeks after birth at 34.3% are lower than England average of 44.4%.
- Dental health is statistically similar to England with 26.4% of five year olds (2016/17) had one or more decayed, filled or missing teeth. The England average is 23.3%.
- Obesity levels for Children in Darlington (2016/17) average at 10.6% of children aged 4-5 years (average for England) and 22.5% of children aged 10-11 years (higher than the England average).
- The rate of A&E attendance and hospital admissions (2016/17) for children of all ages is higher than England, with the rate of emergency hospital admissions for children under five years in Darlington being 1,534 per 1,000 compared to England at 602 per 1,000. Hospital admissions caused by injuries in children under the age of fifteen years is also higher at 166.5 per 10,000 compared to an England average of 101 per 10,000.
- Uptake of childhood immunisations in Darlington has historically and consistently been higher than England average with 97.9% of Darlington children receiving vaccination (Dtap/IPV/Hib immunisation) by age two, meeting minimum

recommended coverage and compared to 95.1 % England average. More than 95% of children in Darlington (the minimum recommended coverage) have received their first MMR vaccination by the age of two years which is significantly higher than the England average.

Health Behaviours

Nationally the rate of hospital admissions of children and young people for conditions wholly related to alcohol is decreasing and this is also the case in Darlington. However; teenagers in Darlington have poorer outcomes related to health behaviours with a significantly higher hospital admission rate for teenagers under the age of 18 due to alcohol specific conditions with 51.6 admissions per 100,000 in 2016/17 compared to England at 34.2 per 100,000. The rate of admissions due to substance misuse in those aged 15-24 years in Darlington remains significantly higher at 126.0 per 100,000 compared to England at 89.8 per 100,000.

Vulnerability and Disease

Nationally, the rate of young people being admitted to hospital as a result of self-harm is increasing. This is not the case in Darlington where the trend is decreasing. However, the admission rate for 2016/17 (472.8 per 100,000) remains higher than the England average (404.6 per 100,000). The number of hospital admissions for mental health conditions for children under the age of eighteen (2016/17) is 97.7 per 100,000 which is similar to the England average of 81.5 per 100,000. The rates of hospital admissions for children under the age of 19 due to asthma in Darlington are largely similar to England.

Poverty

Darlington is in the 30% most deprived local authority areas in England. It is ranked as the 97th most deprived local authority area out of 326 on the Indices of Multiple Deprivation (IMD)¹ 2015. The number of children under the age of 16 years living in relative poverty in Darlington is 19.6% which is higher than the England average of 16.8%. The rate of family homelessness in Darlington is significantly better than the England average.

¹ Index of Multiple Deprivation is the official measure of relative deprivation for small areas in England.

Analysis of Effectiveness in Safeguarding Children

Children Looked After

The numbers of Children Looked After (CLA) by the local authority at the end of March 2018 was 214 which equates to 95 per 10,000 of the relevant population. The rate has been relatively stable (with some fluctuation throughout the year).

The latest comparator figures available (as at 31 March 2017) indicate the rate of Children Looked After (CLA) in Darlington is higher than both the England average at 62 per 10,000 and that for the North East at 84 per 10,000 population, under 18 years.

Darlington is not statistically different across a range of measures of concern and difficulties for Children Looked After compared to England. The Local Authority had 54 registered in-house foster carers plus 22 connected carers, 53 children were placed with 41 in-house foster carers and 30 children with connected carers, with a further 61 children placed with Independent Fostering Agencies and 70 young people in residential provision.

Children in Need (CiN)

In March 2018 there were 372.1 per 10,000 in Darlington identified as CiN compared to 330.4 England average and 451.6 in the North East. This is a 37.6% reduction in Darlington in comparison with the previous year. The percentage of children in need eligible for free school meals was 59.4% at the end of March 2018 compared to 50.4% in England. The percentage of CiN missing school sessions was 10.20 % which is lower than the England rate of 10.4%. No CiN have been permanently excluded from school during 2017-2018.

Child Protection Plans (CPP)

At the end of March 2018, 115 children were subject to a child Protection Plan (CPP) in Darlington (a rate of 51 per 10,000). The latest comparator figure available (31 March 2017) are 43 per 10,000 for England and 61 per 10,000 for the North East. In total, 138 children have become subject to a Child Protection Plan during 2017/18 after an Initial Child Protection Conference (ICPC). This is a 62% increase from the position at the end of March 2017, when the figure stood at 71 (a rate of 31 per 10,000), which was an extremely low rate when compared to national, regional and statistical neighbours.

Children aged under 10 years continue to form the largest group subject to Child Protection Plans. The risk factors associated with Child Protection show 68% were due to Neglect; 23% Emotional Abuse; 8% Physical Abuse and 4% as a result of Sexual Abuse.

Residential Care

The Council has three residential homes in Darlington which have all been judged to be 'good' by Ofsted. In addition to this the single establishment that provides specialised respite care for disabled children is judged to be 'Outstanding' by Ofsted.

Young People not in Education, Employment or Training (NEET)

Since September 2016 the requirement for monitoring those not in education, employment or training (NEET) has applied to 16 and 17 year olds and those 'not known' to the local authority.

The latest comparator data for January 2018 shows that in Darlington the proportion of NEET (including not known) stood at 4.00%, below the Tees Valley average of 5.4%.

The national data for 2017/18 is due to be published in October 2018.

Independent Reviewing Officers (IRO)

The Annual IRO report is produced by the Children's Safeguarding Unit (CSU). The service is responsible for Child Protection Conferences; Children Looked After Reviews; Annual Foster Carer Reviews; Adoption Reviews; Disruption Meetings and Reviews of children placed in Secure Accommodation.

Progress has continued to be made in response to the recommendations from the Ofsted Inspection in 2015 as follows:

- Ofsted Inspectors commented during Monitoring Visits that when poor practice was identified by Independent Reviewing Officers there was evidence of appropriate challenge taking place.
- Modifications to the case management system (Liquid Logic) allows tracking of the permanence decision at the 3 month Child Looked After Reviews and this is reported on in monthly Quality Assurance and Performance Clinics.

There were three areas identified last year that were reported to be under represented in relation to Child Protection Plans which were: Children with Disabilities; Physical Abuse and Sexual Abuse. The rate for Physical Abuse remains low however, there has been an increase in the other two areas.

For the year to 31st March 2018, 95% of children were subject to an Initial Child Protection Conference held within the prescribed 15 working days from strategy, with 100% of these conferences being held within timescales. Within this period, 100% of Child Protection Review Conferences were held within timescales.

The rate for children becoming the subject of Child Protection Plans (CPP) for a second or subsequent time (at any time) was 19%, which is in line with the England average of 19%, but higher than the regional average of 14% from the previous year (the most recent published data).

No children were subject of a CPP continuously for a period of two years or longer.

Parental involvement at Initial Child Protection Conferences, was 95%, and for Child Protection Review Conferences; 91%.

Areas for development in 2018/19 include:

- Develop business case for:
 - IRO Manager post and
 - Annual Foster Carer Reviewing Officer post
- Review and revise procedures for:
 - Dispute Resolution Process / mechanisms to evidence the impact of challenge made by IROs
 - Disruption meetings
- Develop forms within Liquid Logic case management system to support both processes (as above).
- Maintain the permanent appointments within the team and reduce previous reliance on agency staff cover
- Increase participation and attendance of young people and their families in child protection conferences
- Promote the take up of Advocacy services for children and young people.

The IRO Annual Report 2017-18 is available via the DSCB website.

Managing Allegations and concerns against staff, carers and volunteers- Designated Officer

All LSCB's have responsibility for ensuring there are effective procedures in place for managing allegations against people who work with children. The Designated Officer in Darlington should be informed of all such allegations and will provide advice and guidance to ensure all cases are investigated and resolved as quickly as possible.

Allegation management processes remain embedded in Darlington with a good level of awareness by professionals and the service appropriately used by partner agencies. The Designated Officer triggers a process of information sharing, review and investigation that triangulates any child protection/criminal offence concerns with HR and organisational responsibilities to ensure that the child is safe and the appropriate action is taken.

Summary

- There were 185 recorded referrals for 2017-18 which is an increase on the previous year of 35%, this is as a result of a change in the recording processes.
- Education establishments accounted for the largest referring group with 38.4% of the total referrals received, with referrals from other agencies accounting for 21.9% from the local authority, 23.3% from private sector and voluntary organisations, Police 7.6% and Health 3.2 %, the remaining 6.5% of referrals were from a variety of

organisations such as Ofsted, the NSPCC, the faith sector or private individuals/organisations.

Categories of concern

- The majority of referrals involved allegations of physical abuse (41.6%) or allegations about the conduct of the individual (31.4%) sexual nature amounted to 13.0%, emotional abuse 6.5 % and neglect 7.6%.
- Education received the highest number of referrals for allegations (36%) followed by private residential settings.

Outcomes of allegations

- Allegations are resolved in a timely manner with 69.2% of total cases being resolved in one month and 85.1% of cases resolved in 3 months.
- 11.4% of allegations received were substantiated, leading to subjects being either been convicted, de-registered or dismissed through disciplinary processes. 24.3% were unsubstantiated. 11.4% of cases were recorded as unfounded and 41.1% of cases recoded for information purposes only. The remaining were ongoing and not finalised or had occurred 'out of area'.

Awareness Raising

- The Designated Officer continues to focus on awareness raising across different partnerships and settings about the statutory arrangements for managing allegations.
- Training remains a vital part in ensuring referrals are made and advice is sought when appropriate.
- It is the responsibility of the Designated Officer to liaise with relevant regulatory bodies including Ofsted to raise safeguarding concerns.

Regional and National Links

- The Designated Officer continues to be involved with the regional Designated Officer network which meets quarterly.
- Work is continuing both regionally and nationally to establish a set of National Designated Officer standards, this is welcomed as it is felt there is currently insufficient guidance to support the Designated Officer role and this would at least provide a minimum standard of practice.

The Designated Officer was interviewed during the Local Authority Ofsted re-inspection in March 2018. The report stated:

The local authority's designated officers ensure that prompt and effective action is taken when allegations are made against professionals or persons in positions of trust. This ensures that children are safeguarded. However, case progress is not always monitored in a timely way, although this has not left children at risk, and decisions about outcomes are made jointly with appropriate partner agencies. Work to engage faith communities other than Christian groups has not been effective.

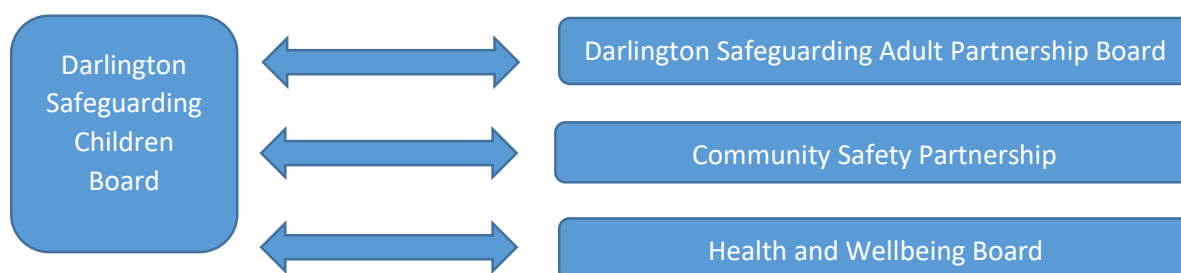
Measures are being implemented to ensure case progress is monitored in a more timely way and further exploration on how to engage with faith communities will be undertaken in the next reporting period.

A full analysis of how allegations against staff have been managed in the Darlington can be read in the **LADO Annual Report 2017-18** which is available on the DSCB website.

Darlington Safeguarding Children Board Governance arrangements and Strategic Partnership Links

The Local Strategic Partnership

The DSCB continues to work in partnership with three key Strategic Partnership Boards to ensure strong joint working arrangements across agencies which coordinate the vision, aims and priorities for Darlington and its population, ensuring the effectiveness of local safeguarding arrangements for children and young people are threaded throughout.



[The Darlington Protocol](#) was launched in November 2017 and outlines the relationship between the DSCB and other strategic partnerships. It is recognised that each Partnership Board has its own governance and priorities, the protocol promotes effective ways of working to deliver the strategic outcomes, reflecting that “safeguarding is everyone’s business”.

Safeguarding is a responsibility that runs through all Boards but it is the responsibility of the two Safeguarding Boards to call the other partnerships to account. There are a number of areas of common interest where the named Strategic Boards need to ensure that leadership and accountability is clear and that information is effectively shared. The respective chairs have agreed to meet at least twice a year to plan and coordinate activity.

Membership of the Board crosses over that of the Darlington Partnership and Local Family Justice Board which greatly assists awareness and coordination.

During 2017/18 DSCB has been involved in joint work with the Community Safety Partnership including safeguarding and seeking assurance that services are coordinated and accessible to Gypsy, Roma, and Travelling families in Darlington (GRT). A network of service providers, commissioners and key wider partners met in January 2018 to share information and establish clear contact routes for partners working with GRT families. The meeting recognised that safeguarding practice and risk assurance applies across all minority groups with partners having key roles in articulating the routes of risk assessment.

The local partnership has proposed a focus on Domestic Abuse and Sexual Violence in the coming with the aim of reducing the prevalence of domestic abuse and identify the co-ordinated community response on prevention, support and protection services, as well as establishing how perpetrators are dealt with.

Another illustration of the link between the strategic partnership, was following a report to Board from the Chair of the Child Death Overview Panel (CDOP) which had conducted a thematic review of certain child deaths in Darlington and Durham and where modifiable factors were present. In particular DSCB expressed significant interest in two aspects of the report which it saw as significant commissioning issues concerned with obstetric and acute paediatric service capacity. The Board were enthusiastic to ensure that the benefit of the thematic report was accessed by all relevant health services within the region, and sought the support of the Health and Wellbeing Board in its strategic commissioning capacity to take matters forward and to make representation to Commissioners and NHS (England). As a result NHS (E) Director of Commissioning agreed to meet with the Chair of the Darlington Health and Wellbeing Board, DSCB Independent Chair and Chair of CDOP.

The Independent Chairs of both Safeguarding Boards will present their annual reports to the Health and Wellbeing Board and will ensure there are relationships with the Community Safety Partnership. The Safeguarding Boards will share their annual plans for the next twelve months to ensure co-ordination and mutual understanding.

Governance

The Board continues to enjoy strong participation from partners at an appropriate level, and attendance at Board meetings is generally good, However the Board's own improvement plan governance arrangements are reviewed annually to avoid duplication and create clarity in the respective responsibilities of both Board members and advisers.

The consistency of the Independent Chair has allowed the Board to concentrate on current achievements and progress on priority areas.

The Board continues to operate through its sub-committees which have been subject to some refinement, to ensure that they remain focused on the Boards current priorities. Sub-committee chairing arrangements continue to be strengthened to provide a balanced multi-agency leadership team and to further support these arrangement, the Business Management Group, which comprises the Independent Chair, All Sub-Committee Chairs, Lay member and the Board Business Manager, continue to focus on the strategic work of the Board and has a key role in terms of the quality assurance and quality control and will discuss routine business such as budgets and risk registers.

Membership and Structure

The DSCB [Constitution](#) sets out the governance arrangements and standards for Board members. The Board is a two tier structure (diagram 1 below) and is supported by the joint Safeguarding Board's Business Unit.

Diagram 1



The Board is made up of key strategic leads from across the key partner agencies that work with children, young people and their families in Darlington and have a role in Safeguarding. Board members are of sufficient authority to hold their organisations to account.

The DSCB is independently chaired by Simon Hart who has been Chair since September 2016. The Vice Chair is Diane Murphy, Director of Nursing and Quality, Darlington Clinical Commissioning Group.

There are two Lay members appointed to the Board. The role of the lay member is to help to forge the links between the Board and the local community, support stronger public engagement in children safeguarding issues and improve public understanding of Safeguarding Children. They also play an active part in the oversight and scrutiny of decisions and policies made by the Board to help shape safeguarding policy and practice.

The Board met on five occasions during 2017-18. For detail of the Board and attendance – see **Appendix 1**.

Six sub-groups and a business group report to the Board. Their purpose is to deliver on the key responsibilities and priority areas agreed by the Board. Each subgroup has developed detailed work plans that are SMART and provide highlight reports to Board on the progress against their work plans, including any risks and issues identified. In addition the sub-groups may initiate time-limited task and finish groups on specific pieces of work to enable the Board to successfully meet its strategic objectives.

The focus of each of the sub groups are as follows:

- **Quality Assurance and Performance Management Sub Group:** developing a clear understanding of the Safeguarding 'profile' of Darlington and how the respective agencies are performing to meet those needs. This group is responsible for reviewing data, trends, key performance indicators and the results of audits that have been carried out. The group will quality assure practice through analysis of single agency and joint agency audit of case files and will identify good practice as well as areas where improvement is required.
- **Case Review and Learning from Practice Sub Group:** consider cases identified for a statutory or a discretionary Serious Case Review (SCR), manage and oversee process, consider the learning from audits, multi-agency reviews, single agency reviews and national reviews to influence and inform multi-agency practice in Darlington.
- **Practice Development and Procedure Sub Group:** responsibility for the continued review of national legislation and government guidelines/recommendations and ensure that these are embedded in Darlington's policies, procedures and practice guidance to support practitioners working with children.
- **Missing, Exploited and Sexual Abuse Sub Group and Missing and Exploited Operational Group;** oversight of missing children, child sexual exploitation (CSE) and sexual abuse in Darlington to meet the needs of children and young people who go missing from home, care and education and those at risk of sexual exploitation and sexual abuse. The operational group discusses cases where

identified children and young people may be at risk of CSE or missing episodes and recommends action where necessary.

- ***Training, Communication and Voice of the User sub-group (joint group with Darlington Safeguarding Adult Partnership Board)***: develop training and development opportunities for the local workforce with the aim of developing practitioner skills and knowledge in order to achieve better outcomes for children. The communications and engagement strategy also enables the promotion of important safeguarding messages and to ensure training is updated in a timely manner with local and national learning.
- ***Child Death Overview Panel (Joint with Durham LSCB)***: undertaking a comprehensive and multi-disciplinary review of child deaths in order to better understand how and why children in County Durham and Darlington die and use the findings to take action to prevent other deaths.
- ***Business group***: with a focus of being the interface between the DSCB and the subgroups and supports the strategic work of the Board and has a key role in terms of quality assurance and quality control and will discuss routine business such as budgets and risk registers.

The achievements of the sub groups in 2017-18 are set out in - **Appendix 2**

Revenue

Member organisations of DSCB provide the Board with reliable resources (including financial) that enables the Board to be well organised and effective. Resources include staff time and additional support such as attending and contributing to the work of the Board. However, the revenue operating costs now exceed annual income and the Board has had to rely on its small reserve to maintain current levels of function. This is now an unsustainable position, Due to the transition to a Safeguarding Partnership as determined in the Children and Social Work Act 2017 contributions from constituent agencies will require reviewing. Strategic leads from the three statutory agencies: Durham Constabulary; Darlington Clinical Commissioning Group and Darlington Borough Council in for 2018/2019 will need to consider future arrangements, which will include consideration around the revenue and expenditure. For details of the revenue see **Appendix 3**

... so what have we achieved?

Effective safeguarding relies on the collective contribution of all of the multi-agency partners and the way that they are able to work in a complimentary way.

People who live in Darlington have access to a broad range of services, some of which cross boundaries with Durham, Teesside and North Yorkshire. Most services perform well with Tees, Esk and Wear Valley (TEWV) and Harrogate and District Foundation Trusts (HDFT) having 'good' inspection outcomes and in 2017 County Durham and Darlington NHS Foundation Trust was judged by the CQC as requiring improvement. Durham Constabulary achieving 'good' and 'outstanding' inspections in 2017.

Schools in Darlington generally perform well and of 5 inspections carried out in 2017/18; 2 schools received good or outstanding judgements and none were considered 'inadequate'. As at 31st March 2018, 5 schools have not yet been inspected, 9 were judged as outstanding, 19 as good, 8 as requires improvement and one school judged inadequate.

In addition the Community Safety Partnership (CSP) identifies Darlington as a safe place to live, with falling rates of crime and alcohol related anti-social behaviour.

During the year, DSCB continued to provide an overview of progress in response to the findings of the Ofsted Inspection of September 2015. DSCB faced the need to adopt a more proactive and inclusive approach in order to maximise the impact of a potentially strong Partnership. The Board was able to demonstrate the impact of improved outcomes for children and young people when a presentation was provided to the Improvement Board in September 2017 illustrating how DSCB delivers impact upon local safeguarding arrangements.

The Ofsted re-inspection of Local Authority services for children in need of help and protection, children looked after and care leavers was undertaken in the final weeks of the year (27 February to 22 March 2018). The overall judgement was that Children's Services in Darlington, requires improvement to be good. Key strategic partnerships have been refreshed and revitalised and improved working relationships with the police mean that there is an effective, joined-up response to child sexual exploitation and children who go missing from home, school or care, one that extends to children who are being electively home educated. There is effective engagement with the safeguarding agenda from education partners. More purposeful engagement with health services also has the potential to deliver better outcomes over time. The DSCB now provides strong and effective leadership across the multi-agency partnership. This will remain an area of close scrutiny for the Board.

The following sections of the report give a flavour of the Board's achievements and challenges over the year and identify the areas the DSCB will focus on in 2018-19.

The Board's Priorities

Achievements and Challenges

During 2016-2017, DSCB made the following achievements against the three priority areas as follows:

Priority 1 - Ensure effective arrangements are in place that enable children, young people and their families to access appropriate Early Help support when first identified and this support is well coordinated.

Early Help Offer

Throughout the year, the Board has heard how the universal offer for Early Help is impacting on multi-agency working arrangements in Darlington. An Early Help Strategic Group, comprising of agency partners which include, police, health, academies, voluntary sector and local authority, reviewed the continuum of needs document and referral form in April 2017. In 2017 an [Early Help Strategy](#) was developed which was ratified by Board in February 2018. The aim of the strategy is to:

- Support children and young people aged 0-19 and their families to become resilient and live as a family unit, building resilience and skills to manage the challenges of everyday life.
- Ensure that all partner agencies Think Family and quickly identify those who might need extra help.
- Ensure the coordination of services for those who require them, through the use of the Early Help Assessment and an agreed One Family Plan.

The multi-agency performance in achieving the outcomes of this Strategy will be reported as a partnership report to DSCB for periodic updates. The Strategy will be updated on an annual basis to ensure it reflects current needs of children, young people and their families and supports collaborative working.

The local authority has offered training to all organisations on the Early Help Process, paperwork and services available. A monthly audit has also been introduced to review the quality of Early Help assessments received from multi-agency partner agencies.

Board agreed on the importance of having sight of the impact of Early Help on children and young people using the scaling questions. It was also important to understand how Early Help Intervention has diverted children from Child in Need (CiN) and Child Protection (CP) intervention.

The Department of Communities and Local Government has produced a Transformation Model to support areas in developing Early Help Services as part of the Troubled Families Service Transformation by using a number of strands to explore the maturing of Early Help, it is proposed that this model will be used to develop a future position statement on the Early Help Offer.

Early help data

A total of 5044 contacts were received by the Children's Access Point (CAP) in the year 2017/18. A total of 1126 referrals were made to Children's Social Care during 2017/18; this is a reduction of 346 (23%) when compared with 2016/17 year end. The rate of referrals was 497.6 per 10,000, this is lower than the most recent national data (548.2 per 10,000), regional (599.6 per 10,000) and statistical (518.7 per 10,000) benchmarks. A total of 877 Early Help Assessments were completed during 2017/18 throughout the partnership.

Early Help Training

It was identified that over 150 practitioners accessed the Multi-agency early help training throughout 2017-18. The sessions were facilitated by Darlington Borough Council early help coordinator. The current offer of training is to be reviewed to determine if there is any further demand.

Domestic Abuse

The DSCB recognises that people have a right to live their lives free from violence and abuse. The Multi-Agency Darlington Domestic Abuse and Sexual Violence Plan 2017-20 ensures that agencies work together to reduce the prevalence of domestic abuse and to provide a coordinated community response which includes preventative, support and protection services and deals with perpetrators. The plan outlines the links with other local strategies including the Children and Young People Plan 2017-22, Health and Wellbeing Plan 2017-22 and the Neglect Strategy 2017-20. Safeguarding children is a shared responsibility and high priority for all agencies. Services must ensure adherence to safeguarding procedures which includes monitoring, reviewing and assessing their safeguarding processes. Throughout 2017/18 work continued to develop a Darlington data set of multi-agency indicators related to Domestic Abuse. A County Durham and Darlington report is a standing item at the County Durham and Darlington Domestic Abuse and Sexual Violence Executive Group (DASVEG). Further work will be carried out in 2018/19 to develop the data set which will be shared with the Performance Management sub-group.

The Community Safety Partnership (CSP) is a statutory partnership which ensures the links between key networks to address Domestic Abuse. A [protocol](#) was developed in 2017/18 to act as a link and mechanism for areas of common interest to be shared between the Safeguarding Boards, the Community Safety Partnership (CSP) and the Health and Wellbeing

Board. Domestic Abuse is clearly recognised as an area of common interest and further work is planned for 2018/19.

In 2017/18 the Community Safety Partnership (CSP) developed and approved a leaflet entitled [Domestic Abuse and the Workplace](#) which provides advice to employers about what should be done if an employee is experiencing domestic abuse and the resources which are available. The leaflet can be accessed on the [Safeguarding Board's website](#).

Multi-Agency Audit Programme

The multi-agency audit calendar continues to be revised in line with priorities agreed by DSCB. The Board continues to ensure that multi-agency audits are carried out and identify lessons to be learned as well as making recommendations for future improvements to improve multi-agency training as well as developing policy and procedure. The audit reports provided to DSCB inform them of the quality of work being undertaken and its impact on outcomes for individual children and young people.

DSCB will align the audit programme to ensure it will be inspection ready to focus on the introduction of the planned themed Joint Targeted Area Inspection (JTAI's). The JTAI examine how well agencies are working together in the local area to help and protect children. This will allow DSCB to continue to monitor and review practice but also support and enable the partnership to be inspection ready.

The outcome of the audits undertaken in this period are outlined below:

Child Protection Conference Observation

Members of the Quality Assurance and Performance Management sub group continue to observe Child Protection Conferences to review progress against previous audits to identify if practice has improved as a result and to identify areas of good practice or corrective action that may be required.

Pre-birth Audit

A pre-birth audit was undertaken during the period to seek assurances that the pre-birth assessments were understood, multi-agency procedures were clear and to identify any areas of learning and development for multi-agency partners.

The findings from the audit highlighted a number of strengths and areas for development across the partnership. A number of recommendations were identified to improve practice, in particular an imminent review of the unborn baby procedure and practice guidance. A multi-agency task and finish group was established to undertake this piece of work. The procedure and guidance will be published in the next reporting period. An action plan has been developed to monitor the recommendations from this audit.

Threshold Audit

A thresholds audit was undertaken into the number of referrals into the Darlington front door to ascertain whether the DSCB Continuum of Need Level Indicators was being routinely applied by all referrers.

The findings acknowledged that although there were some limitations to this audit in respect of the number of cases audited and a new database being launched, the data obtained did provide some insight into the key lines of enquiry and a number of key recommendations for service improvement across the partnership were identified. Agreement for a new multi-agency referral form to be adopted to capture demographic information, family members, including significant others, consent and presenting issue with evidence of use of the Continuum of Need document. The new multi-agency referral form was adopted in June 2017 and the Continuum of Need was refreshed to include additional circumstances such as; child sexual exploitation, female genital mutilation; missing from home, care or education to support practitioners in making appropriate referrals.

Neglect and Sexual Abuse Audit

Relevant audits with regard to both Sexual abuse and neglect are scheduled to be carried out in the 2018-19 audit programme, this will also provide an opportunity to align the audits against the JTAI Evaluation Schedule Number (ESN's).

Multi-agency Safeguarding Audits (self-assessment)

During 2017/18, DSCB worked in collaboration with Darlington Safeguarding Adults Partnership Board (DSAPB) to conduct a robust self-assessment audit in accordance with the requirements of section 11 of the Children Act 2004, section 175 of the Education Act and Working Together 2015 to safeguard and promote the welfare of children.

The audit framework was adapted from previous years to ensure the process was more robust. The Board was then able to seek assurance through scrutinising local arrangements and assessing whether partners were fulfilling their statutory obligations with due regard to the need to safeguard and promote the welfare of adults with care and support needs.

A more rigorous process was implemented with the inclusion of a moderation process. The audit extended beyond the statutory partners and for the first time included charitable and voluntary organisations, faith settings and GPs to allow the Board to assess the effectiveness of safeguarding children within Darlington and support agencies to develop action plans where necessary.

The purpose of the audit was to seek assurance that safeguarding arrangements are robust across all sectors in Darlington and that agencies have comprehensive arrangements in place to deliver their safeguarding responsibilities and that they are able to provide evidence that these arrangements are effective.

The audit was conducted between May and July 2017 and the responses to the audit were overwhelmingly positive. Analysis of the audit returns and the moderation process provided evidence that the principles of safeguarding are embedded in practice and are effective in promoting the safety and welfare of children and adults at risk in Darlington and the majority of organisations can demonstrate they have appropriate safeguarding arrangements in place which are effective and are compliant with statutory requirements. The findings of the safeguarding audit were reported to Board in March 2018 and to the [Health and Wellbeing Board](#) in May 2018.

It was highlighted that a number of sport and voluntary organisations did not respond to the audit request and this is being followed up. The Quality Assurance and Performance Management sub-group will review the emerging issues to build on the assurances and provide updates to Board.

In conclusion Board can be assured that safeguarding arrangements are robust and that the investment of time is worth the outcome.

Child Protection Procedures



The multi-agency [Child Protection Procedures](#) were revised and refreshed in June 2017 and provided in a new online version which replaced all previous procedure manuals.

The procedures will be updated on a rolling programme or reviewed earlier when changes to practice or statutory guidance are identified.

This provides Practitioners in Darlington an up to date web based solution that is accessible 24 hours a day from a range of devices.

Continuum of Need Indicators and multi-agency referral form



The multi-agency [Continuum of Need Indicators](#) (Threshold Tool) were also revised to incorporate additional circumstances to support practitioners when considering making a referral. The multi-agency child protection [referral form](#) has also been updated to map against the new social care system (Liquid Logic, implemented in October 2016 and early help documents).

Policy, Procedure and Practice Guidance

In 2017-18, DSCB revised and reviewed the following policies, procedures and practice guidance to support practitioners working with children:

- A new online version of multi-agency child protection procedures
- Continuum of Need Indicator (Threshold Tool)
- Multi-Agency Referral Form
- Operation Encompass Protocol
- Self-Harm Pathway
- Fabricated or Induced Illness Practice Guidance
- Organised and Multiple Abuse Procedure and Practice Guidance
- Child Death Overview Panel Procedure
- Sudden Unexpected Death in Childhood (SUDIC) Procedure
- Children Missing from Home, Care and Education (procedure and guidance)

- Child Sexual Exploitation Procedure and Practice Guidance
- Safeguarding Children from Dangerous Dogs Practice Guidance
- Female Genital Mutilation Practice Guidance
- Procedure and Practice Guidance for Managing Allegations against staff and volunteers working with children
- Child Protection Processes – Glossary of Terms
- Private Fostering Guidance

Priority 2 – Ensure effective arrangements are in place to protect children from neglect, abuse and child sexual abuse

Neglect

As part of the Joint Targeted Area Inspections and ongoing assessment and understanding of the multi-agency response to keep children safe in Darlington in 2017/18 strategic managers from the partner organisations undertook an assessment of the strengths and areas for development in relation to children at risk of or subject to neglect.

Each organisation provided a robust self-assessment of their strengths and areas for development in relation to Neglect to inform the holistic self-assessment which informs action planning for improvements going forward.

A Neglect Strategy is currently being developed which will set out the strategic aims and objects of the multi-agency approach of tackling neglect to support partners to work together to reduce the impact of neglect on children in Darlington. A delivery plan and revised practice guidance will also be developed with assigned leads to further support practitioners. These will be presented to board for endorsement in the next reporting period. A multi-agency audit on Neglect is scheduled for completion in quarter 3.

Case reviews

Reviewing and learning from serious incidents is a crucial aspect of good safeguarding practice and requires leadership from senior managers across all organisations involved. In February 2018 a joint Children’s and Adults workshop was held to allow senior managers across the partnership with responsibility for safeguarding in Darlington to examine how reviews can be used to identify and embed learning. The review also considered whether both the decision to conduct a review and the review process itself is cost effective and leads to change that would make a positive difference to adults and their families. The Learning and Improvement Framework will be reviewed and updated in 2018/19 and will incorporate any good practice identified through the implementation of the Children and Social Work Act 2017. The protocol will consider the interface between other reviews and

parallel processes which may run concurrently with a SCR (such as a Coroners inquiry or Domestic Homicide Review) and how the processes can work more efficiently.

The purpose of any review is to identify learning that will bring about improvements in safeguarding practice so that the likelihood of future harm to children is minimised. Examples of good practice can also be considered to identify learning that can be applied to future cases.

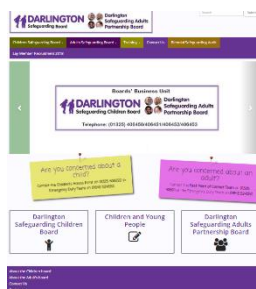
In 2016/17 DSCB undertook two Learning Lessons Reviews (LLR) which were carried out under the Significant Incident learning Process (SILP). Action Plans were developed and monitored by the Case Review and Learning from Practice sub-group (CRLP). The key learning points were communicated across the multi-agency partnership workforce. In June 2017 a Serious Case Review was commissioned by DSCB, the learning from this review will be reported in 2018-19.

In June 2017 an extraordinary meeting of the Case Review and Learning from Practice group was held to consider learning and challenge in respect of concerns raised about the professional response to a minor highlighted from an Adult Lessons Learned Review. A series of recommendations were identified which were compiled into an Action Plan, the action plan is being monitored by the CRLP.

Also during this period the CRLP group were informed of a case that was being discussed through the Child Death Overview Panel. As a result a learning lessons review was commissioned by DSCB, the learning from this review will be reported to DSCB in 2018-19. In addition, a separate review of the current notifiable Incident process is to be undertaken which is to take account of the way in which this particular case was handled, the learning will be shared with board in the next reporting period.

Communication and Engagement

Work was undertaken throughout 2017/18 on developing a forward plan of how the partnership will raise awareness of safeguarding. A communication workshop was held in October 2017 which identified that there appears to be strong partnership working amongst the communication and media representatives within each partner organisation. Key links have now been embedded between the business unit and the communication and media teams within each organisation to ensure key messages are shared when appropriate, using various means of communication including social media.



The Board is currently reviewing the joint Communication and Engagement Strategy which sets out the strategic approach of both Safeguarding Boards to ensure that the work of the Boards is effectively communicated to children and young people, adults at risk, families and the wider community. The Board publishes a bi-monthly messages bulletin which highlights key messages and communicates the work carried out by the Board. This has improved communication with practitioners throughout the partnership and highlights the purpose of Safeguarding Boards' website where it is accessible to the wider public as well as

practitioners and partner agencies. The newsletter is also circulated electronically throughout the partnership via the communications teams.

The board continues to produce a Learning Digest, which shares the thematic learning from local, regional and national case reviews, this is accessible to all agencies across the multi-agency partnership and is used to help inform practice development.

The board supported a number of national campaigns throughout the period which included:

- Safer Internet Day
- Child Sexual Exploitation Awareness Day
- DFE National Campaign – ‘TOGETHER WE CAN TACKLE CHILD ABUSE: ‘IF YOU THINK IT REPORT IT ‘
- Independent Enquiry into Child Sexual Abuse – Truth Project
- National Safeguarding Week

Throughout 2017/18 The Independent Chair has continued to host multi-agency Practitioner Forums which strengthen the understanding and dialogue between practitioners and the Board and ensures that Board members have up to date perspectives of the experience of practitioners working in Darlington. The Forums have been well attended by a broad section of partner agencies and the general consensus suggests that the forum serves a useful purpose, practitioners appreciate the opportunity to raise issues in a non-threatening or contentious way and through the Board feedback, managers appear to appreciate the early alerts that may arise and the opportunity to intervene or take steps to seek assurance. A thematic report will be presented to Board in 2018-19 of the key recurring themes.

A challenge for 2018/19 for the DSCB will be to further develop the communication and engagement strategy, to strengthen links with the other sub-groups to ensure that policy changes, learning and national good practice are shared throughout the partnership and to establish links with media teams throughout the partnership to raise awareness of safeguarding in Darlington.

Young People’s Conference 2017

Following the success of the 2016/17 Young People’s Conference, in July 2017 the DSCB and multi-agency partners including the Durham Constabulary ERASE (Educate and Raise Awareness of Sexual Exploitation) team hosted the second Young People’s Conference which was attended by 79 young people aged 13-15 from eight secondary schools in Darlington. The format of the conference was designed by young people and concentrated on the following topics:

- What is Child Sexual Exploitation? - an introductory workshop exploring the effects of CSE by the Rape and Sexual Abuse Counselling Centre
- You and your Digital footprint- a workshop facilitated by the Darlington Borough Council Targeted Media Youth Worker

- Emotional wellbeing and resilience- a workshop facilitated by a consultant clinical psychologist

The young people engaged well in the workshops and were asked to display the important messages they had learned from them. They were encouraged to think about how they could promote the messages within schools. The pupils were also asked to complete a short survey to establish what makes them feel unsafe. The main theme was community safety with examples of drug and alcohol misuse in public areas. Feedback from the young people and teachers was overwhelmingly positive and will inform the agenda for the 2018 conference.

Workforce stability

In July 2017, Board members were provided with an overview of the multi-agency position in relation to workforce stability across the CCG, Durham Constabulary and Darlington Borough Council as it was recognised that any fragility in the multi-agency workforce may impact on safeguarding. The Board commissioned the report to understand which areas of the workforce are stable and to establish whether there are issues which may impact in the future. Board members were provided with assurance that all organisations have robust workforce strategies and arrangements in place to monitor staffing levels and workforce pressures. Proactive plans are in place across the partnership in relation to recruitment and retention of staff, including the promotion of the North as a place to live and work.

Training

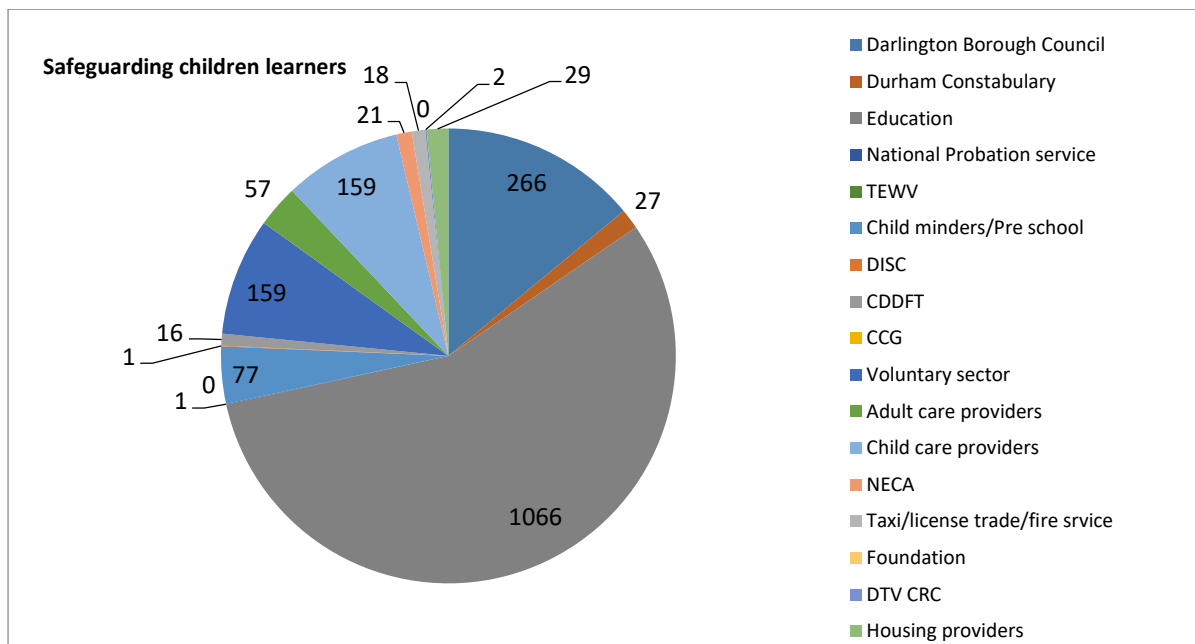
Safeguarding and promoting the welfare of children at risk of abuse is one of the key priorities of the Board and remains the focus of any DSCB learning and development activity across the partnership whether statutory, voluntary or independent sector.

The Board is committed to promoting a 'learning culture' and this is outlined in the Safeguarding Boards' Joint Training Strategy and is informed through the training needs analysis and feedback from training delivered. The Boards multi-agency Trainer has full access to performance data, information from lessons learnt reviews and audits to ensure the boards' training programmes are regularly updated to meet the needs of practitioners and managers. The training strategy underpins the Boards' priority to further strengthen practitioner's knowledge, skills and expertise in safeguarding children and promoting their welfare. The Board receives an Annual Training Report which for 2017/18 confirmed:

- All delegates who completed the post course evaluation, three months after the course stated that their confidence and skills had increased.

- The Boards' have seen a significant increase in the training income from £5,620 to £13,540 which is a result of additional bespoke training sessions
- An increase in specialist training for conferences and core groups

The chart below outlines the attendance for face to face children training accessed by partner agencies during the period April 2017 to March 2018.



In addition to face to face training, a number of e-learning packages were completed during the year. A number of free e-learning courses are available on the Safeguarding Boards website which include: Forced Marriage; Female Genital Mutilation; Understanding Young Minds, Mental Capacity Act (MCA) for 16 and 17 year olds; Local approach to tackling Child Sexual Exploitation and PACE (Parents against Child Sexual Exploitation) 'keep them safe' resource.

Further information can be found in the Training Annual Report 2017/18 which is available on the [Safeguarding Boards' website](#).

Child Sexual Exploitation (CSE) and Missing Children



The Missing Exploited and Sexual Abuse sub-group (MESA) has continued to be proactive in its work to identify and tackle Child Sexual Exploitation (CSE). Training has been delivered in schools with a number of CSE champions being appointed to raise awareness of CSE for young people and parents. There has been wider delivery of CSE training to a number of settings including Public Health, school nurses and Durham Constabulary. It has been identified that there is low reporting of male victims of CSE in Darlington and work is to be carried out with Manchester Barnardos to establish how male victims can be identified.

Durham Constabulary's initiative Operation Makesafe was implemented to co-ordinate prevent activities and awareness raising of CSE. So far bespoke training has been delivered to the hotel and hospitality industry and fast food outlets in respect of identifying potential victims of CSE and how to report concerns. An example of the impact of the bespoke training is evidenced by the case of a registered manager of a Children's Residential Home in Darlington who was challenged by a hotel receptionist when she made a reservation for a young person and two support workers. The receptionist undertook appropriate checks and refused to accept cash payment for the reservation. This case has been highlighted as an example of good practice. Update reports on progress of Operation Makesafe will be provided to the Missing Exploited and Sexual Abuse Group.

The Missing from Home, Care or Education Procedure Guidance regards return home interviews has been amended and the process for return home interviews of children who are missing has improved. All return home interview outcomes are now shared with the ERASE team for assessment and analysis. The process of sharing information is now more efficient with the Vulnerable Child (VC) forms being shared with the Children's Access Point (CAP) immediately to ensure that the return home interviews are completed within 72 hours. This has resulted in earlier intervention for children at risk.

CSE Training and related training

CSE awareness training continues to be incorporated into the multi-agency training programme and individuals can access free CSE e-learning via the Boards' website and/or attend class room based training. In 2017/2018 a total of 203 individuals received either classroom based training or accessed e-learning course for CSE, training has been delivered

to set the standards for the local approach to CSE and the training highlights male victims using an activity around misconceptions and the real picture.

Training specifically aimed at local taxi drivers as part of their license conditions is also delivered with further training delivered to door staff and publicans and CCTV operators in Darlington. In the coming year further training will be offered to the night-time economy in Darlington.

Elective Home Education/Children Missing in Education

The DSCB is required to ensure that effective safeguarding mechanisms are in place for children who are home educated who may as a result be 'invisible' to services.

In January 2017 a multi-agency EHE monitoring group was established to consider all children on the EHE database and to share information to enable safeguarding decisions to be made and individual cases to be escalated when appropriate. Initially the database was shared with police and health to verify and complete checks on all names and addresses, In April 2017 it was identified that 122 children in Darlington were being home educated with 15 of these children not being seen by services during the previous eighteen months. The monitoring group has good multi-agency attendance which includes; local authority, police, health, traveller education, housing and social care. The Education Safeguarding Officer/CME Officer (Darlington Borough Council) provides regular updates to the police. The local authority has also commissioned a dedicated nurse to work specifically with EHE children.

The Home Secretary has been briefed in respect of the work undertaken in Darlington for EHE and it has been highlighted as good practice. There is more work to be undertaken to identify which schools have increased numbers of EHE and which children have never attended education; steps will be taken to ensure that all home educated children are seen.

Performance Management and Quality Assurance

DSCB continues to monitor and develop the quality, timeliness and effectiveness of multi-agency practice through the Performance Management Framework. The multi-agency dataset was revised during 2017-18 to capture the journey of the child.

A particular focus during the reporting period was undertaken for children on a child protection plan following variations in the numbers, identified within the performance data report. A report was presented to Board in October 2017 on the current position of children subject to a child protection plan, the reason for the variations and overall number which had been particularly low (31 March 2017) and out of sync with statistical neighbours and the national position.

Members were advised of three significant periods of variation, which correspond with Baby P (2009), introduction of the MASH (2013) and Ofsted inspection (2015). The number of children on a child protection plan in Darlington is cyclical and is currently on an upwards trend towards a healthier position.

Board were assured that the report clarified the reason for the recent significant decrease in children on a child protection plan in Darlington and agreed for the QAPM to continue to monitor and scrutinise the data. In the year the numbers increased and have now stabilised.

The timely delivery of Initial Health Assessments (IHA) had been a long standing concern for the board and work has continued throughout the year. Health partners and the local authority have made progress and improved the overall position in children attending for appointments within 20 days of coming into looked after care. There has been an improvement in the compliance of the 20 day statutory timescale and a greater understanding of the multi-factorial aspects that contribute to non-compliance which has led to an improvement in the processes of the current pathway. Both partners are now working much closer together to ensure 100% compliance and continue to recognise IHA as important safeguarding triggers.

CSE and Missing from Home data continues to be monitored through the Missing, Exploited and Sexual Abuse sub group. The data highlighted the number of missing episodes had reduced by 50% since the beginning of the year. The high numbers seen at the beginning of the year were as a result of the high number of missing episodes which involved children placed in Darlington from other authorities. This number was reduced as a result of ERASE team, Barnardo's and local PCSO's working closely with Children's Homes Managers and Senior Managers in the placing authorities to ensure strategies were in place as well as ensuring placements were appropriate to meet their needs of the young people. Missing from home interviews were completed in over 90% of cases.

All young people at medium or high risk of CSE are supported by Barnardo's and offered a programme to raise their awareness. The number of cases remain low, however 50% of the cases are Looked After Children, with the other 50% being supported through a Child In Need Plan. Partnership working has developed with the monthly Missing Exploited Group working closely with partner agencies to make decisions from a multi-agency prospective.

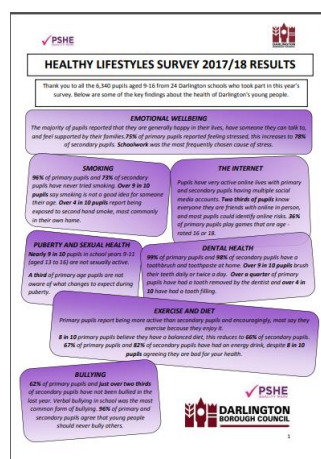
The percentage of males referred to the service has been noticeably low, which is contrary to the national average which is 33%. Boys and young men are often perceived to be at less of a risk and often go down the criminal route. This will continue to be monitored to establish if any areas need additional awareness raising to in relation to recognising signs and symptoms of CSE. The source of referrals has been collected and there is a significantly low referral rate from health professionals. A programme of briefings to be explored to specifically target health professionals to explore their awareness of cases where there may be a risk of CSE

Priority 3 – Ensure partners work together to protect children from harm and ensure the voice of the child is evident in all multi-agency work

The board continues to develop a coordinated programme of important messages aimed at children, young people and their families. During the year the board supported a number of campaigns including: Child Sexual Exploitation, Water safety and Bullying.

Children and Young People’s view of their lifestyle

For primary school aged pupils the relevant findings in respect of safeguarding shows a growing influence of social media even in the lives of younger primary aged children, and evidence of young children having largely unrestricted access to the internet and social media. The responses from young people indicate that they are using social media as part of developing and maintaining their friendships and relationships. However their responses also show the potential for harm, with many reporting bullying via the internet and others reporting they are making friends on social media with people that they have never met. This presents significant new challenges in keeping young people safe.



For those attending secondary schools, the majority reported they had experienced bullying with a significant minority reporting on-going bullying. The majority of bullying is reported to occur in or around school however cyber bullying is the next most common area.

Young people report high levels of awareness of the risks of using social media and the majority report some protective behaviours online, however, nearly all of those who responded reported having been upset by something they had seen online.

The majority of this age group reported negative attitudes towards smoking, alcohol consumption and taking illegal drugs. Most young people had never or rarely smoked, consumed alcohol, taken drugs or had sex and their responses showed high levels of knowledge and awareness of the information and health messages related to these behaviours.

A minority of this age group reported that they are sexually active, there was evidence that they had low levels of understanding about safe sex and avoiding risk.

The survey also shows that on the whole these young people feel happy in their lives and relationships and feel supported by their family and other significant adults. Nevertheless they report an increasing impact of stress on their lives, largely from activities and pressures relating to school, their studies and their emotions.

The full findings of the results can be accessed via [Darlington Borough Council's website](#)

Operation Encompass

Operation Encompass was launched in Darlington in January 2017 to address shortcomings in the early sharing of information with schools to enable them to provide proactive support to children and young people who are affected by domestic abuse within the family home. Notifications are now being forwarded to all schools in Darlington in relation to any high risk domestic abuse incidents attended by the Police. During the period April 2017 to March 2018 there were 158 incidents which involved 233 children that were notified to schools.

Training has been delivered to schools with 46 staff attending as well as training sessions delivered to 11 schools aimed at full staff teams.

Analysis of the impact of Operation Encompass within Darlington will be conducted in the autumn of 2018 and will be included in next year's annual report.

The Board can be assured that any high risk incident involving domestic abuse reported to Durham Constabulary will involve specialist staff who will identify the school the child attends to make contact to communicate relevant and necessary information to enable the school to support the child/young person appropriately.

Teesside University is co-producing a process evaluation of the project alongside Durham County Council Public Health. Ethics approval for the study has recently been obtained and work is about to commence on focus groups for those involved including partners, stakeholders and the schools. The evaluation will help to identify areas of good practice or areas requiring some improvement, which will be shared with Board in due course.

Operation Artemis

Operation Artemis has been introduced and focuses on tackling and disrupting offenders and dangerous perpetrators. This complements the work of **Operation Makesafe** targeting hotspot locations and awareness raising work protecting young people.

Operation VISTA

Operation Vista was launched by Durham Constabulary in July 2017 in response to non-recent allegations concerning Child Sexual Exploitation (CSE) for a number of potential victims in Darlington. Following the emergence of the police intelligence the case was escalated by Children's Services to an Executive Strategy Meeting and a multi-agency investigation commenced. A number of male suspects were arrested and interviewed but

there were no prosecutions in respect of the investigation as it did not reach the evidential threshold. All families involved in the enquiry were offered additional support by Barnardos. The learning from the operation will be reported to DSCB in 2018/19.

Modern Slavery- Operation PISA

Operation PISA was launched by Durham Constabulary to assess and disrupt Organised Crime and investigate potential Modern Slavery Offences. This originated from Operation Vista, as identified above and the operation allowed Durham Constabulary and the partnership to demonstrate commitment to the investigation of Modern Slavery offences and tackling and disrupting Organised Crime Groups who seek to use vulnerable people in their businesses. A successful media campaign allowed Modern Slavery to be publicised in the local area and to appeal for the public to report persons and premises of concern, this has resulted in an increase in reporting via the Modern Slavery Helpline. It also demonstrated strong partnership working to address this category of crime which cannot be tackled purely by the police. The operation was inspected by HMICFRS and found to be national best practice, mainly due to the early partnership approach.

The Practice Development and Procedures Sub group is developing a Modern Slavery and human trafficking protocol and practice guidance document (jointly with DSAPB) to support future operations. The lessons from Operation Pisa will be incorporated in the practice guidance.

Child Death Overview Panel (CDOP)

CDOP is a joint Panel with County Durham Safeguarding Children Board and Darlington Safeguarding Children Board and is a sub-committee of both Boards'. CDOP is responsible for reviewing the available information on all child deaths and is accountable to the Independent Chair. During 2017/2018 there were a total of seven child deaths, the number remained the same as previous year's data. Due to the low numbers reported, it is not possible to go into specific details to avoid any of the data being identifiable.

Professional Challenge and Impact of the Boards' work

Since September 2016 the Board have used a high level strategic challenge log to manage challenge posed to agencies through the independent chair and the Board network. In the year 2017/18, challenges have included:

- Board needing to be sighted on the effectiveness of CAMHS provision in Darlington and the assurance of impact and outcomes for children accessing the service
- seeking assurance in respect of safeguarding arrangements and the Gypsy Roma Traveller (GRT) community resulting in work being undertaken and in January 2018 a

network of service providers, commissioners and wider partners met to share information and create clear contact routes for partners and act as a reference point for the Safeguarding Boards, the Health and Wellbeing Board and the Community Safety Partnership

- concerns about the number of allegations reported to the Designated Officer and a peer on peer incident in respect of a service provider (not commissioned by Darlington)
- identifying external resources to develop the joint safeguarding Boards' website which resulted in discussions with Darlington College and the potential for a student to provide support as part of work experience
- improved multi-agency attendance at the Missing and Exploited sub-group (MEG) which resulted in training being provided on the updated CSE practice guidance including roles and responsibilities
- Timeliness of responses of notifiable incidents resulting in a review of the learning and Improvement Frameworks and Notification processes including the CDOP process
- a review of the current arrangements for the joint Training, Communications and Engagement sub-group resulting in a series of workshops to examine each aspect of the remit of the sub-group

Ofsted

The Ofsted inspection undertaken in the final weeks of the year (27 February to 22 March 2018) provided an overall judgement that Children's Services in Darlington 'require improvement to be good'. The report was published on 21 May 2018. Ofsted found that:

"Governance arrangements are robust. The Children's Trust arrangements have been incorporated into the Health and Wellbeing Board (H&WB) and there are clear lines of accountability and good communication, between the H&WB, the One Darlington Partnership Board, the Local Children's Safeguarding Board (LSCB), the Local Adults Safeguarding Board, the Corporate Parenting Panel and the Scrutiny Committee. By focusing on a small number of priorities for action each year, the local strategic partnership is able to demonstrate that it is having an impact on the lives of children, young people and families, including, for example, in relation to education, employment and training and domestic violence. The H&WB has actively embraced the Children and Young People's Plan. "

Key strategic partnerships have been refreshed and revitalised. Good working relationships with the police mean that there is an effective, joined-up response to child sexual exploitation and children who go missing from home, school or care, one that extends to children who are being electively home educated. There is effective engagement with the safeguarding agenda from education partners. More purposeful engagement with health

services also has the potential to deliver better outcomes over time. The LSCB now provides strong and effective leadership across the multi-agency partnership.

..... and what do we plan to do next?

As the Board makes progress with its own improvement and effectiveness, it will be necessary to ensure the transition from LSCB to Safeguarding Partnership and Child Death Review Partners.

The Board has introduced a forward plan which enables a sensible approach to the way in which the Board deploys its limited resources and time. However there remains much to do and the Board is also determined in its intention to concentrate less on building governance and much more on understanding and challenging impact.

Under the Children Act 2004, as amended by the Children and Social Work Act 2017, LSCBs, set up by local authorities, will be replaced. Under the new legislation, the three safeguarding partners (local authorities, chief officers of police, and clinical commissioning groups) must make arrangements to work together with relevant agencies (as they consider appropriate) to safeguard and protect the welfare of children in the area.

At the time of writing, the draft regulations governing the setting up of these arrangements, and a draft of a revised edition of the statutory guidance Working Together will be published in the summer of 2018. Transitional guidance will also be published to support LSCB's through the new arrangements.

There has been little substantive discussion as yet about the form these new arrangements might take in Darlington, the view that such discussion is likely to prove premature without sight of the proposed regulations and statutory guidance.

The three safeguarding partners will address the transitional arrangements as outlined in the Children and Social Work Act 2017 and the new Working Together to Safeguard Children Guidance when published. The new arrangements will need to be in place by September 2019. The DSCB will continue to make decisions on initiating and publishing SCRs until the point at which Safeguarding Partner arrangements have been published and are in place.

The transitional guidance describes the arrangements which should be followed during the transition from the system of Serious Case Reviews to the new national and local review arrangements.

DSCB will continue to carry out all statutory functions, until the point at which the new safeguarding partner arrangements are in operation. In addition to the transition to the new arrangements, work will continue on the Board's three year forward plan:

Priority 1 - DSCB ensures effective arrangements are in place that enable children, young people and their families to access appropriate Early Help support when first identified and this support is well coordinated.

Priority 2 - DSCB ensures effective arrangements are in place to protect children from neglect, abuse and child sexual abuse.

Priority 3 - DSCB ensures partners work together to protect children from harm and ensure the voice of the child is evident in all multi-agency work.

Appendix 1

Board membership - The attendance of each Board member at the bi-monthly meetings is indicated in brackets within the table.

Current Membership	Representative
Safeguarding Boards'	Independent Chair (4)
	Lay Member (4)
Darlington Borough Council	Director of Children and Adults Services (4)
	Assistant Director for Children's Services (4)
	Assistant Director Commissioning, Performance and Transformation (3)
	Head of First Contact and Locality Services (4)
	Lead Member Children and Young People (4)
	Chief Executive (1)
Principal Lawyer (4)	

	Public Health Director (5)
CAFCASS	Service Manager (2)
Education (Further Education) - Darlington College	Deputy Principal (4)
Education (Further Education)- Darlington College	Student Liaison Manager (4)
Education (Independent) - Priory Education	Head Teacher (0)
Education – (Academy) Longfield	Senior Assistant Headteacher (2)*
Education - (Academy) BR and H Academy	Headteacher (2)*
Education- (Academy) Hummersknott	Vice Principal (0)**
Education (non-maintained special School)- Education Village	Principal Beaumont Hill Academy (1)
Lingfield Education Trust	Chief Executive (1)**
Durham Constabulary	Detective Superintendent (5)
Durham and Darlington Clinical Commissioning Group (CCG)	Director of Nursing and Quality (5)
	Designated Nurse (3)
	Designated Doctor (2)
County Durham and Darlington NHS Foundation Trust (CDDFT)	Associate Director of Nursing for Patient Experience and Safeguarding (5)
Harrogate and District NHS Foundation Trust (HDFT)	Head of Safeguarding Children (5)
Community Rehabilitation Company	Director of Operations (3)
National Probation Service	Head of Durham NPS (3)
Tees, Esk and Wear Valleys NHS Foundation Trust (TEWV)	Associate Director of Nursing (4)
NHS England	Memorandum of Understanding
North East Ambulance Service	Memorandum of Understanding
British Transport Police	Memorandum of Understanding

* Change in membership- invited to 2

**Change in membership- invited to 3

DSCB sub-group achievements 2018-19**Case Review and Learning from Practice sub-group**

- Learning Lessons Review Child A and Learning Lessons Review Family B presented at the DSCB Extraordinary meeting on 2 May 2017. Cases concluded and Action Plans monitored by the group.
- MAPPA Training from MAPPA SCR arranged for October 2017.
- An extra-ordinary meeting was held on 15th June to consider a case for an SCR, the recommendations were made and agreement sought from the Independent Chair, the case met the criteria for an SCR. The first practitioner event was held on 22nd November and learning event held on 20 February, 2018.
- Extra-ordinary meeting held within timescales on 22 June 2017 to consider learning and challenge in respect of child safeguarding practice from Adult 2 LLR which was referred to DSCB Independent Chair from the DSAPB Independent Chair; group have developed recommendations which are to be ratified by the subgroup.
- Case considered for an SCR on 29th March, decision received from Independent Chair that the case did not meet the criteria for a SCR but will be included in other quality assurance activity such as a thematic neglect audit.
- Joint workshop on 7 February, 2018 with Adult Learning and Improvement Group to strengthen partner understanding of SCRs/SARs. The workshop was facilitated by Jane Wonnacott
- 5 minute reference guide has been drafted regarding Terms used within Child Protection processes for practitioner reference.
- Template agreed to communicate learning from LLR/SCRs.
- Attendance and meetings dates reviewed to ensure key members can attend such as Assistant Director for DBC and Head of Safeguarding, HDFT

Missing, Exploited and Sexual Abuse sub-group

- Review of Return Home Interview process and qualitative review/monitoring. All return home interviews are automatically shared with ERASE for assessment and analysis. More efficient information sharing process in place as VC forms for missing young people are shared with CAP immediately to ensure the return home interviews are completed within 72 hours. This has improved earlier intervention for children.
- Amendments made to the Missing from Home, Care or Education Procedure Guidance regards return home interviews (further detail added).
- Missing process review has been completed which included research around missing young people. This identified the push/pull factors for young people who go missing.
- Report from RESH (Relationships, Education and Sexual Health Coordinator)

Coordinator in Darlington – overview of prevention work being undertaken in Darlington with children and parents.

- CSE training delivered to a number of settings including Public Health, all school nurses in Darlington, special constables, neighbourhood police teams. Bus and train drivers are to receive train the trainer for CSE. There have also been a number of multi-agency CSE training sessions held. Local approach to CSE bespoke practitioner training completed.
- Development of a CSE E-learning package for dissemination to agencies across Darlington to update on the local approach to tackling CSE. The presentation consolidates the approved procedures, practice guidance, risk matrix and new definition.
- CSE champions- Training has been delivered in schools. There is a CSE champions network meeting to ensure champions are kept up to date.
- CSE posters circulated to GP surgeries.
- EHE. Problem solving work has been undertaken following discussions around the EHE data within the MESA performance data. There is now a HE monitoring group in place. The Home Secretary has been briefed in respect of the work undertaken in Darlington for EHE and it has been highlighted that every local authority and police force should be doing this. It was felt that there is still more work to be undertaken to identify which schools have increased numbers of EHE and which children have never attended education. This work will be managed by the EHE and updates to be fed into the MESA group.
- ERASE posters updated and re-circulated.
- Young Persons conference was held on 5th July 2017 and is to be an annual event.
- Operation Makesafe
- The origin of CSE referrals has been incorporated within the MESA performance dataset.
- Care home occupancy and notification work has been undertaken and arrangements with Ofsted arrangements improved to manage missing young people from care homes
- Appointment of 2 missing from home co-ordinators

Practice Development and Procedures sub-group

- Revised Child Protection Procedures launched on 1st June.
- Additional procedures launched including Organised and Multiple Abuse procedure and practice guidance, Fabricated and Induced illness practice guidance and CDOP Procedures.
- Ratification of the following procedures and guidance:
 - FGM
 - Dangerous Dogs
 - SUDIC Procedures

- Private Fostering Guidance
- Female Genital Mutilation
- Review of the Neglect Strategy including an action plan.
- Safeguarding the Unborn procedures updated to reflect the learning identified from the Pre-birth audit.
- Development Modern Slavery practice guidance (jointly with DSAPB) currently awaiting a Memorandum of Understanding developed jointly with County Durham Safeguarding Adults Inter-Agency Partnership and Durham Constabulary.

Quality Assurance and Performance Management sub-group

- Review of the multi-agency data set against the requirements of the Board identified from the strategic plan.
- Audit programme has been agreed and aligned to the multi-agency data set and board business plan with a focus on neglect as an area of concern.
- All agencies formally asked to relay 2017-18 audit programme to the Q&P sub group. Standard format template developed to assist this process.
- Threshold audit completed.
- Review of Self harm data for Darlington. No areas of concern specifically for Board.
- Multi-Agency safeguarding audit completed including moderation and analysis of the audit findings which were reported to Board in April 2018.
- Healthy Lifestyle Survey - Update from Catherine Shaw following a request from the group previously that they felt there were gaps within the survey (2016) on issues such as emotional wellbeing, sexting etc. Assurance was provided that emotional wellbeing, sexting etc. were incorporated within 2017 survey. Invitations were extended to members of the sub group to attend future stakeholder meetings to develop the 2018 survey.
- Presentation provided on Educational attainment for LAC from Calvin Kipling, Virtual Head Teacher for LAC. Concerns were highlighted in respect of the number of permanent exclusions for looked after children, (which is a national issue). Assurance was provided that this is being addressed by Virtual Head Teacher alongside the re-engagement officer. A self-evaluation good practice tool has been developed for use by schools to support the improvement of standards for LAC. Board endorsed the tool.

Training, Communication and Voice of the User sub-group (joint with DSAPB)

- Workforce stability report presented to Board
- Communications implementation plan agreed and developed
- Review and revision of the Communication and Engagement Strategy
- Review and revision of the Training Charging Policy
- Progression of the e learning package to incorporate PREVENT and CSE training

- Ongoing development of the Safeguarding Boards website and wider circulation of the safeguarding Boards' newsletter to share messages from the Board
- Ongoing review of the remit of the Training, Communication and Voice of the user sub-group

Child Death Overview Panel

- During 2017/2018 there were a total of seven child deaths
- A thematic CDOP review took place and a meeting was held to discuss wider system learning identified from themes in the review.
- An action plan has been developed to consider the future of CDOP NHSE are to lead on this work.

Appendix 3

2017/2018 Revenue		2017/2018 Expenditure	
Darlington Borough Council	£92,384	Salaries Inc. on costs	£116,105
Darlington Clinical Commissioning Group	£20,805	Officer Mileage and Travel	£556
Durham Constabulary	£15,473	Employee Insurance	£1,038
Schools Forum	£10,000	Hospitality and Room Hire	£3,860
Darlington College	£2,525	Membership and Subscription	£35
County Durham and Darlington NHS Foundation Trust	£2,525	Professional Fees	£18,882
Darlington Youth Offending Service	£2,500	Stationery	£121
Queen Elizabeth 6th Form College	£1,515	Printing Charges	£1,169
Community Rehabilitation Company	£1,000	Consultancy Fees	£16,887
National Probation Service	£770	Mobile phone costs	£673
CAFCASS	£550	Employee Training	£150
Course and Training Fees	£7,730	Misc.	£8
Refund	£1,500		
Total Revenue	£159,277	Total Expenditure	£ 159,484

Glossary of Terms

DBC	Darlington Borough Council
DfE	Department for Education
DO	Designated Officer
CAC	Child Advocacy Centre
CAFCASS	Children and Family Court and Advisory and Support Service CAMHS Child Adolescent Mental Health Service
CAP	Children's Access Point
CCG	Clinical Commissioning Group
CDDFT	County Durham and Darlington Foundation Trust
CDOP	Child Death Overview Panel
CHiMat	Child and Maternal Health Intelligence Network
CLA	Children Looked After
CME	Children Missing from Education
CSP	Community Safety Partnership
CSE	Child Sexual Exploitation
CYPP	Children and Young People's Plan
CQC	Care Quality Commission
DfE	Department for Education
DSAPB	Safeguarding Adult's Partnership Board
DSCB	Darlington Safeguarding Children Board
EHE	Elective Home Education
ERASE	Educate and Raise Awareness of Sexual Exploitation
FGM	Female Genital Mutilation
HMIC	Her Majesty's Inspectorate of Constabularies
HR	Human Resources
HWB	Health and Wellbeing Board
IHA	Initial Health Assessment
IPC	Intervene to Protect a Child
IRO	Independent Reviewing Officer
JSNA	Joint Strategic Needs Assessment
JTAI	Joint Thematic Area Inspection
LA	Local Authority
LAC	Looked After Child
LADO	Local Authority Designated Officer
LGA	Local Government Association
LSCB	Local Safeguarding Children Board
MASH	Multi-agency safeguarding hub

MEG	Missing and Exploited Group
MESA	Missing, Exploited and Sexual Abuse
NECA	North East Council for Alcoholism
NHS	National Health Service
NHSE	National Health Service England
NICE	National Institute for Health and Care Excellence
NWG	National Working Group
NPS	National Probation Service
Ofsted	Office for Standards in Education
PCVC	Police Crime and Victim Commissioner
PMQA	Performance Management and Quality Assurance
QA	Quality Assurance
SCR	Serious Case Review
SMART	Specific, Measurable, Achievable, Realistic and Time-bound
TEWV	Tees Esk and Wear Valley NHS Foundation Trust

All rights reserved/copyright statement:

© Copyright – Darlington Safeguarding Children Board 2016

This annual report is the copyright of the Darlington Safeguarding Children Board. Express permission for any use or adaptation of this report should be sought directly from the DSCB Independent Chair. Requests should be submitted in writing and e-mailed to the Boards' Business Unit.

e-mail: safeguardingboards@darlington.co.uk

or send to:

Darlington Safeguarding Children Board

Room 101, Town Hall,
Darlington,
DL1 5QT.

We have incorporated hyperlinks where possible to take you to additional information and/or further details, if you are not able to access this then please contact us to arrange for the information to be made available.

We would welcome feedback and this can be made to either the DSCB Independent Chair or by contacting the Board's Business Unit on 01325 406450, address and e-mail as above. If you require this report in an alternative format, please contact the Board's Business unit on contacts above.

This report is formally sent to:

- The Chief Executive of the Local Authority
- The Chair of the Health and Wellbeing Board
- The Police and Crime Commissioner Durham
- The Chief Executives of all organisations who sit on the Board
- Board member are required to promote and share the report within their own organisations

The report is published on the [DSCB website](#).

This page is intentionally left blank

CHILDREN AND YOUNG PEOPLE'S PLAN 2017- 2022 – PROGRESS REPORT

SUMMARY REPORT

Purpose of the Report

1. This report provides an update to the Children and Young People Scrutiny on the progress to date against the delivery of the Children and Young People's Plan 2017-22.

Summary

2. The Children and Young People's Plan (CYPP) is one of the identified delivery plans within the Sustainable Community Strategy (SCS) and identifies what key actions will be taken to deliver the agreed SCS priority of the best start in life for every child.

Recommendation

- (a) It is recommended that Scrutiny note the report.

**Suzanne Joyner
Director of Children and Adults Services**

Background Papers

No background papers were used in the preparation of this report.

Christine Shields: Extension 5819

S17 Crime and Disorder	N/A
Health and Well Being	Children's social care is central to well-being
Carbon Impact	None
Diversity	If significant changes are required an EIA will be undertaken
Wards Affected	All
Groups Affected	Children and young people
Budget and Policy Framework	MTFP
Key Decision	No
Urgent Decision	No
One Darlington: Perfectly Placed	Aligned
Efficiency	New ways of delivering support and care of the capacity to generate efficiency
Impact on Looked After Children and Care Leavers	This report impacts on all children and young people including looked after children or care leavers

MAIN REPORT

Information and Analysis

Summary

4. The CYPP 2017-22 was adopted by Council on 29th September 2017 and since being adopted a professionally designed version of the plan has been produced and published.
5. The front and back cover of the plan was designed by Jonathan Raiseborough, a young person with autism who is an award-winning artist who created a series of stunning illustrations for Darlington's new Children and Young Peoples Plan (CYPP).
6. The plan was officially launched via a photoshoot on the 16th March at Longfield School and a celebration event was also held on 11th April 2018. 147 children and young people attended the event.
7. The following agencies were present on the day of the event;
 - (a) **YMCA** – provided an information stall on the services and activities they provide with the main focus being around their new initiative in which they are working with young people to develop and provide youth venues and activities around Darlington.
 - (b) **DISC** – provided an information stall on their Young Carer project.
 - (c) **Switch** – provided information on alcohol and drug awareness.
 - (d) **Darlington Youth Partnership** – the newly elected member of Youth Parliament was present to promote the Darlington Youth Parliament, his manifesto and encouraged families to share any views on growing up in Darlington.

- (e) **Darlington College** – promoted college courses and provided the astronaut origami and helped children create their own cloud slime.
- (f) **Library** – provided an information stall on the activities and services provided at Crown Street and Cockerton Library. Children could also colour in and create a rabbit head band and were asked to draw round their hands in coloured paper, cut the hand out and attached it to a giant rainbow using the CYPP initials to form the rainbow.
- (g) **Scouts** – provided information on the scout movement in Darlington, how to get involved and what activities children and young people can experience as a scout.

8. In addition a number of local activity providers delivered the following activities:

- (a) Inclusion Archery, table tennis, boxercise, Cool Kids Yoga, BigLittleGigs.
- (b) Giana mandalas, Scrap Studio Arts.

Multi-Agency Steering Group (MASG)

9. Chaired by the Assistant Director for Commissioning, Performance and Transformation a multi-agency steering group (MASG) has been established to bring together key partners to ensure effective monitoring and delivery of the Children’s and Young People’s Plan, and to encourage and strengthen links between the plan and professional bodies. The delivery of the plan is not just the responsibility of the Local Authority but is partnership approach, owned by all stakeholders from a range of statutory agencies. This Group currently meets on a quarterly basis.

Delivery of the plan

10. The plan contains the following priority actions for the next five years:

- (a) Increase breastfeeding rates and reduce the incidence of smoking at the time of delivery.
- (b) Reduce obesity levels.
- (c) Improve the mental health and emotional wellbeing of all children and young.
- (d) Reduce the number of children and young people living in poverty
- (e) Improve school attendance and attainment.
- (f) Increase the number of young people in work, education or training.
- (g) Strengthen families to reduce the need for statutory intervention

11. As this is a five year plan, it was agreed by the MASG to have a year one focus on two of the priority actions and an action plan was developed. An update on progress is detailed below.

Priority 3: Improve the mental health and emotional wellbeing of all children and young people

12. A delivery plan has been developed for this priority, the lead for this is a member of staff from the NHS Clinical Commission Group (CCG) and a member of the MASG. Progress against the delivery plan is currently on track and is summarised below:
13. Darlington has participated in the Anna Freud School Link Programme which brings mental health leads from schools together with clinicians from specialist mental health services to work on joint solutions for improving the mental health of children and young people. A number of workshops have been held which were successful and improved relationships between the two partners and resulted in a comprehensive action plan to for continued improvement being developed.
14. There continues to be a strong social media campaign utilising posters and literature designed by young people from Darlington.
15. The results from the Healthy Lifestyle survey showed that the young people of Darlington generally feel happy. There is a small minority who do not have the protective factors; supportive family, safe environment, peer support, who report to be less happy. Improvement action plans are in place where necessary.
16. Darlington CCG is eligible to apply for the Trailblazer funding which is the government's response to the Green paper on supporting the mental health needs of children in schools. We are working as a multi-agency partnership to pull this bid together, submission date is 17th September 2018.
17. Initial discussions have been held with Workforce development to move towards a multi-agency training approach for mental health & wellbeing. This will ensure that all front line staff from a number of agencies receive training in identifying needs in children.
18. From September, plans are in place to develop, in partnership with schools, a bespoke webpage for schools and colleges to access with mental health links and guidance. A pilot will begin with CAMHS and Early Help in a small number of schools and Darlington are participating in the Anna Freud school link programme for the second time.

Priority 6: Increase the number of young people in work, education or training

19. Youth unemployment was selected as a priority for the CYPP Multi-Agency group following an analysis of data which placed Darlington in the top 10 local authority areas for the rate of 18 to 24 year olds unemployment claimants

20. Analysis was subsequently undertaken by the Policy Team to uncover the underlying reasons for this seemingly poor performance. This showed that Darlington is a net exporter of young people between the ages of 18 to 24 largely due to the fact there is not a university in the borough and once this was accounted for, Darlington is largely in line with the regional average for the proportion of young people who are unemployed.
21. The analysis also showed that there is a consistent cohort of approximately 500 young people claiming unemployment benefits, with around 40 per cent of this cohort claiming for longer than six months.
22. The underlying reasons for long-term unemployment of young people are complex, and often the result of issues experienced during childhood, such as growing up in households with generational unemployment, poor attainment at school and living in communities which feel disconnected from the local economy.
23. In light of these findings, it was agreed by the Multi Agency Steering Group that the priority of youth unemployment should be replaced by child poverty, which is often the root cause of many poor health and social outcomes and is projected to increase significantly over the next few years, both nationally and within Darlington.

Year Two Priorities

24. The priority actions for year two will be:

- (a) **Priority action 4** – Reduce the number of children and young people living in poverty (as mentioned in 13 above) and continue into year two with the
- (b) **Priority action 3** – Improve the mental health and emotional wellbeing of all children and young people.

Scorecard

25. A scorecard has been developed which contains a number of key performance indicators to measure delivery of the priority actions as detailed in the plan. The scorecard is attached at **Appendix One**.
26. Attached at **Appendix Two** is a summary of performance against each indicator within the scorecard. Overall when comparing performance against the last available data, 18 indicators have improved from the previously recorded data, 3 have remained the same and 20 have seen a reduction in performance. For 8 of the indicators 2017/18 data is the only data available therefore comparison with previous years is not possible. It should be noted that in most cases the performance indicators are outcome based and therefore not in direct control of those delivering services, many also require long term intervention in order to measure impact. On this basis it is not expected that the delivery plans will have a significant impact on these indicators within this first year of the plan, therefore these will be monitored over the five year period of the plan. Quarterly performance management is therefore focussed on the delivery plans against the priority actions and ensuring that they are progressing as expected.

CHILDREN & YOUNG PEOPLE PLAN - SCORECARD														Latest data compared to			
CYPP Number	CYPP Theme	Indicator Num	Indicator Description	What is best	Measure of unit	Latest England Av	Latest North East Av	Latest Stat Neighbour benchmark	2013/14	2014/15	2015/16	2016/17	2017/18	Previous data	Latest England Average	Latest North East Average	Latest Statistical Neighbour
CYPP 001	Breastfeeding & Smoking	PBH 013c	(PHOF 2.02ii) % of all infants due a 6-8 week check that are totally or partially breastfed	Bigger	%	44.40	31.40	31.49	35.27	34.23	33.60	34.30		↑	↓	↑	↑
CYPP 002	Breastfeeding & Smoking	PBH 014	(PHOF 2.03) % of women who smoke at time of delivery	Smaller	%	10.70	16.10		20.39	19.60	15.00	16.20		↓	↓	↓	
CYPP 003	Breastfeeding & Smoking	PBH 015	Number of adults identified as smoking in antenatal period	Smaller	Num								35				
CYPP 004	Breastfeeding & Smoking	PBH 015a	Number of smoking quit dates set	Bigger	Num								198				
CYPP 005	Breastfeeding & Smoking	PBH 015b	% of successful smoking quitters at 4 weeks	Bigger	%								51.00				
CYPP 006	Obesity	PBH 020	(PHOF 2.06i) Excess weight among primary school age children in Reception year	Smaller	%	22.60	24.50	24.21	25.00	23.30	23.50	25.00		↓	↓	↓	↓
CYPP 007	Obesity	PBH 021	(PHOF 2.06ii) Excess weight among primary school age children in Year 6	Smaller	%	34.20	37.30	36.15	34.65	34.58	34.60	36.70		↓	↓	↑	↓
CYPP 008	Obesity	CYP 008	(PHOF 2.11iv) Proportion of the population meeting the recommended "5-a-day" at age 15	Bigger	%	52.40	46.80			44.60					↓	↓	
CYPP 009	Mental health & wellbeing	CYP 009	Prevalence of potential eating disorders among young people: Estimated number of 16 - 24 year olds	Smaller	Num				1,413								
CYPP 010	Mental health & wellbeing	CYP 010	Hospital admission rate for mental health illness for children per 100,000 population aged 0-17 years	Bigger	Per 100,000 pop	81.50	99.30		101.10	92.50	44.20	97.70		↑	↑	↓	
CYPP 011	Mental health & wellbeing	CYP 011	The Warwick Edinburgh Mental Wellbeing Scale (WEMWBS) age 15-16 'What About YOUth' survey score	Smaller	%	47.60	47.60			46.80					↑	↑	
CYPP 012	Mental health & wellbeing	CYP 012	Percentage reporting general health as excellent	Bigger	%	29.50	30.90			29.70					↑	↓	
CYPP 013	Mental health & wellbeing	CYP 013	Estimated prevalence of mental health disorders in children and young people: % population aged 5-16	Smaller	%	9.20	10.00			9.80	9.80			↔	↓	↑	
CYPP 014	Mental health & wellbeing	CSC 251a	(PHOF 2.08ii) Percentage of children aged 5-16 who have been in care (LAC) for at least 12 months on 31st March whose score in the SDQ indicates cause for concern	Smaller	%	37.00	38.00			43.00		29.52	33.00	↓	↑	↑	
CYPP 015	Poverty	EDU 027	% of primary pupils eligible for and claiming free school meals	Smaller	%	13.70	18.90	17.14	19.10	18.80	17.90	18.50	17.70	↑	↓	↑	↓
CYPP 016	Poverty	EDU 028	% of secondary pupils eligible for and claiming free school meals	Smaller	%	12.40	16.50	14.72	16.70	16.70	14.90	14.40	13.50	↑	↓	↑	↑
CYPP 017	Poverty	CYP 017	% of primary pupils Free School Meals in the past 6 years	Smaller	%	24.50	31.60	29.24	29.40	30.30	31.30	30.20	30.00	↑	↓	↑	↓
CYPP 018	Poverty	CYP 018	% of secondary pupils Free School Meals in the past 6 years	Smaller	%	29.20	34.90	32.43	32.70	33.00	29.60	32.50	33.00	↓	↓	↑	↓
CYPP 019	Poverty	CHF 043	% of households with children whose economic activity status is classed as workless	Smaller	%	11.20	15.40		14.40	13.00	9.30	12.10		↓	↓	↑	
CYPP 020	Poverty	CYPP 020	% of pupils eligible for Pupil Premium	Smaller	Num	28.12	34.82					34.48	34.45	↑	↓	↑	
CYPP 021	Attendance & Attainment	EDU 008	% of 4 years olds total absence (6 Terms)	Smaller	%	5.10	5.20	4.92	4.80	5.60	5.50	5.10		↑	↔	↑	↓
CYPP 022	Attendance & Attainment	EDU 020	Total unauthorised absence from Primary schools	Smaller	%	1.10	1.20	1.13	0.70	0.80	0.90	1.10		↓	↔	↑	↑
CYPP 023	Attendance & Attainment	EDU 021	Total unauthorised absence from Secondary schools	Smaller	%	1.50	1.80	1.70	1.40	1.60	1.60	1.80		↓	↓	↔	↓
CYPP 024	Attendance & Attainment	EDU 022	State Funded Primary persistent absence rate (new definition from 2015/16 academic year)	Smaller	%	8.30	8.80	8.51			9.50	9.60		↓	↓	↓	↓
CYPP 025	Attendance & Attainment	EDU 023	State Funded Secondary persistent absence rate (new definition from 2015/16 academic year)	Smaller	%	13.50	14.70	13.91			15.70	17.80		↓	↓	↓	↓
CYPP 026	Attendance & Attainment	EDU 011	(PHOF 1.02i) - School Readiness: all children achieving a good level of development at the end of reception as a percentage of all eligible children. (Early Years Foundation Stage Profile (EYFSP))	Bigger	%	70.70	70.70	68.66	55.30	66.30	69.60	72.20		↑	↑	↑	↑
CYPP 027	Attendance & Attainment	EDU 015	% of all pupils reaching expected standard in Key Stage 2 for Reading, Writing & Maths	Bigger	%	64.00	67.00	65.60			56.00	61.00	65.00	↑	↑	↓	↓
CYPP 028	Attendance & Attainment	EDU 025	Key Stage 4 - Average Attainment 8 score per pupil	Bigger	Num	44.60	44.60	46.01		46.50	48.40	45.00		↓	↑	↑	↓
CYPP 029	Attendance & Attainment	EDU 026	Key Stage 4 - Average Progress 8 scores per pupil	Bigger	Num		-0.21	-0.15			-0.39	-0.23		↑		↓	↓

CHILDREN & YOUNG PEOPLE PLAN - SCORECARD														Latest data compared to			
CYPP Number	CYPP Theme	Indicator Num	Indicator Description	What is best	Measure of unit	Latest England Av	Latest North East Av	Latest Stat Neighbour benchmark	2013/14	2014/15	2015/16	2016/17	2017/18	Previous data	Latest England Average	Latest North East Average	Latest Statistical Neighbour
CYPP 030	Work, education or training	CYP 030	Skills gap in current workforce	Smaller	%	14.00		15.10	15.00		11.00			↑	↑		↑
CYPP 031	Work, education or training	PBH 007	(PHOF 1.05) 16 -18 year olds not in education, employment or training	Smaller	%	6.00	5.40					4.30			↑	↑	
CYPP 032	Work, education or training	CSC 290	% of Care Leavers not in education, employment or training (combined for 19, 20 and 21 year olds former relevant) *NOTE this refers to the Birthday Contact included in the CLA Statutory Return.	Smaller	%	40.00	43.00	45.50	30.91	32.14	31.00		43.00	↓	↓	↔	↑
CYPP 033	Work, education or training	CYP 033	% of offers of education or training made to 16 and 17 year olds	Bigger	%	94.70	96.70	96.44	92.10	95.70	96.30	95.50	96.00	↑	↑	↓	↓
CYPP 034	Statutory Intervention	CYP 034	Estimated prevalence of mental health disorders in children and young people: % population aged 5-16	Smaller	%	9.30	10.00	9.20		9.80	9.80			↔	↓	↑	↓
CYPP 035	Statutory Intervention	CYP 035	Estimated prevalence of emotional disorders: % population aged 5-16	Smaller	%	3.60	3.60	3.90		3.80	3.80			↔	↓	↓	↑
CYPP 036	Statutory Intervention	CYP 036	Estimated prevalence of conduct disorders: % population aged 5-16	Smaller	%	5.60	5.60	6.10		6.00	5.90			↑	↓	↓	↑
CYPP 037	Statutory Intervention	CYP 037	Hospital admissions as a result of self-harm (10-24 years)	Smaller	Per 100,000 pop	404.60	425.30		668.90	526.80	405.70	472.80		↓	↓	↓	
CYPP 038	Statutory Intervention	CSC 188	% of children becoming the subject of a Child Protection Plan (CPP) for a 2nd or subsequent time in the reporting period (within 2 yrs of previous CPP ceasing)	Smaller	%					2.40	6.00	1.94	6.50	↓			
CYPP 039	Statutory Intervention	CSC 189	% of children with a Child Protection Plan (CPP) for 2nd or subsequent time with no time restriction	Smaller	%	18.70	14.20				13.97	10.61	19.00	↓	↓	↓	
CYPP 040	Statutory Intervention	CYP 025	Abuse and neglect: Rate per 10,000 children subject of a child protection plan with initial category of abuse	Smaller	Per 10,000 pop	19.90	20.90					17.70	11.00	↑	↑	↑	
CYPP 041	Statutory Intervention	CYP 041	Abuse and neglect: Rate per 10,000 children subject of a child protection plan with initial category of neglect	Smaller	Per 10,000 pop	20.90	38.80					38.40	19.00	↑	↑	↑	
CYPP 042	Statutory Intervention	CSC 199b	% of Initial Child Protection Conferences resulting in a Child Protection Plan (CPP) due to one of the Key Parental Risk Factors being Domestic Abuse	Smaller	%						9.00	40.00		↓			
CYPP 043	Statutory Intervention	CSC 199d	% of statutory children's Single Assessments Completed in period where Domestic Violence was identified as a Risk Factor.	Smaller	%						10.00	15.48	27.00	↓			
CYPP 044	Statutory Intervention	CSC 200	Rate of looked after children (LAC) in our care per 10,000 of the 0-17 population as at end of month	Smaller	Per 10,000 pop	62.00	92.00	89.40	83.00	88.00	90.00	96.79	95.00	↑	↓	↓	↓
CYPP 045	Statutory Intervention	CSC 159	Number of Child in Need (CIN) cases year to date	Smaller	Num						1,330	3,464	1,959	↑			
CYPP 046	Statutory Intervention	CSC 182	Number of children subject to a child protection plan (CPP)	Smaller	Num				178	124	135	66	115	↓			
CYPP 047	Statutory Intervention	YOS 001	First time entrants to the youth justice system, rate per 100,000 young people (10-17 year old)	Smaller	Per 100,000 pop	292.00	334.00		459.92	347.29	347.00	494.00	360.00	↑	↓	↓	
CYPP 048	Statutory Intervention	YOS 002	Use of custody, number of custodial sentence's given per 1,000 young people (10-17 years)	Smaller	Per 1,000 pop	0.41	0.41		0.61	0.72	0.41	0.72	0.41	↑	↔	↔	
CYPP 049	Statutory Intervention	YOS 003	Frequency rate of proven re-offending by young offenders aged 10-17	Smaller	Per 1,000 pop	1.57	1.93		1.24	1.97	2.56	2.83		↓	↓	↓	

Increase breastfeeding rates and reduce the incidence of smoking at the time of delivery					
Indicator number	Indicator description	Latest data compared to previous data	Latest data compared to latest England Average	Latest data compared to latest North East Average	Latest data compared to latest Statistical Neighbour
PBH 013c	(PHOF 2.02ii) % of all infants due a 6-8 week check that are totally or partially breastfed	↑	↓	↑	↑
		% has improved from 2015/16 to 2016/17. It is better than the North East and Statistical Neighbour average and not the England. When using the Public Health Outcomes area profiling the % is significantly worse than the England average and significantly better than the regional average.			
PBH 014	(PHOF 2.03) % of women who smoke at time of delivery	↓	↓	↓	
		% has not improved from 2015/16 to 2016/17. It is worse than both the England and North East average. When using the Public Health Outcomes area profiling the % is significantly worse than the England average and not significantly different from the regional average.			
PBH 015	Number of adults identified as smoking in antenatal period				
		Only 2017/18 data available, no comparative information available.			
PBH 015a	Number of smoking quit dates set				
		Only 2017/18 data available, no comparative information available.			
PBH 015b	% of successful smoking quitters at 4 weeks				
		Only 2017/18 data available, no comparative information available.			
% of reportable indicators	Better than ↑	50%	0%	50%	100%
	Worse than ↓	50%	100%	50%	0%
	Same as ↔	0%	0%	0%	0%
Non reportable		3	3	3	4

Reduce obesity levels					
Indicator number	Indicator description	Latest data compared to previous data	Latest data compared to latest England Average	Latest data compared to latest North East Average	Latest data compared to latest Statistical Neighbour
PBH 020	(PHOF 2.06i) Excess weight among primary school age children in Reception year	↓	↓	↓	↓
		% has not improved from 2015/16 to 2016/17. It is worse than the England, North East and Statistical Neighbour average. When using the Public Health Outcomes area profiling the % is significantly worse than the England average and not significantly different from the regional average.			
PBH 021	(PHOF 2.06ii) Excess weight among primary school age children in Year 6	↓	↓	↑	↓
		% has not improved from 2015/16 to 2016/17. It is better than the North East average but not the England and Statistical Neighbour average. When using the Public Health Outcomes area profiling the % is not significantly different from the England or regional average.			
CYP 008	(PHOF 2.11iv) Proportion of the population meeting the recommended "5-a-day" at age 15		↓	↓	
		% has only data for 2014/15. It is worse than both the England and North East average. When using the Public Health Outcomes area profiling the % is significantly worse than the England average and not significantly different from the regional average.			
% of reportable indicators	Better than ↑	0%	0%	33.3%	0%
	Worse than ↓	100%	100%	66.7%	100%
	Same as ↔	0%	0%	0%	0%
Non reportable		1	0	0	1

Improve the mental health and emotional wellbeing of all children and young people					
Indicator number	Indicator description	Latest data compared to previous data	Latest data compared to latest England Average	Latest data compared to latest North East Average	Latest data compared to latest Statistical Neighbour
CYP 009	Prevalence of potential eating disorders among young people: Estimated number of 16 - 24 year olds	Only 2013/14 data available. There is no comparative data available			
CYP 010	(PHOF) Hospital admission rate for mental health illness for children per 100,000 population aged 0-17 years	↑	↑	↓	
		The rate has improved from 2015/16 to 2016/17. It is better than the England average but not the North East average. When using the Public Health Outcomes area profiling the % is not significantly different from the England or regional average.			
CYP 011	The Warwick Edinburgh Mental Wellbeing Scale (WEMWBS) age 15-16 'What About YOUth' survey score		↑	↑	
		Only 2014/15 data available. % is better than both the England and North East average			
CYP 012	Percentage reporting general health as excellent		↑	↓	
		Only 2014/15 data available. % is better than the England but not the North East average.			
CYP 013	Estimated prevalence of mental health disorders in children and young people: % population aged 5-16	↔	↓	↑	
		% remained the same for 2014/15 to 2015/16. It is better than the North East but not the England average			
CSC 251a	(PHOF 2.08ii) % of children aged 5-16 who have been in care (LAC) for at least 12 months on 31st March whose score in the SDQ indicates cause for concern	↓	↑	↑	
		% has not improved from 2016/17 to 2017/18. It is better than the England and North East average. When using the Public Health Outcomes area profiling the % is not significantly different from the England or regional average.			
% of reportable indicators	Better than ↑	66.7%	60%	40%	0%
	Worse than ↓	0%	40%	60%	0%
	Same as ↔	33.3%	0%	0%	0%
Non reportable		3	1	1	6

Reduce the number of children and young people living in poverty					
Indicator number	Indicator description	Latest data compared to previous data	Latest data compared to latest England Average	Latest data compared to latest North East Average	Latest data compared to latest Statistical Neighbour
EDU 027	% of primary pupils eligible for and claiming free school meals	↑	↓	↑	↓
		% has improved from 2016/17 to 2017/18. It is not as good as the England and Statistical Neighbours and better than the North East average.			
EDU 028	% of secondary pupils eligible for and claiming free school meals	↑	↓	↑	↑
		% has improved from 2016/17 to 2017/18. It is not as good as the England and better than the North East and Statistical Neighbours average.			
CYP 017	% of primary pupils Free School Meals in the past 6 years	↑	↓	↑	↓
		% has improved from 2016/17 to 2017/18. It is not as good as the England and Statistical Neighbours and better than the North East average.			
CYP 018	% of secondary pupils Free School Meals in the past 6 years	↓	↓	↑	↓
		% has not improved from 2016/17 to 2017/18. It is not as good as the England and Statistical Neighbours but better than the North East average.			
CHF 043	% of households with children whose economic activity status is classed as workless	↓	↓	↑	
		% has not improved from 2015/16 to 2016/17. It is better than the North East but not the England average.			
CYP 020	% of pupils eligible for Pupil Premium	↑	↓	↑	
		% has improved from 2016/17 to 2017/18. It is not as good as the England and better than the North East average.			
% of reportable indicators	Better than ↑	66.7%	0%	100%	25%
	Worse than ↓	33.3%	100%	20%	75%
	Same as ↔	0%	0%	0%	0%
Non reportable		0	0	0	2

Improve school attendance and attainment					
Indicator number	Indicator description	Latest data compared to previous data	Latest data compared to latest England Average	Latest data compared to latest North East Average	Latest data compared to latest Statistical Neighbour
EDU 008	% of 4 years olds total absence (6 Terms)	↑	↔	↑	↓
		% has improved from 2015/16 to 2016/17. It is the same as the England, better than the North East and not as good as the Statistical Neighbours average.			
EDU 020	Total unauthorised absence from Primary schools	↓	↔	↑	↑
		% has not improved from 2015/16 to 2016/17. It is the same as the England, and better than the North East and Statistical Neighbours average. Unauthorised absence has been a growing trend throughout England in general and Darlington is in line with this and not disproportionately worse.			
EDU 021	Total unauthorised absence from Secondary schools	↓	↓	↔	↓
		% has not improved from 2015/16 to 2016/17. It is not as good as the England and Statistical Neighbours and the same as the North East average.			
EDU 022	State Funded Primary persistent absence rate (new definition from 2015/16 academic year)	↓	↓	↓	↓
		The rate has not improved from 2015/16 to 2016/17. It is not as good as the England, North East and Statistical Neighbours average.			
EDU 023	State Funded Secondary persistent absence rate (new definition from 2015/16 academic year)	↓	↓	↓	↓
		The rate has not improved from 2015/16 to 2016/17. It is not as good as the England, North East and Statistical Neighbours average.			
EDU 011	(PHOF 1.02i) - School Readiness: all children achieving a good level of development at the end of reception as a percentage of all eligible children. (Early Years Foundation Stage Profile (EYFSP))	↑	↑	↑	↑
		% has improved from 2015/16 to 2016/17. It is better than the England, North East and Statistical Neighbours average. When using the Public Health Outcomes area profiling the % is not significantly different from the England or regional average.			
EDU 015	% of all pupils reaching expected standard in Key Stage 2 for Reading, Writing & Maths	↑	↑	↓	↓
		Provisional % has improved from 2016/17 to 2017/18. It is better than the England but not as good as the North East and Statistical Neighbour average.			
EDU 025	Key Stage 4 - Average Attainment 8 score per pupil	↓	↑	↑	↓
		% has not improved from 2015/16 to 2016/17. It is better than the England and North East and not as good as the Statistical Neighbour average.			
EDU 026	Key Stage 4 - Average Progress 8 score per pupil	↓		↓	↑
		% has not improved from 2015/16 to 2016/17. It is not as good as the North East and better than the Statistical Neighbour average.			
% of reportable indicators	Better than ↑	33.3%	37.5%	44.4%	33.3%
	Worse than ↓	66.7%	37.5%	44.4%	66.7%
	Same as ↔	0%	25.0%	11.2%	0%
Non reportable		0	1	0	0

Increase the number of young people in work, education or training					
Indicator number	Indicator description	Latest data compared to previous data	Latest data compared to latest England Average	Latest data compared to latest North East Average	Latest data compared to latest Statistical Neighbour
CYP 030	Skills gap in current workforce	↑	↑		↑
		% has improved from 2013/14 to 2015/16. It is better than the England and Statistical Neighbour average.			
PBH 007	(PHOF 1.05) 16 -18 year olds not in education, employment or training		↑	↑	
		% is better than both the England and North East average. When using the Public Health Outcomes area profiling the % is significantly better from the England and regional average.			
CSC 290	% of Care Leavers not in education, employment or training (combined for 19, 20 and 21 year olds former relevant)	↓	↓	↔	↑
		% has not improved from 2015/16 to 2017/18. It is better than the Statistical Neighbours the same as the North East and not as good as the England average.			
CYP 033	% of offers of education or training made to 16 and 17 year olds	↑	↑	↓	↓
		% has improved from 2016/17 to 2017/18. It is better than the England but not as good as the North East and Statistical Neighbours average.			
% of reportable indicators	Better than ↑	66.7%	75%	33.3%	66.7%
	Worse than ↓	33.3%	25%	33.3%	33.3%
	Same as ↔	0%	0%	33.3%	0%
Non reportable		1	0	1	1

Strengthen families to reduce the need for statutory intervention					
Indicator number	Indicator description	Latest data compared to previous data	Latest data compared to latest England Average	Latest data compared to latest North East Average	Latest data compared to latest Statistical Neighbour
CYP 034	Estimated prevalence of mental health disorders in children and young people: % population aged 5-16	↔	↓	↑	↓
		% has remained the same from 2014/15 to 2015/16. It is not as good as the England or Statistical Neighbours and better than the North East average.			
CYP 035	Estimated prevalence of emotional disorders: % population aged 5-16	↔	↓	↓	↑
		% has remained the same from 2014/15 to 2015/16. It is not as good as the England or North East and better than the Statistical Neighbours average.			
CYP 036	Estimated prevalence of conduct disorders: % population aged 5-16	↑	↓	↓	↑
		% has improved from 2014/15 to 2015/16. It is not as good as the England or North East and better than the Statistical Neighbours average.			
CYP 037	Hospital admissions as a result of self-harm (10-24 years)	↓	↓	↓	
		The rate has not improved from 2015/16 to 2016/17. It is not as good as the England or North East average.			
CSC 188	% of children becoming the subject of a Child Protection Plan (CPP) for a 2nd or subsequent time in the reporting period (within 2 yrs of previous CPP ceasing)	↓			
		% has not improved from 2016/17 to 2017/18.			
CSC 189	% of children with a Child Protection Plan (CPP) for 2nd or subsequent time with no time restriction	↓	↓	↓	
		% has not improved from 2016/17 to 2017/18. It is not as good as the England or North East average.			
CYP 025	Abuse and neglect: Rate per 10,000 children subject of a child protection plan with initial category of abuse	↑	↑	↑	
		The rate has improved from 2016/17 to 2017/18. It better than the England or North East average.			
CYP 041	Abuse and neglect: Rate per 10,000 children subject of a child protection plan with initial category of neglect	↑	↑	↑	
		The rate has improved from 2016/17 to 2017/18. It better than the England or North East average.			
CSC 199b	% of Initial Child Protection Conferences resulting in a Child Protection Plan (CPP) due to one of the Key Parental Risk Factors being Domestic Abuse	↓			
		% has not improved from 2016/17 to 2017/18.			
CSC 199d	% of statutory children's Single Assessments Completed in period where Domestic Violence was identified as a Risk Factor.	↓			
		% has not improved from 2016/17 to 2017/18.			
CSC 200	Rate of looked after children (LAC) in our care per 10,000 of the 0-17 population as at end of month	↑	↓	↓	↓
		The rate has improved from 2016/17 to 2017/18. It is not as good as the England, North East and Statistical Neighbours average.			

CSC 159	Number of Child in Need (CIN) cases year to date	↑			
		The number has improved from 2016/17 to 2017/18.			
CSC 182	Number of children subject to a child protection plan (CPP)	↓			
		The number has not improved from 2016/17 to 2017/18.			
YOS 001	First time entrants to the youth justice system, rate per 100,000 young people (10-17 year old)	↑	↓	↓	
		The rate has improved from 2016/17 to 2017/18. It is not as good as the England or North East average. • The number of young people identified as First Time Entrants being referred to the YOS continues to be low. The year-end (Apr 17 – Mar 18) total of 29 represent a 21.6% reduction compared with 2016/17 (35 in total). In the period April 17 – March 2018 the YOS have had 110 young people referred to the service for diversionary disposals i.e. Pre Caution Disposals (79) and Restorative Disposals (31). 90% success rate in terms of you people not reoffending.			
YOS 002	Use of custody, number of custodial sentence's given per 1,000 young people (10-17 years).	↑	↔	↔	
		The rate has improved from 2016/17 to 2017/18. It is not as good as the England or North East average. • In relation to the use of custody, overall the YOS have been successful in their sentencing and bail assessments and proposals to the court whereby 97% of young people appearing before the court have received a community sentence or granted bail. As with any incidents where custody is being considered the YOS Management Team scrutinise and ensure that all alternative options have been deliberated. Consideration to ensure public protection and risk of harm to the community is paramount.			
YOS 003	Frequency rate of proven re-offending by young offenders aged 10-17	↓	↓	↓	
		The rate has improved from 2016/17 to 2017/18. It is not as good as the England or North East average. The proven reoffending position as of July 2018 (new 3 month measure tracks Apr-Jun 17 Cohort) is 31%, 15 out of 48 young people in the tracking period have reoffending committing a further 62 offences. 69% success rate where young people have not gone on to re-offending.			
% of reportable indicators	Better than ↑	46.7%	18.2%	27.3%	50%
	Worse than ↓	40.0%	72.7%	63.6%	50%
	Same as ↔	1.3%	9.1%	9.1%	0%
Non reportable		0	5	5	12

SPECIAL EDUCATIONAL NEEDS STRATEGY AND FUNDING

SUMMARY REPORT

Purpose of the Report

1. To provide Scrutiny with a summary of plans to consult on a strategic plan for delivering better outcomes for children and young people with special educational needs and proposed amendments to the application of the High Needs Block in relation to children and young people with Special Educational Needs and Disabilities (SEND).

Summary

2. Following Cabinet approval to commence consultation on the Special Educational Needs and Disabilities (SEND) Strategy 2019-2022 and related funding arrangements. The strategy proposes a local vision along with priorities for the future provision and development of services to support children with SEND.
3. The Government funds school via the Dedicated Schools Grant (DSG) to enable them to educate all children and young people including those with SEND.
4. The current funding model for children with SEND in Darlington does not follow best practice and lacks transparency and fairness. Amendments have been made with the agreement of schools to enable the “money to follow the child” but more changes are required to deliver a fair and transparent funding system.
5. Expenditure on SEND within the DSG is projected to considerably overspend and action on an approach to funding and service provision are proposed as part of the amended strategy which will improve the transparency of the system and reduce overall costs.

Recommendation

6. It is recommended that:
 - (a) Scrutiny be aware of the forthcoming consultation on the revised SEND strategy and proposed amended funding arrangements.
 - (b) Scrutiny consider and respond to the proposals outlined in the consultation.

Reasons

7. The recommendation is supported by the following reasons:
 - (a) The strategy provides a framework to drive the work of the SEND partnership in Darlington through to 2022 to deliver the best possible outcomes for children and young people with SEND and their families.
 - (b) To enable the proposed Special Educational Needs and Disabilities (SEND) Strategy 2019 -2022 and the proposed amended funding model to be further considered.

Suzanne Joyner
Director of Children and Adult Services

Background Papers

No background papers were used in the preparation of this report

Tony Murphy: Extension 5637

S17 Crime and Disorder	This report has no implications for Crime and Disorder
Health and Well Being	The SEND Strategy will contribute to improved outcomes for children and young people with special educational needs and/or a disability in the borough.
Carbon Impact	There are no issues which this report needs to address.
Diversity	The SEND Strategy will contribute to improved outcomes for children and young people with special educational needs and/or a disability in the borough
Wards Affected	Children and young people with SEND may live in any ward.
Groups Affected	Children and young people with special educational needs and/or disabilities
Budget and Policy Framework	This report does not represent a change to the budget and policy framework.
Key Decision	This is a key decision
Urgent Decision	Yes, so as not to delay start of consultation and meet various timescales.
One Darlington: Perfectly Placed	The report contributes to the Sustainable Community Strategy Priority 'the best start in life'.
Efficiency	There are no direct efficiencies to the Council from the information contained within this report.
Impact on Looked After Children and Care Leavers	The SEND Strategy will contribute to improved outcomes for children and young people with special educational needs and/or a disability in the borough a number of these children are Looked After Children or Care Leavers.

MAIN REPORT

The SEND Strategy

8. Darlington's Special Educational Needs Strategy 2017-2020 was approved by Cabinet on 5 December 2017. This updated version builds on progress to date, identifying what has been achieved and our priorities for action up to 2022.
9. The vision for the strategy is that it promotes inclusion, maximizes young people's opportunities to be independent and enables young people with special educational needs and disabilities to be recognized as fully integrated citizens with the ability to contribute to their local community.

10. The strategy has been written to respond to the key priorities set out in the SEND code of practice, and highlights local strategic aims associated with each priority area for implementation. These are set out below:

(a) **Early identification of need ensuring that the right children and young people are in the right placement with the right support**

Early identification and intervention is essential to prevent underachievement and improve outcomes and improve children's life chances.

(b) **Building capacity in mainstream settings to enable children and young people to be educated in appropriate settings locally**

Children and young people with SEND need to have good quality support in their mainstream and local settings so that they can achieve their academic potential and maintain their self-esteem and confidence.

(c) **Ensuring that children and young people are educated in their local community and have an effective preparation for adulthood and access to work and leisure opportunities**

Being educated in their local area enables pupils with SEND greater independence and a sense of contributing and belonging to their local community. Children and young people with SEND tell us that they want to make friends locally and access local facilities with their families.

(d) **Increasing achievement and improving outcomes for children and young people with SEND**

Address the underperformance in educational achievement across the Key Stages but particularly at Key Stage 4 through targeted interventions, appropriate curriculum, high quality training and effective quality assurance, monitoring and moderation.

(e) **Focus on effective collaboration, co-production and communication**

Ensuring that all policies, practices are co-produced with all stakeholders and with the active involvement of parent/carers and children and young people.

(f) **Achieving 'Best Value' (human, physical and financial resources) from all our services**

Effective, efficient and co-ordinated services that meet the needs of children and young people with SEND and their families. With increasing demand we must ensure that the right resources are going to the right children in the right place.

11. The SEND Strategy sets out our vision in Darlington for a well-planned continuum of provision from birth to age 25 that meets the needs of children and young people with SEND and their families, and that we expect every early years setting, post 16 provider, mainstream school and academy to have the capacity and confidence to deliver effective provision.

12. The strategy aims to identify children with SEND at the earliest possible opportunity and provide them with the support they need to make good educational progress and achieve good outcomes so that they and their families feel well supported. It recognises the importance of providing good training for all staff, whichever setting they are working in, using the best expertise and knowledge, sharing best practice and by promoting a model of collaborative working and shared responsibility.
13. The strategy aims to ensure education, care and health services are delivered in an integrated way so that the experience of families accessing services is positive and children's and young people's learning and development, safety, well-being and health outcomes are well promoted alongside their educational progress and achievement.
14. Darlington also places a higher proportion of young people with EHCPs in Independent Special Schools (5.1% compared to 2.3% across the North East and 3.7% across England). The average cost of a placement at an independent special school is £70,000 per year.

Developing Local Provision

15. The SEND strategy identifies the key priority of providing high quality local provision. One of the key drivers for the placement of pupils in high cost out of borough independent placements is the lack of suitable local specialist provision.
16. The strategy identifies key areas of consideration of commissioning local provision to meet need and manage demand.

Type of Need	Phase	Delivery
Pupils with Social, Emotional and Mental Health Needs (SEMH)	Primary	Resource base in a primary schools setting
Pupils with Social Emotional and Mental Health Needs (SEMH)	Secondary	Resource base in a secondary setting or Alternative provision
Pupils with Moderate Learning Difficulties	Secondary	Resource base in a Secondary setting

Re-shaping of the High Needs Block Funding Mechanism

17. In order to ensure pupils with SEND in Darlington fulfil their potential the funding system that supports them needs to be transparent and targeted to meet a child's individually assessed and identified needs.

Consultation

18. Consultation on the revised SEND strategy and the proposed new funding arrangements will take place from the 10 October to the 21 November 2018. The consultation will include:

- (a) consultation and co-production discussion with the Darlington Parents and Carers Forum (DPCF)
- (b) online information and questionnaire
- (c) a letter to all families on the SEN database
- (d) a letter to Darlington education providers
- (e) an information session at a scheduled Darlington Parents and Carers Forum

**Darlington Council Strategy for Special Educational Needs
and/or Disability (SEND)
2019 - 2022**



**“THE
BEST
START IN
LIFE”**

**OUR STRATEGY FOR IMPROVING OUTCOMES
ACHIEVED BY CHILDREN AND YOUNG PEOPLE
AGED 0-25 WITH SEND 2019 - 2022**

Contents

1. Executive Summary	Page 2
2. Introduction	Page 4
3. Our Vision and Philosophy for SEND Support and Provision in Darlington	Page 6
4. Outcomes	Page 8
5. Achieving our Vision and Outcomes – The Key Enablers	Page 11
i. Processes	
ii. Infrastructure and resources	
iii. People	
iv. Joint strategic leadership and management	
6. How the Strategy was Developed – Consultation and Data Analysis	Page 13
7. Population – Some Key Facts	Page 15
8. The Policy Context	Page 17
9. What we have Achieved So Far – August 2018	Page 19
10. Our Challenges and Opportunities	Page 22
11. Our Strategic Priorities for SEND In Darlington (2019-2022) and High Level Action Plans	Page 23
12. What Will Success for Children and Young People with SEND Look Like in 2022	Page 28
13. Taking the SEND Strategy Forward – Governance, Monitoring and Review	Page 29



1. Executive Summary

Darlington's SEND Strategy 2019-2022 for improving outcomes for children and young people with SEND 0-25 giving them the 'best start in life' outlines the vision and key priorities for supporting Darlington's children and young people with SEND and their families.

Our vision for all children and young people with special educational needs and disabilities is that they have the right support and opportunities at the right time so that they become resilient, happy adults.

This is set within the national context and our statutory requirement to meet the needs of children and young people under the requirements of the Children and Families Act 2014 and our local context with the rising numbers of children who have a range of complex needs and the need to provide high quality and responsive services within financial constraints.

Darlington is fully committed to the children and young people with SEND and their families and strives to ensure that they receive the highest quality provision wherever possible. We have analysed our gaps in provision, used a range of data across services and settings and improved partnership working with a wide range of

stakeholders. We work closely with the Parent/Carer forum in all that we do.

We have identified our key objectives, priority actions, opportunities and challenges in meeting the growing needs and numbers of children and young people who have SEND. Our analysis of local need suggest we need to consider future commissioning to meet the following need:

- A revised role and remit for the Additional Resource Bases and outreach support in Primary and Secondary schools to reflect the growing numbers of children with communication and interaction, moderate learning difficulties and those with social, emotional and mental health needs.
- A greater emphasis on an integrated therapeutic approach to the work in the resource bases and across all settings.
- Multi-disciplinary Early Years Hub based in a primary school which has a remit for early identification and assessment to ensure that children can follow wherever possible mainstream provision across the Key Stages
- Increased emphasis on supporting children and young people who have mental health needs across all settings.

- Vocational provision in Key Stage 4 for those young people who find the demands of the curriculum difficult and for whom a more practical and vocational route is more appropriate.

It will be important that we have high quality specialist staff with the right skills, knowledge and experience in our settings who will be supported by a comprehensive workforce reform strategy across all services. We will need to align our services in line with our new SEND Ranges and to support schools and settings to effectively implement high quality interventions.

We will strive to ensure that there is equality of access to our services and that we have consistency and a continuum of high quality provision 0-25. Our children and young people with SEND and their families are pivotal to the success of this strategy. One of our key strategic objectives is effective collaboration, co - production and communication. We must always listen, communicate effectively and develop our current and future services together and in partnership – it is only then that we can truly develop the provision for which our children and young people with SEND richly deserve.

DRAFT

2. Introduction



The Children and Families Act 2014 introduced the biggest changes to Special Educational Needs and Disabilities (SEND) in a generation; a new statutory duty on the Local Authority (LA) to ensure that the views, wishes and feelings of children, young people and their parents/carers are at the centre of decision making and that they are given the right support and information in a timely manner to ensure they are able to participate in decisions which help them to achieve good outcomes.

Darlington's vision is to enable children and young people to have the best start in life. Our aspiration is that Darlington's children and young people aged 0-25 with SEND will aim high and achieve their full potential, grow up to be as independent as possible and become active citizens within their community. Our aim is to ensure that children and young people with SEND are well prepared for adulthood through access to employment, leisure and social activities that provide independence and high quality support for adult living. This document is our shared vision across Education, Health and Care in partnership and co-production with our families and young people. It sets out our next steps for improving outcomes and opportunities for

every Darlington child and young person with SEND.

This strategy aims to meet the requirements of the Children and Families Act in a way that is ambitious, inclusive, realistic and person centred within a challenging financial context. It was developed with stakeholders responsible for implementing changes and with parents, carers and young people at the core.

Darlington was part of the Department for Education's Pathfinder programme which supported best practice in the implementation of the SEND reforms. Over the past year we have started to review all our provision for SEND to ensure that it is 'fit for purpose' and meeting the growing and complex needs of our young people. We have worked closely with schools, settings and services to engage all stakeholders and to start planning collectively and effectively together. We are using our analysis of our SEND data and views of our parents, carers and young people to 'future proof' our services and to recognise where our gaps are and to find solutions to our challenges. We have successfully developed and implemented our SEND Ranges across schools and services so that we can more accurately

assess need and to ensure that we have a 'graduated response' to meeting those needs. We have engaged partners in the discussions around funding and the changes that need to be made to ensure that we can get 'best value' out of all our resources.

We have good links across our multi-disciplinary services and recognise that we need to work more consistently. We are above the national average in our completion of Education Health and Care Plans (EHCPs) within the 20 week deadline but we need to improve our quality of plans, systems and processes and the involvement of parents and carers in the process.

All statements of special education need were successfully converted to Education, Health and Care Plans by the statutory March 2018 deadline.

Going forward we recognise that there is much to do to keep pace with demand, to improve the quality of provision further and to ensure that more children and young people can have the specialist support they need in local schools, post 16 providers, work placements and early years settings. We have a higher than average number of children and young people with EHCPs when compared with

both regional and national averages and our growth in the number of plans over the past 4 years has been high.

Children and young people with SEND are achieving well in the Early Years and in Key Stage 2 with children with an EHCP and SEN Support making better progress than the EHCP cohort nationally. Progress at key Stage 5 is good. However the performance at Key Stage 4 is a concern.

Some of our biggest challenges for this strategy are to ensure that we can improve support for children with Autism (ASD), Speech, Language and Communication Needs (SLCN) and Social, Emotional and Mental Health difficulties (SEMH), reduce the number of children with Moderate Learning Difficulties (MLD) in our special schools, increase our capacity in mainstream schools and in particular in our secondary schools to meet the needs of children and young people with SEND and to reduce our dependence on out of authority placements.

We must deliver this strategy in a way that is affordable and provides best value for money, whilst recognising the unprecedented increase in the number of children and young people supported by high needs funding and the corresponding increase in pressure on broader health and

care services for those aged 0-25 years and beyond.

3. Our Vision and Philosophy for SEND Support and Provision in Darlington

Where possible we believe that every Darlington child and young person should be supported in the community where they live. We will achieve this through access to good quality local Early Years provision, schools, post 16 settings, work based training providers and employers. In addition to the right learning opportunities children and young people with SEND should be offered access to appropriate health and care support in response to their diagnosed needs whilst recognising and understanding the specific needs of the families.

We are committed to the following key priorities in order to deliver our vision:

- Early identification of need ensuring that the right children and young people are in the right placement with the right support
- Building capacity in mainstream settings to reduce reliance on specialist and out of authority placements 0-25
- Ensuring that children and young people are educated in their local community and have an effective preparation for adulthood and access to work and leisure opportunities

- Increasing achievement and improving outcomes for children and young people with SEND
- Focus on effective collaboration, co-production and communication
- Achieving 'Best Value' (human, physical and financial resources) from all our services

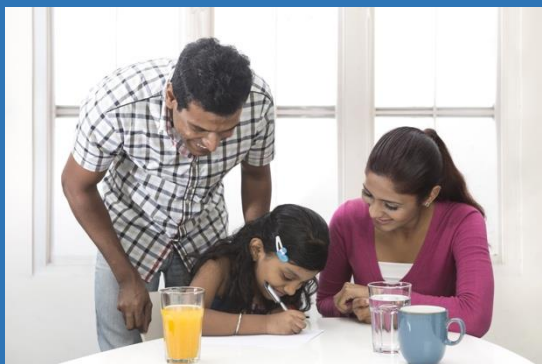
We are committed to safeguarding and protecting all children and young people with SEND. We want to provide a well-planned continuum of provision from birth to 25 and beyond. This means high quality and well-integrated services across education, health and social care which work closely with young people, their parents and carers and where individual needs are met without unnecessary bureaucracy or delay. We want the journey from childhood to adolescence and through to adulthood to be a good experience for all with young people taking informed risks, making choices, being challenged and challenging boundaries as part of their growing up journey.

In order to deliver our vision and key priorities we will:

- Ensure a person centred approach to service delivery and that all our plans, services and policies are co-produced with families
- Have a local offer which helps children, young people and their families to plan and make choices about their support
- Ensure that the SEND Ranges are fully embeded and utilised in all settings and continue to focus on a 'Quality First' approach in our universal settings
- Provide systematic, proactive and appropriate early identification, early help and provision which will be available locally
- Ensure successful preparation for adulthood including supporting independence, independent living, training and employment

- Support the vision through effective workforce reform and outreach support services that are based on high quality interventions
- establish clear pathways and effective transition between and across services
- have a strong commitment at all levels to ensure effective partnership working and co-production happens
- active involvement of all partners in developing excellent practice supporting each other to understand differing views, priorities, skills and talents
- have effective Joint Commissioning Strategies which will provide greater synergy between and across services and will ensure accountability at all levels
- Put in place funding and support that is allocated fairly and openly

4. Outcomes



The partnership between Education, Health and Social Care is strong and developing. Significant work has been undertaken to pull together data from various sources and to highlight where the gaps are in information so that this can be used to future proof services and provision.

The proportion of children and young people living in poverty is increasing and there is evidence of an increasing impact of alcohol on the population of Darlington. The proportional uptake of Free School Meals in Darlington is higher than the national average. Darlington has a significant Gypsy, Roma and Traveller (GRT) community with a higher than average number of pupils from this community being electively home educated.

Education/Attainment

Educational attainment is the foundation for opening future opportunities for all children and young people with SEND; however resilience, social networks and involvement in community activities are also key factors for a fulfilling and independent life.

In 2017, none of the small numbers of pupils with a statement/EHCP achieved a

Good Level of Development (GLD) in Darlington. However, pupils at SEN Support level achieved better than the national average at 34% (national 27%). Overall for pupils with SEN, this equated to a higher percentage of pupils achieving a GLD than similar pupils nationally. In 2017 a higher proportion of SEN pupils in Darlington met the expected standard of phonic decoding when compared with the national average. The gap between Darlington and national results was particularly high for pupils with a statement/EHCP.

Key Stages 1 and 2

Key Stage assessments for KS1 and KS2 were reformed in 2016 with resulting outcomes being measured by 'Expected Standards' rather than the previously measured national curriculum levels. When compared to the national average, SEN pupils in Darlington performed less favourably at KS1 in 2017. However, maths was stronger for pupils with a statement or EHCP and reading was a particular strength in Darlington. Writing was a weakness overall across those pupils with SEN support and those with a statement or EHCP. In contrast to KS1, the attainment of SEN pupils at KS2 was stronger in Darlington for 2017 compared

to the national average. This was the case in all subjects with the exception of writing for pupils with a statement or EHCP. The results for SEN support pupils were higher than those in the North East and Statistical Neighbours with a national ranking of 25. However, the attainment of pupils with a statement or EHCP were at average when compared to regional neighbours.

Key Stage 4

New attainment indicators, including Attainment 8 and progress 8 were introduced in 2015/16. All SEN pupils in Darlington performed less well than their national comparators in all measures. For pupils with a statement or EHCP, Ebacc Attainment and English and Maths (basics) are the only two measures where Darlington were above the national average. Those on SEN support fell well below national averages on all measures.

Post 16 – Attainment by age 19

In 2017 attainment at Level 2, including English and Maths, by age 19 improved for young people without SEN needs. Attainment also improved for those with SEN support, whilst there was a decline for those with a statement or EHCP. In 2017 performance at Level 2 for those

with a statement or EHCP was at 12.20 % and is below that of statistical neighbours (13.15% and national average (14.90%). For those with SEN support needs performance was at 27.0% which is well below our statistical neighbours at 35.65% and the national average at 37.0%. A similar pattern was seen for those whose attainment is at Level 3.

Preparation for Adulthood

Participation for 16 and 17 years olds

In 2017 (January) 91.58% of 16-17 year olds with SEN who were resident in Darlington were in education and training compared with 86.58% for our statistical neighbours and the national average being 87.52%. Darlington has a higher percentage of Post 16 students with EHCPs in Further Education provision compared with the national average. There is a higher than average percentage of Post 16 students with EHCPs in Post 16 specialist institutions than the North East and national averages.

In January 2018 Darlington was below its North East neighbours in the number of students with EHCPs undertaking supported internships (3), traineeships (0) and apprenticeships (0). Darlington

however was the highest in the region in respect of students with EHCPs remaining in sixth form.

Employment Opportunities

Developing an improved process to ensure more effective tracking of students into sustained destinations and work is a priority. Young people with special educational needs and disabilities often struggle to get paid work when they leave education. This could be due to a lack of work experience opportunities and a lack of accessible information. There are a lack of work opportunities and career pathways for young people with SEND in Darlington. This remains a key priority in this strategic plan.

Good Health Outcomes

Young people with disabilities may experience greater vulnerability to secondary conditions, co-morbid conditions including for example age related conditions or illnesses. Barriers to good physical and mental health can include for example a lack of availability and access to leisure, cultural and other public facilities and transport. The JSNA has highlighted the significant emotional and mental health needs particularly in secondary for those students on SEN

support and those with EHCP's. Considerable work is being undertaken in this area across Health and Education. The Future in Mind programme has supported schools to be better skilled through the delivery of training in mindfulness and mental health first aid.

DRAFT

5. Achieving our Vision and Outcomes – The Key Enablers

1. Processes

- A well planned continuum of provision 0-25
- Effective EHCPs that accurately reflect the needs and targets for the child and or young person with individual needs being met without unnecessary bureaucracy and delay
- SEND panels and steering groups that meet regularly, have clarity over purpose, roles, remit and that are coherent with the child's needs at the centre
- Ensuring local SEND services are inclusive of and integrated with high quality NHS, community and voluntary services so that the experience of families accessing services is positive and children and young people's learning, development, safety, well-being and health outcomes are promoted alongside their educational progress and achievements
- Embed the use of the SEND Ranges across all settings

2. Infrastructure and Resources

- Business intelligence, systems of gathering data and ease of access to data will be key in delivering the strategy
- Effective monitoring, tracking and analysis of data and outcomes by stakeholders will be pivotal
- Strong strategic leadership across Education, Health and Social Care
- Utilising the SEND Capital grant and other SEND grants effectively in line with the SEND Strategy key Principles
- Effective partnership working with schools will be fundamental to develop more effective and innovative ways to use high needs funding in mainstream schools

3. People

- Effective workforce training and support from Early Years through to work based training providers and employers so that they have the capacity and skills to deliver a high quality provision
- A commitment from all to achieve the very best outcomes possible for children and young people which support inclusion, develop independence and successful preparation for adulthood

4. Joint strategic leadership and management

- Strong governance, clear commitment, accountability and challenge through the LA, schools governing bodies, SEND Steering Group, the Clinical Commissioning groups and the Health and Well Being Board
- A robust delivery plan that is published and effectively communicated and contributed to by all
- All teams and services working towards our strategy with budgets aligned to our strategic priorities

DRAFT

6. How the strategy was developed – Consultation & Data Analysis



Phase 1. Data and evidence gathering

Key hypothesis

1. Is our pattern of provision for children and young people with SEND suitable to meet changing needs?
2. Is this what parents and families want?
3. Is it affordable?

We have gathered and analysed:

- Data on the range of SEND in the area, recent trends and likely changes in the future
- Evidence on how effectively the current pattern of specialist educational provision meets needs in the area – through an analysis of resource base and specialist outreach provision
- Data on those children and young people who are in independent specialist provision and the reasons for this
- Patterns of attendance, punctuality and behaviours of children and young people with SEND including fixed term and permanent exclusions
- The needs of schools with regard to therapy requirements and what they commission already
- Our position with regard to the statutory requirements of the SEND Code of Practice
- The pattern of new assessments and the needs coming through from Early Years
- Health data and where the gaps are
- Comparisons within our NE region and how we compare with them and with national averages
- The various funding streams that support the services, resource bases, schools and specialist provision to assess an outline view of whether we are achieving 'best value'
- The various funding streams that are supporting mainstream provision
- Differing funding models that can be allocated to schools using the SEND Ranges as a guide

Close working partnerships have been established between schools, post 16 providers, services and the LA. The LA has led two key conferences on High Needs Funding and the findings of the review of the resource bases in schools and the outreach support services.

A core element was to gather evidence about what works well across the current system, areas for improvement and SEND provision mapping for the future across the whole life cycle from birth to young adulthood. The SEND Ranges have been developed to capture current evidenced based good practice and parent/carers, young people and

professionals views on what works well. All EHCPs have been moderated across all schools by the LA using the SEND ranges.

What Children Young People with SEND and their families have told us

‘we want’

- To be listened to and have our views valued
- To have the needs of the whole family considered to help families have more choice and control to develop independence and resilience
- Competent and well trained staff with a good understanding of SEND
- Professionals to work collaboratively so that there is one conversation to support the family preventing duplication and fragmentation
- Help to navigate the system
- For children and young people with SEND to have a mentor to discuss how, where and when support should be provided
- Transparency about the range of services and support available and how to access them
- Clarity about accountability and what we can expect services to deliver

Phase 2: Analysis and shaping of emerging themes

Our analysis identified a number of common issues, falling into six overarching strategic themes and priorities and form the basis for this SEND Strategy:

- **Early identification of need ensuring that the right children and young people with SEND are in the right placement with the right support**
- **Building capacity in mainstream settings to reduce reliance on specialist and out of are placement 0-25**
- **Ensuring that Children and Young people are educated in their local community and have an effective preparation for adulthood and access to work/leisure opportunities**
- **Increasing achievement and improving outcomes for all**
- **Ensuring effective collaboration, Co-production and Communication**
- **Achieving Best Value for money across all our services: human, physical and financial**

The SEND Strategic Partnership was established with key partners including parents, health, schools, and other stakeholders. Senior Officers visited a wide range of schools and settings to gather thoughts and ideas from staff and leaders as to ways forward for the future.

Phase 3: Engagement

The Local Authority have organised a number of engagement events to seek views from a wide range of key stakeholders on the vision and priorities

7. Population: some key facts

Darlington is a unitary authority and covers an area of approximately 200 square kilometres. Darlington's current population is 105,396, having risen by over 6% since 2001. Of this population, 39% are of working age (16-64 years old). Within this working age population 79% are economically active (in work or unemployed), 58% of these people work in the Borough and 21% commute out of the Borough to work.

Darlington is in the top 30% most deprived local authorities in England. It is ranked as the 97th most deprived area out of 326 on the index of multiple Deprivation 2015. The level of child poverty is worse than the England average with over 1 in 5 children under 16 years living in poverty. The concentration of children living in low income families is disproportionately evident in certain wards in the Borough. There are health issues in the borough relating to alcohol, smoking and diet resulting in differing life expectancies between electoral wards.

Darlington is an aspiring town with big ambitions for all of its children and young people to have the best start in life (Children and Young People's Plan 2017-2022). This plan supports the vision of creating the local sustainable community strategy 'One Darlington: Perfectly Placed' through building strong communities, growing the economy

and achieving best value from all its resources. (Darlington's Sustainable Community Strategy 2008-2026 revised in 2014)

Darlington and the other four Tees Valley local authorities have collaborated to establish a Tees Valley Combined Authority (TVCA). The TVCA unites the five local authorities on key decisions that affect the Tees Valley, helping to strengthen the area and accelerate economic growth. In almost all indices, Darlington's economy has outperformed regional and national growth trends. Recent trends show an improving picture regarding the skills and productivity of Darlington residents with an increase in employment rate, average earnings, coupled with dramatic reductions in the claimant count and unemployment rate.

SEND facts and Figures – as of August 2018

- There are currently 731 active EHCPs for those SEND pupils who are the responsibility of Darlington Borough Council (as opposed to those EHCP pupils in Darlington Schools) these are broken down as follows – Pre-school 14, Primary 245, Secondary 266 and Post 16 206
- Over the last three years there has been a significant rise IN assessments with

currently 122 new requests to date this year as opposed to 161 for the whole year 2017 and 122 for 2016

- Darlington is above national and regional average for the numbers of EHCP's. The numbers have risen significantly since 2014 from 410 to 731
- The most prominent primary needs are Moderate Learning Difficulties (MLD) and Autism (ASD) followed by Social Emotional and Mental health needs (SEMH) and then Speech, Language and Communication Needs (SLCN)
- In the Early years the primary needs are mostly ASD and MLD in terms of those children with EHCPs. However, current caseloads for the Early Years Service show there is a high proportion of young children coming presenting with communication and interaction as their broad area of need with the majority having a social communication need
- In the primary phase ASD and MLD are the highest areas of need followed by SLCN and SEMH. In the secondary phase the highest need is SEMH particularly in Years 10 and 11 followed by MLD and ASD. However, in the Post 16 phase the number of SEMH pupils decline and ASD and MLD are again the highest need.
- The 2018 SEN2 published data shows that 39.1% of Darlington EHCP pupils

were in a special school. This is 4.3% above the national average. 27% of Darlington EHCP pupils were in mainstream provision (excluding resource bases) and this is well below the national average of 34%.

- There is a high incidence of MLD secondary aged pupils in special school placements of which the moderation of plans against the SEND ranges LA indicate that many of these pupils could be catered for in mainstream provision
- There is a high incidence of SEMH secondary aged pupils in independent placements. Moderation of these pupils' EHCPs suggests a number of these pupils may only be in independent provision due to a lack of suitable local provision
- The numbers of EHCP pupils in independent provision is only 2% of the EHCP cohort but costs are disproportionately high for this group. An increase in numbers is expected
- New assessment requests reflect the current primary need profile of ASD, MLD and SEMH however there has been a spike in SLCN requests and those are generally from Early Years
- There is one secondary Resource Base which supports Social and Communication Difficulties including ASD. There is a significant demand for SEMH

and MLD specialist provision in the secondary phase

- For those Post 16 young people with EHCPs who are engaging in education, over 72% are learning in the college sector, 15% are in special school and just under 6% are in the independent sector
- Darlington has a higher than average persistent absence rate and this includes pupils on SEN support. 48% of the pupils with fixed term exclusions had SEN and the number of days lost because of fixed term exclusions was higher for children with SEN than those without. Half of the SEN students excluded had a primary need of SEMH
- In line with national trends there has been a significant rise in the number of parents electing to educate their children at home

8. The Policy Context



Our priorities for Children with SEND are shaped by the Children's and Families Act 2014 and within that the SEND Code of Practice 0-25 years. The Act sets out the responsibility to improve services, life chances and choices for vulnerable children and to support families. It underpins wider reforms to ensure that all children and young people can succeed, no matter what their background. The Act extends the SEND system from birth to 25, giving children, young people and their parents/carers greater control and choice in decisions and ensuring that their needs are properly met.

The new approach to special educational needs and disability makes provision for:

- children and young people and their families to be at the heart of the system
- close co operation between all the services that support children and their families through joint planning and commissioning of services
- early identification of children and young people with SEN and/or disabilities (SEND)
- a clear and easy to understand local offer

- support provided in mainstream settings where possible for children with more complex needs
- a co ordinated assessment of needs and a new 0-25 Education, Health and Care plan for the first time giving new rights and protection for the 16-25 year olds in further education and training comparable to those in school.
- a clear focus on outcomes and planning for a clear pathway through education into adulthood, including paid employment
- a focus on living independently and participating in their community
- increased choice and opportunity overall and families to be able to express a preference and the offer of a personal budget for those children and young people who have an EHC plan.

The Local Policy context

Darlington's Children and Young People's Plan 2017-2022 – The Best Start in Life covers all services for children, young people and their families. For young people leaving care, responsibility extends beyond the age of 20. For those with learning difficulties it extend to the age of 25 to ensure the transition to adult

services is properly planned and delivered. The plan sets out the following vision:

We will improve the quality of life for all and reduce inequality by ensuring we have:

- **children with the best start in life**
- **more business and more jobs**
- **a safe and caring community**
- **more people caring for our environment**
- **more people active and involved.**
- **Enough support for people when needed**
- **More people healthy and independent**
- **A place designed to thrive**

To do this we will:

- Build strong communities
- Grow the economy
- Spend every pound wisely

We can only achieve our aspirations for the future if we recognise that children and young people are our future. We need to ensure that Darlington is a place where:

- All children and young people are safe from harm

- All children and young people have the tools to do well at all levels of learning and have the relevant skills to be prepared for life
- All children and young people enjoy a healthy life
- All children and young people enjoy growing up
- All children and young people are listened to

The SEND Reforms are an important cornerstone for this work and ensures that the Children and Young People's plan is realised and embedded in all that we do.

This **SEND Strategy** aims to ensure that:

- we have a collective and shared vision and an agreed action plan across all services in partnership with families and their children.
- we have an effective needs analysis evidence base across education, health and care to help us plan and decide how best to use our resources
- we are constantly listening to the views, aspirations and ambitions of children and young people and their parents and carers. We aim to ensure co-production with parent/carers and young people when we develop and commission person centred services

- resources are used where we can measure best value and where they make the biggest difference
- pathways for children and young people and their families are clear, easy to understand and support effective planning in preparation for adulthood
- all our provision – settings and services are of high quality and are accessible across universal, targeted and specialist support.
- we have speedy resolution of problems and disagreements

9. What We Have Achieved So Far – August 2018

Up to date our achievements include:

- Good performance on meeting the 20 week timescale for the completion of Education, Health and Care assessments
- Good working relationships and engagement between the LA and schools/colleges
- Effective training and support with SENCO's, Governors and other stakeholders
- The successful introduction of the SEND Ranges in schools and across settings and services supported by in depth high quality training and support
- Moderation of all EHCP's in all settings against the SEND Ranges which demonstrates excellent practice and commitment
- A review of the panels and an establishment of a vulnerable pupil panel. Panels have clear criteria and remit for operation
- A thorough review of the funding to schools and services which has been shared with schools and a plan/timeline in place for a revised funding formula to be in place next year
- Review of Resource Bases and outreach support services to ensure best value.
- A gap analysis with regards to our SEND data across Education, Health and Care
- Strong partnership working between Education, Health and Social Care with an increasingly effective sharing of information
- Parent/Carer feedback shows that the majority of parents feel that their views were taken into account by Education, Health and Care when their child is identified with SEND
- The quality and consistency of EHCPs is improving
- Joint commissioning statement of intent is in place and joint commissioning priorities are agreed
- Strong partnership with Health in developing a strategy for mental health in schools
- Designated Clinical Officer works closely across the partnership to support services in the identification and provision for of children and young people with SEND and in promoting the SEND agenda.
- Personal Education Plans for children looked after are an area of strength.

- Good Level of Development for SEND children in Early Years is 25% (national 23%), Key Stage 2 progress is strong with pupils with an EHCP and SEN support making better progress than the EHCP cohort nationally. Progress and retention at key Stage 5 is good with positive feedback from students and parents.

DRAFT

10. Our Challenges and Opportunities



We continue to face a number of challenges, many of which reflect the national position:

- Attainment and progress for children and young people with SEND requires improvement in Key Stage 4
- There are a rising number of students with SEMH identified as their primary need
- There are a significant number of children being diagnosed with ASD and this is putting pressure on services. Those with communication and interaction needs are growing fast and our services are not in the right shape to respond
- Our Resource Bases require a new remit and focus alongside effective outreach support provision
- A lack of provision in the secondary phase for pupils with an identified need of SEMH and MLD
- The need for mental health support at universal and targeted level is evident
- Significant rise on the number of EHCPs
- Need to have an increase in employment opportunities and supported employment practice Post 16 and increase access to supported internships and apprenticeships
- Access to personal health budgets
- The increase in demand for specialist placements has meant there is significant pressure on High Needs Block funding

- A rise in the number of parents choosing to electively home educate their children

We can also take advantage of the following opportunities:

- Strong working partnerships across services and with schools and colleges and stakeholders
- Strong commitment to joint working and joint commissioning
- The creation of more local services and reduction in external placements would allow us over time to invest in more preventative and early intervention services for children with SEND
- The SEND Capital Grant presents the opportunity to increase capacity
- The SEND Ranges gives us a good start to hold settings to account and to ensure that the interventions are part of a graduated response with accountability
- A reshaped funding process for SEND in Darlington will give greater accountability for spend with improved consistency of funding across the Borough and savings on out of area placements

11. Our Strategic Priorities for SEND in Darlington (2019-2022) and High Level Action Plans

SEND STRATEGY OBJECTIVE 1

Early identification of need ensuring that the right children and young people are in the right placement with the right support.

What outcomes do we want to see?

- The percentage of children with SEND assessed in Early Years as achieving a Good Level of Development to increase year on year
- Children are better able to engage with the school's curriculum and more likely to reach their full potential at school
- Children and young people with SEND achieve well at every stage of their learning
- There is effective transition from each setting and each key stage
- All agencies working together in partnership to ensure that early identification and assessments have clear synergy
- Clear, accessible and up to date information is available through effective Local Offer and informed staff

Why is this important?

- Parents and carers have told us that it is their most important priority for their

children to get the help and support they need at the earliest opportunity.

- Early identification and intervention is essential to prevent underachievement and improve outcomes and improve children's life chances
- Delay in the above can give rise to further learning difficulties and subsequently to a loss of self-esteem, frustration in learning and possibly to behaviour/ emotional difficulties

Key Priority Actions to achieve our objectives

1. Ensure support and intervention services are fully engaged in delivering the SEND agenda
2. Consideration to be given to developing an Early Years Hub with specialist support to ensure that the LA identifies needs through a multi-disciplinary approach at the earliest stage
3. All schools and settings to embed the SEND Ranges into practice and ensure that provision maps are detailed, costed and demonstrate the impact of interventions and pupil outcomes
4. Ensure the process of identification and assessment of need is effective and statutorily compliant and that effective training is in place across all services

5. Review panel structures to ensure that settings are held effectively to account
6. That all outcomes in EHCPs and Annual Reviews are clear, measurable, achievable and in line with the SEND Ranges
7. Review the designation of all specialist settings (Resource Bases and schools/colleges/work placement and employment) and support services to ensure that children and young people access the right provision with the right support
8. Further develop the positive work with parents, carers and families in ensuring that provision for the most vulnerable groups is of the highest quality
9. Parents, carers, families to receive high quality advice and support from SENDIASS to ensure their needs are being met
10. Review the Local Offer to ensure that it is accessible, easy to manage and to navigate
11. Develop more effective communication between Education, Health and Social Care services so that the right provision is commissioned and there is a joint approach to future planning.

SEND STRATEGY OBJECTIVE 2

Building capacity in mainstream and specialist settings to reduce reliance on specialist out of area placements 0-25

What outcomes do we want to see?

- Most children with EHCPs attend and achieve well in high quality local provision and are able to remain with their families in their local communities
- Children remain in contact with local services, as a result of remaining within local provision and so have continuity of support.
- There is an enhanced range of local specialist provision and reduced reliance on external specialist placements
- Reduced costs on out of area placements so that these monies can be more effectively utilised developing local high quality provision

Why is this important?

- Children and their families tell us that they want high quality local services and choice
- Children and young people with SEND need to have good quality support in their mainstream and local settings so that they can achieve their academic

potential and maintain their self-esteem and confidence

- Children and young people with SEND tell us that they want to make friends locally and access local facilities with their families

Key Priority Actions to achieve this objective

1. Ensure through joint commissioning intentions that Resource Bases meet the growing complexity and increasing numbers of children and young people presenting with communication and interaction, social emotional and mental health, cognition and learning needs with a strong multi-disciplinary therapeutic input from Early Years through to Post 16/Post 19
2. Put in place an effective workforce reform strategy that will include training, mentoring, coaching and an action research programme highlighting the sharing of best practice
3. Review, further develop and effectively co-ordinate outreach services from specialist and multi-disciplinary settings to support mainstream provision 0-25
4. All settings have targets and expectations that effective inclusion and equality permeates throughout the organisation

SEND STRATEGY OBJECTIVE 3

Ensuring that children and young people with SEND are educated in their own local community and have an effective preparation for adulthood including access to appropriate work, training and leisure opportunities.

What outcomes do we want to see?

- Not in Education, Employment or Training (NEET) figures for pupils with SEND are at a minimum
- The percentage of children and young people with EHC plans who are being educated in mainstream settings as opposed to specialist provision to increase
- Parents report increasing confidence in the ability of mainstream schools/colleges/work based training providers to meet their child's needs
- Provision available to all young people with SEND aged 16-25 to access purposeful activities (including education, work experience, supported employment, supported internships, apprenticeships, training including voluntary and community projects)
- All young people with SEND have a clear destination pathway and that are able to make appropriate progress, whatever their starting point

- All young people have access to work related learning activities, as appropriate to their level of ability, to enable them to work towards paid employment wherever possible
- Through partnership working and joint commissioning arrangements for Post 16 SEND services are delivered in a co-ordinated and personalised way

Why is this important?

- Improved sense of worth and value for each young person
- Gives a clear pathway of opportunities and choice
- Enables greater independence and sense of contributing to our local community

Key Priority Actions to achieve this objective

1. Establish a clear pathway and effective transition arrangements 0-25 for all children and young people with SEND
2. Develop a wide range of opportunities and choice focusing on work, suitable employment and leisure activities
3. Ensure that children and young people with SEND have opportunities to engage in independent travel training and access support for independent living

4. That schools and specialist settings have a curriculum that prepares young people for the world of work and making effective contributions to their community
5. Close partnerships with work based training providers and employers to support their capacity to utilise the skills of young people with SEND

SEND STRATEGIC OBJECTIVE 4

Increasing achievement and improving all outcomes for children and young people with SEND

What outcomes do we want to see?

- Increase attainment and achievement across all Key Stages
- All children and young people with SEND make at least good progress relative to their starting points
- The overall gap between attainment of children and young people with SEND and all children to reduce
- The number of children with SEND being excluded from school to reduce
- Good attendance of children and young people with SEND
- Children and young people with SEND to make clear, evidence based progress against their EHC Plan outcomes

The following outcomes that form the focus of this objective are written from the young person's perspective are:

- I have information about my health provision clearly explained to me
- I am learning how to manage my own health and well being
- I feel I am involved in planning and decision making about my health
- I have effective support networks with friends and family and in my school/college
- My care is co-ordinated and connected so people understand my needs and jointly meet them so that I don't have to keep telling my story.

Why is this important?

- All children and young people with SEND will be able to achieve their full potential

Key Priority Actions to achieve this objective

1. Address the underperformance in educational achievement across the Key Stages but particularly at Key Stage 4 through targeted interventions, appropriate curriculum, high quality training and effective quality assurance, monitoring and moderation

2. Implement and embed a quality assurance framework across the LA to ensure that all EHCPs are of high quality
3. Ensure that all settings have high quality first teaching
4. Embed the SEND Ranges to ensure that all settings have an effective graduated response
5. Encourage schools to share best practice

SEND STRATEGY OBJECTIVE 5

Collaboration, Co-Production and Communication

What outcomes do we want to see?

- Transparency of all decision making
- Agreed common approaches
- A whole organisation/area approach where we all feel part of a team delivering the SEND Strategy

Why is this important?

- We want everyone to have 'trust' in all that we do
- We want all, but particularly parents, carers and young people to have confidence and respect in our future going forward together

Key Priority Actions to achieve this objective

1. Develop a communications policy in order to analyse and implement actions required to ensure that there is effective communication between all partners, parents, carers and young people
2. Ensure that all partners are aware of best proactive and supporting each other in understanding different views, priorities, skills and talents
3. Ensuring that the pupil and young people's voice is heard at all level.
4. Ensuring that all policies, practices are co-produced with all stakeholders and with the active involvement of the parent/carer forums and the children and young people
5. Demonstrate commitment at all levels to collaboration in partnership with parents, carers and families
6. Review the effectiveness and impact of the Local Offer and make change as appropriate
7. Hold schools and settings to account when the pupil and parent voice is not evidence in the assessment and review process
8. Provide on-going training and support to schools and other stakeholders in promoting pupil and parent engagement.

9. Young leaders and Parent/Carer groups to collaborate to produce a charter on excellence in co-production

SEND STRATEGY OBJECTIVE 6

Achieving Best Value for money from all our services – human, physical and financial resources with clear agreed commissioning intentions

What outcomes do we want to see?

- Effective, efficient and co-ordinated services that meet the needs of children and young people with SEND and their families

Why is this important?

- The High Needs Budget is finite
- We must ensure best value from the public purse
- With the increased numbers of children and young people coming through with significant needs we must ensure that the right resources are going to the right children in the right place

Key Priority Actions to achieve this objective

1. Joint Commissioning to provide increased targeted capacity for SEND within the Borough under the agreed commissioning intentions

2. Opportunity to pool budgets
3. Implement a new funding arrangement for SEND support in schools
4. Allocate the SEND Capital Grant in line with the SEND Strategy
5. Embed the SEND Ranges to ensure funding allocation for individual pupils in needs led

12. What Will Success for Children and Young People with SEND Look Like in 2021



The strategy will be deemed successful if:

- There are clear processes to identify children's needs early and partners communicate and co-ordinate services well
- We rely less on statutory assessment of children's special education needs and more on getting the right level of support when it is needed
- Reviews are thorough and lead to improvements in outcomes for the child or young person
- Children and young people with SEND can take part fully in all aspects of education, community, leisure and fun activities
- We meet children and young people's needs in mainstream settings wherever possible and when more specialist help is needed we are able to provide this in Darlington.
- We use appropriate evidence based interventions so all children and young people with SEND make good progress with their learning, achievements and social and emotional development over time.
- There is a well co-ordinated transition for children and young people at all key points
- Children and young people with SEND have high aspirations and we support them to be independent and well prepared for adult life
- We know that provision is improving outcomes; that aspirational yet realistic targets are agreed and progress towards them monitored; and that children and young people with SEND, and their parents and career have been involved in setting and reviewing goals and outcomes
- The Local Offer is informative and accessible
- Our SEND provision forms part of a clear continuous high quality pathway where children and young people can access the right support and determine their destinations
- Children and young people with SEND and their families tell us that they are satisfied with services and that their needs have been met appropriately
- Our workforce have the right skills and competencies to meet the needs of children and young people with SEND
- There are strong multi-disciplinary partnerships in place which have mutual trust and respect and where communication is truly effective and decision making transparent

13. Taking the SEND Review Strategy Forward - Governance, Monitoring and Review

The delivery of our SEND Strategy is not the responsibility of a single agency or person. It is a partnership approach with collection accountability and collective responsibility owned by all stakeholders working with children, young people and their families. These include Health, Education, Social Care, work based training providers, employers, voluntary and community organisations and those responsible for the development of leisure and social activities.

Governance for the strategy will be provided by the Darlington Health and Wellbeing Board and the SEND Steering Group. The SEND Steering Group will provide the strategic drive, co-ordination and oversight by receiving regular performance and outcome indicator reports on progress against objectives.

The Health and Wellbeing Board will be responsible for ensuring that the SEND issues are embedded effectively throughout the relevant plans and in the delivery of the Health and Wellbeing Strategy.

This page is intentionally left blank

SPECIAL EDUCATIONAL NEEDS HOME TO SCHOOL TRANSPORT

SUMMARY REPORT

Purpose of the Report

1. To provide Scrutiny with a summary of plans to consult on the introduction of a SEND (Special Educational Needs and Disability) Travel Assistance Policy.

Summary

2. Following Cabinet approval to commence consultation on the introduction of a Travel Assistance Policy to provide the opportunity to offer a more flexible range of travel options to families.
3. The policy will ensure that children and young people with SEND do not miss out on the opportunity to develop independent travel skills. Independent travel skills gained in adolescence can be carried forward into adult life.

Recommendation

4. It is recommended that :-
 - (a) Scrutiny be aware of the forthcoming consultation on the Travel Assistance Policy.
 - (b) Scrutiny consider and respond to the proposals outlined in the consultation.

Reasons

5. The recommendation is supported by the following reasons:
 - (a) The policy requires amendment to give pupils with SEND opportunity to acquire independent travel skills and to give families greater flexibility to support their children to travel to school. This is centred upon providing assistance where appropriate to help people help themselves; it is about promoting independence.
 - (b) To enable the proposed Travel Assistance Policy to be further considered prior to decisions being made on the changes being proposed.

Suzanne Joyner
Director of Children and Adults Services

Tony Murphy
 ext: 5637

Background Papers

No background papers were used in the preparation of this report.

S17 Crime and Disorder	This report has no implications for Crime and Disorder
Health and Well Being	The Travel Assistance Policy will contribute to improved outcomes for children and young people with special educational needs and/or a disability in the borough.
Carbon Impact	There are no issues which this report needs to address.
Diversity	The Travel Assistance Policy will contribute to improved outcomes for children and young people with special educational needs and/or a disability in the borough
Wards Affected	Children and young people with SEND may live in any ward.
Groups Affected	Children and young people with special educational needs and/or disabilities
Budget and Policy Framework	This report does not represent a change to the budget and policy framework.
Key Decision	This is a key decision
Urgent Decision	Yes, so as not to delay start of consultation and meet various timescales.
One Darlington: Perfectly Placed	The report contributes to the Sustainable Community Strategy Priority 'the best start in life'.
Efficiency	There are no direct efficiencies to the Council from the information contained within this report.
Impact on Looked After Children and Care Leavers	The Travel Assistance Policy will contribute to improved outcomes for children and young people with special educational needs and/or a disability in the borough a number of these children are Looked After Children or Care Leavers.

MAIN REPORT

Information and Analysis

6. Darlington Borough Council has a statutory responsibility to assist eligible children and young people of statutory school age to travel to school. Transport assistance is currently allocated at the point a pupil become in receipt of an Education, Health and Care Plan (EHCP). The mode of travel assistance is commonly in the form of door to door minibus or taxi.
7. The current Home to School Transport policy does not adequately address the needs of pupils with SEND. Once transport support is allocated it usually remains in place until the end of the young person's schooling.
8. There are two key consequences of current practice. Firstly, children and young people who have the potential to travel independently are not given the opportunity to do so and thereby are not equipped with the necessary skills to independently access their community and the workplace in adulthood. Secondly, over-provision has resulted in a significant projected overspend on the Council's Home to School Transport budget.

Proposals

9. The key principles of the proposed new policy are outlined below.
 - (a) PROPOSAL ONE (Definition of Education Travel Assistance)
 - (i) It is proposed that the name of the Home to School Transport Policy for pupils with SEN be amended to 'Education Travel Assistance Policy'. The name change reflects the fact that travel assistance can be provided in a variety of ways, not just through the provision of 'transport' e.g. a bus or a taxi.
 - (b) PROPOSAL TWO (To formalise the annual application and review process)
 - (i) Currently travel assistance arrangements for children and young people are assessed and determined at the time they start at a new education setting. This means, for example, that a young person starting in Year 7 may have their travel assistance arrangements rolled forward until they finish in Year 11.
 - (ii) This approach does not always take account of the personal development of individual children and young people, opportunities to promote independence and any changing individual or family circumstances e.g. medical needs.
 - (iii) In allocating SEN home to school travel assistance, the approach of offering the least restrictive option is key to supporting independence and the best way of achieving this will be an annual review process. This

approach will also ensure that any important information in relation to health needs, medication and emergency contact details is kept up to-date. In the majority of cases where there has been no substantial change in circumstances, existing arrangements will carry forward but the process will facilitate more effective scrutiny and review of individual travel assistance arrangements. It will also enable families, currently in receipt of 'transport' to consider more flexible arrangements through a cash allowance or Direct Payment.

- (iv) It is therefore proposed that transport assistance is reviewed on an annual basis with effect from the September following implementation of this policy. The Admissions and Transport Service will review all new applications and any other existing arrangements which have been identified for changes in circumstances or requiring a review.

(c) PROPOSAL THREE (Personal travel assistance budget and cash allowance)

- (i) Where a child or young person is eligible, care will be taken to ensure that travel assistance is provided in the most appropriate and least restrictive way possible. In the case of high volume routes, shared transport arrangements are likely to continue to be the most cost effective and sustainable solution under most circumstances. However, in the case of solo or ad-hoc arrangements a cash allowance or direct payment in the form of a Personal Travel Assistance Budget may provide greater flexibility for families and carers to make their own arrangements.
- (ii) This would mean that every new application for travel would be considered for a cash allowance or, in cases of complex or exceptional needs, a direct payment in the form of a Personal Travel Assistance Budget. Other direct support may also be considered. Such support may be provided in the form of a travel pass for public transport, mileage allowance for parent/carer or shared transport

(d) PROPOSAL FOUR (Circumstances when travel assistance is not provided)

- (i) Where a parent has requested an out of area placement for a pupil with an Education Health and Care Plan (EHCP) and the Council considers there is a nearer suitable placement which can meet the child's needs it is proposed that travel assistance will not be provided.

(e) PROPOSAL FIVE (Independent Travel Training)

- (i) Travel training gives people with special educational needs or disabilities the confidence and skills to travel on buses and trains. Help can also be provided for walking routes. Being able to travel on public transport is a key life skill. It lets you make choices about how you live, go about your daily life and fulfil your potential. Training can be individually tailored to the needs of the young person and include aspects like:
 - a) Confidence in using buses or trains

- b) Personal safety
 - c) How to use timetables and buy tickets
 - d) Road safety, including how to cope with traffic on major roads
 - e) What to do when things go wrong (e.g. the bus is late) and
 - f) Money skills
- (ii) Darlington Council has recruited through external grant funding a travel trainer to support young people to access independent travel where families and carers consider this to be appropriate to their needs.
- (iii) It is recognised that it will be important to work with parent/carers and education settings to identify suitable young people for travel training and to work within the young person's time frame.

Consultation

10. It is proposed to consult on the proposed changes from the 10 October to 21 November 2018 and then bring the matter back to Cabinet in February 2019.

This page is intentionally left blank

SEND Travel Assistance Policy

Introduction

1. Darlington Borough Council recognises the pressures faced by the parents of children with Special Educational Needs and undertakes to provide statutory transport services in accordance with the Department for Education Guidance on Home to School Travel.
2. This Policy has been written with the intention of removing ambiguity and reassuring parents that they will receive the services to which they are entitled. The Policy also aims to clarify eligibility, when and how transport may be provided, and what to do if parents do not agree with an outcome.

Scope

3. Children with an Education Health & Care Plan (EHCP), medical needs or disabilities.
4. Children aged 5-16 without a Education Care & Health Plan (EHCP) and with medical needs or disabilities.
5. Please note that whilst there is no statutory entitlement to travel assistance for children under 5, this Policy takes statutory school age to include those children who have taken up the legal right to start schooling from the start of term after a child's fourth birthday.

Core principles

6. Darlington Borough Council is committed to ensuring that each child can fulfil their potential and is supported to do so. The aim of this policy is to support all children with Special Education Needs (SEN) to lead lives which are as independent as possible. Where possible, children will be supported to achieve greater independence through the development of independent travel skills and the use of public transport. The Council will work closely with parents and schools and expects all parties to play a supportive role in the development of this key life skill.
7. The Council promotes sustainable modes of travel such as walking, cycling and use of integrated public transport and aims to reduce traffic congestion, the environmental impact of vehicle journeys and improve road safety. Where agreed, travel assistance for 'eligible children', will be provided in a safe manner that will take into account: the Council's statutory duties, the specific needs of the child, the legally recognised walking distances and appropriate use of its resources. Travel solutions provided will support initiatives that lead to reducing the volume and length of vehicle journeys.

8. The legal responsibility for ensuring that a child attends school lies with the parent or carer and this includes accompanying a child to school where necessary. In the event that parents are working or otherwise unavailable at the time their child travels to and from school it remains the parents' responsibility to make arrangements to ensure that their child attends school.
9. If both of the child's parents are, by reason of disability unable to ensure that their child attends school, or are unable to make suitable alternative arrangements, eligibility for travel assistance for the pupil will be considered on the individual circumstances, with regard to the Equality Act 2010.
10. The Council takes statutory school age to include those children who have taken up the legal right to start schooling from the start of term after a child's fourth birthday. Compulsory school age ceases on the last Friday in June in the school year in which the child reaches the age of 16.
11. Under the Education Act 1996 and the Education and Inspections Act 2006, local authorities have a duty to provide assistance with travel to and from qualifying schools/college for children aged 5-16 in certain circumstances. The Council has no duty to provide transport but 'shall make such arrangements for the provision of transport and otherwise as they consider necessary'. This gives the Council discretion to provide travel assistance. A duty only arises if transport is referred to on a child's EHCP or the Council requires a child to attend a school which is not within the DfE walking distance of the child's home.

Eligibility

12. Some children with SEN may experience problems with mobility or have other needs such that they are unable to access public transport safely. This policy is intended to provide clarity regarding eligibility for travel assistance.
13. The Council will assist parents with travel assistance in accordance with its statutory duties where children have significant SEN, a disability or mobility restrictions such that travel assistance is essential to access their specialist provision.
14. Having an EHCP does not mean that a pupil is automatically eligible for education travel assistance. Eligibility is assessed based on the individual needs of the pupil (taking into account their age and mobility).
15. In assessing any application for travel assistance, eligibility will be based on the needs of the eligible child, accompanied as necessary by a parent

and will not normally take into account work or other family commitments such as the attendance of siblings at different schools.

16. No dispensation can be made for personal domestic arrangements or parents who are working at the time their children travel to and from school. Parents are expected to make full use of the separate legislation introduced to ensure flexibility for working parents or utilise the support of others to accompany their children as necessary.
17. Support services (such as pre and after school clubs at some schools) may be available to families to manage the conflicting priorities of their domestic arrangements. It is expected that parents will have explored alternative support services to assist them in meeting any conflicting priorities that may arise.
18. All decisions will be based upon clear medical / specialist advice and evidence of need for the eligible child only. Eligibility criteria will be kept under review and subject to legislative change; consultation with user groups from time to time and as services are developed.

Travel Assistance for Pupils with an Education, Health and Care Plan (EHCP)

19. Transport assistance will be provided where the pupil has an EHCP plan and;
 - a. has been assessed as requiring transport assistance to access their specialist provision and / or;
 - b. the Council has determined and named the special provision in the EHCP as being the nearest available special provision that is able to meet the child's needs and / or;
 - c. the child's health needs are such that upon written medical advice, (date within the last twelve months) travel assistance is necessary to access their specialist provision
20. Travel assistance can only be provided at the beginning and end of the normal school day, and only to the special provision named on the EHCP.
21. Where a child's health needs are such that upon written medical advice, (date within the last twelve months), the pupil is unable to attend the standard school day, consideration will be given to providing assistance outside of the standard school day. It is expected that parents will support the facilitation of these additional journeys as necessary.

School Travel Assistance Options

22. Options that may be offered where travel assistance is agreed include:

- a. Reimbursement of agreed public transport costs, (where concessional fares or free transport appropriate for the age and disability of the young person is not available)
 - b. Supported travel training and use of public transport
 - c. Payment of a personal budget at the Council's standard rates for parents to transport their children to the special school
 - d. Travel assistance via the Council's contracted transport providers with or without a passenger assistant. This may be on a shared basis and from a designated collection point which may or may not be the home address.
23. Darlington Borough Council supports the development of Children's travel skills and confidence to make journeys safely on their own. Darlington Borough Council currently offers an Independent Travel Training Programme in partnership with schools and parents to train and support some young people (for whom this could be a viable option) to access public transport and travel independently.
24. Assistance will be provided for as long as the child's needs are such that given all the circumstances they continue to require travel assistance to access their specialist provision. All transport assistance will be regularly reviewed and at least annually.

Circumstances when Travel Assistance is not provided

25. Please be aware that, in accordance with national guidelines, travel assistance is not provided in the following situations:
- a. Where parents choose a school which is not the nearest suitable provision which the Council considers to be appropriate to meet the needs of the child or young person
 - b. In the event a child has to be taken to or from school outside of their normal school attendance times due to illness, any type of appointments including Doctors or any other specialists, interviews, assessment days, exclusion or for any other reason
 - c. Amended timetables due to behavior or suspension issues arising or a later collection following any form of detention or attendance at out of school time clubs
 - d. Attendance at school outside of the published School Term Timetable and daily timetable regardless of whether the pupil is travelling on their own
 - e. Parental attendance at annual reviews, meetings or any school events
 - f. Transport to and from work placements or any off site provision
26. It is the responsibility of the School to organise and provide pupil's transport for curriculum activities including examinations, during the school day. In these cases travel assistance will be provided at the beginning and end of the normal school times only.

Passenger Assistants

27. Following an assessment of need passenger assistants are provided where applicable. Any exceptional requirements will be based on evidenced need and discussions with schools and parents.
28. Where it would be unsafe for a child to travel without one, a passenger assistant will be considered subject to written medical / professional advice dated within the last twelve months. This is usually where a child exhibits severe challenging behavior or where the child has a severe or complex medical condition requiring continuous support.
29. Where a passenger assistant is necessary for complex health reasons, the Local Authority will work with health services to secure the appropriately qualified carer for transport purposes.
30. Parents or their nominees may be expected to accompany their child and undertake the role of passenger assistant where the pupil is the sole pupil attending a specific provision.
31. For all residential school placements parents will be expected to undertake the role of passenger assistant if necessary.

Young People Aged 16 - 19 with Special Educational Needs

32. Most pupils of this age would be expected to use public transport and travel independently in view of the beneficial effects of developing the pupil's life skills.
33. The Council accepts that for a small minority this may not be possible. Applications will be considered against the following criteria and the eligibility criteria outlined above:
 - a. The student is aged between 16 and 19 and is on a course of further education at a school or designated further education college recognised by the Department of Education
 - b. The course is deemed to be suitable and will provide an educational benefit to the student - as assessed by the student's transition worker/ adult placement officer, nominated by the local authority
 - c. Where the need and reasons for specific travel assistance has been identified / evidenced in the student's Education Health and Care Plan (EHCP) or Transition Plan

Students over the age of 19 with SEN attending Further Education Colleges

34. There is no duty for local authorities to provide travel assistance to students over the age of 19 except where they are completing a course that they have already started before their 19th birth date.

Travel Assistance Reviews

35. All children and young people's eligibility for travel assistance will be regularly reviewed and at least annually. In most circumstances the review will take place at the child or young person's school and parents/carers must attend the review in order for travel assistance to continue. Non-attendance may result in travel assistance being ceased.
36. Travel assistance will also be reviewed at Key Stage reviews and when there is a significant change in circumstances, such as a change in home address or a change in the child or young person's needs. It is the responsibility of the parent/carer to notify the Council immediately of any changes that may affect the provision of travel assistance.
37. Any changes will be implemented from the beginning of the next school term, or sooner by mutual agreement following the completion of the assessment stage.

Cessation of Support

38. The Council may review and remove travel assistance from students where it is established that details within the application were inaccurate or where the child or young person's individual circumstances have changed. Confirmation of the reason for any change would be made in writing. Transport assistance may also cease at the written request of the parent who may have made alternative arrangements for their child or young person's travel to school.

Appeals

39. There may be instances where some applications are declined or where a needs assessment has led to a change to support and parents may not agree with the Council's decision. In these cases the Council offers parents a formal 2 stage appeal process.
40. Please note that parents are responsible for ensuring their child's attendance at school during any appeal period.

Complaints

41. Darlington Borough Council welcomes and responds positively to all comments, compliments and complaints as a means of demonstrating its commitment to working in partnership with all stakeholders.
42. The complaints process is comprised of three stages after which the complainant should be advised to refer the matter to the Local Government Ombudsman.

43. Although complainants can refer their complaints from the outset, or at any stage, to the Local Government Ombudsman, they will not normally be investigated until the Council has conducted its own investigation and made a response.
44. A copy of the Complaints Procedure is available on request and further information is available from the Darlington Borough Council Intranet.

This page is intentionally left blank

**CHILDREN AND YOUNG PEOPLE SCRUTINY COMMITTEE
29 OCTOBER 2018**

ITEM NO.**9**.....

WORK PROGRAMME

SUMMARY REPORT

Purpose of the Report

1. To consider the draft work programme for this Scrutiny Committee for the Municipal Year 2018/19.

Summary

2. The proposed work programme has been reviewed and revised for the Municipal Year 2018/19 and Members are requested to consider the attached draft programme.

Recommendation

3. Members' views are requested.

**Paul Wildsmith
Managing Director**

Background Papers

No background papers were used in the preparation of this report.

Author: Allison Hill Extension 5997

S17 Crime and Disorder	This report has no implications for Crime and Disorder
Health and Well Being	This report has no direct implications to the Health and Well Being of residents of Darlington.
Carbon Impact	There are no issues which this report needs to address.
Diversity	There are no issues relating to diversity which this report needs to address
Wards Affected	The impact of the report on any individual Ward is considered to be minimal.
Groups Affected	The impact of the report on any individual Group is considered to be minimal.
Budget and Policy Framework	This report does not represent a change to the budget and policy framework.
Key Decision	This is not a key decision.
Urgent Decision	This is not an urgent decision
One Darlington: Perfectly Placed	The report contributes to the Sustainable Community Strategy in a number of ways through the involvement of Members in contributing to the delivery of the eight outcomes.
Efficiency	The Work Programmes are integral to scrutinising and monitoring services efficiently (and effectively), however this report does not identify specific efficiency savings.
Impact on Looked After Children and Care Leavers	This report has no impact on Looked After Children or Care Leavers.

MAIN REPORT

Information and Analysis

1. The format of the proposed work programme has been reviewed to enable Members of this Scrutiny Committee to provide a rigorous and informed challenge to the areas for discussion. **Appendix 1**
2. Each topic has been reviewed to link it to the outcomes and the conditions in the Sustainable Community Strategy – One Darlington Perfectly Placed:-

SCS Outcomes:

- a) Children with the best start in life
- b) More businesses more jobs
- c) A safe and caring community
- d) More people caring for our environment
- e) More people active and involved
- f) Enough support for people when needed
- g) More people healthy and independent
- h) A place designed to thrive

Three Conditions:

- a) Build strong communities
- b) Grow the economy
- c) Spend every pound wisely

3. In addition, each topic has been linked to performance indicators from the Performance Management Framework (PMF) to provide robust and accurate data for Members to use when considering topics and the work they wish to undertake. There are some topics where appropriate PMF indicators have not yet been identified however; these can be added as the work programme for each topic is developed.
4. The topics have been grouped into two sections as follows:
 - a) Overarching e.g. Performance Management
 - b) Children and Young People

This page is intentionally left blank

CHILDREN AND YOUNG PEOPLE SCRUTINY WORK PROGRAMME

2018/19

Topic	Timescale	Lead Officer	SCS Outcome	Darlington Conditions	Link to PMF (metrics)	Scrutiny's Role
Performance Management and Regulation	Q1 10 September 2018	Sharon Raine	Children with the best start in life	Build strong communities	Agreed set of indicators	To receive quarterly monitoring reports and undertake any further detailed work into particular outcomes if necessary
	Q2 10 December 2018		A safe and caring community	Spend every pound wisely		
	Q3 11 March 2019		Enough support for people when needed			
	Q4 June/July 2019		More people healthy and independent			
Children and Young People Public Health Overview 2019	September 2019	Ken Ross/Rachel Osbaldeston	Children with the best start in life A safe and caring community Enough support for people when needed More people healthy and independent	Build strong communities	PBH 009 PBH 013c PBH 016 PBH 018 PBH 020 PBH 021 PBH 054	Annual monitoring - Children and Young People's Profile 2018, Healthy Lifestyle Survey 2017, Childhood Healthy Weight Action Plan 2017-2022 and Oral Health Plan 2017-2022

Topic	Timescale	Lead Officer	SCS Outcome	Darlington Conditions	Link to PMF (metrics)	Scrutiny's Role
Recording practices for statutory visits for Child Protection Cases	27 June 2016 Continual monitoring	Jane Kochanowski	Children with the best start in life A safe and caring community Enough support for people when needed	Build strong communities	CSC 252	To examine recording practices
Extension of Funding to 21 for Children in Foster Care	11 March 2019	Jane Kochanowski	Children with the best start in life A safe and caring community Enough support for people when needed More people healthy and independent	Build strong communities		Annual monitoring – a duty on Local Authorities to facilitate, monitor and support staying put arrangements
2018/19 Childcare Sufficiency Review	10 December 2018	Tony Murphy	Children with the best start in life A safe and caring community	Build strong communities		To provide an annual report to elected Members on how the authority meets its duty to secure sufficient childcare places.

Topic	Timescale	Lead Officer	SCS Outcome	Darlington Conditions	Link to PMF (metrics)	Scrutiny's Role
			Enough support for people when needed			
Stability of Places for Looked After Children	10 December 2018	Joanne Stoddart	Children with the best start in life Enough support for people when needed	Build strong communities	CSC 228 CSC 229	To monitor annually the stability of places for Looked After Children.
Services for Families with children with disabilities 0-3 years Review Group	Review of the service. Date to be arranged.	Kevin Kelly/Yvonne Coates	Children with the best start in life Enough support for people when needed	Build strong communities		Following the recommendation of the Review Group to review the service after 6 months and meet again with professionals, families and stakeholders.
Annual Report of the Local Safeguarding Children Board	29 October 2018	Amanda Hugill/ Simon Hart, Independent Chair		Build strong communities	LSB Annual Report	Annual monitoring
IRO Annual Report	September 2019	Martin Graham	Children with the best start in life		CSC201	To examine the Annual Report of the Independent Reviewing Officer for Looked After Children

Topic	Timescale	Lead Officer	SCS Outcome	Darlington Conditions	Link to PMF (metrics)	Scrutiny's Role
Designated Officer Annual Report	September 2019	Amanda Hugill Carol Glasper				To examine the Annual Report and assure Members that allegations made against staff who work with children are reported and how they are actioned
Children and Young People Plan 2017-22	29 October 2018	Christine Shields	Children with the best start in life			Half yearly update to Members.
SEND High Needs Review: Strategy and Funding Home to School Transport	29 October 2018 29 October 2018	Tony Murphy	Children with the best start in life More People healthy and independent Enough support for people when needed			To give Scrutiny Members the opportunity to consider 3 of the 4 core elements of the Review
Children Services Accessibility Strategy	10 December 2018					To give Scrutiny Members the opportunity to consider the Strategy prior to Cabinet.

JOINT REVIEW WITH HEALTH AND PARTNERSHIPS SCRUTINY:

Topic	Timescale	Lead Officer	SCS Outcome	Darlington Conditions	Link to PMF (metrics)	Scrutiny's Role
<p>Childhood Obesity/ Oral Health/Mental Health Links</p>	<p>November 2017 – February 2018</p> <p>Scoping meeting held on 27 November 2017</p> <p>2nd Meeting held on 31 January 2018</p>		<p>Children with the best start in life</p> <p>Enough support for people when needed</p> <p>More People Healthy and Independent</p>	<p>Build strong communities</p>		<p>To investigate the high incidence of childhood obesity in Darlington and the associated links to poor dental health; and whether the desire to promote good 'self image' has an impact on mental health issues in young people.</p>

ARCHIVED ITEMS

Early Help Service	7 November 2016 9 January 2017 19 June 2017	Jane Kochanowski	Children with the best start in life Enough support for people when needed	Build strong communities	CSC001 CSC022 CSC038	To receive regular reports on the progress towards aligning all Early Help Services into one single service in line with MTFP target.
Youth Unemployment	30 October 2017	Paul Richardson	Enough support for people when needed			To examine youth unemployment in Darlington
SEND Inclusion Strategy	4 September 2017 30 October 2017	Christine Shields/ Helen Ellison	Children with the best start in life More people healthy and independent Enough support for people when needed	Build strong communities		To consult with Scrutiny on the draft Strategy prior to Cabinet approval
Workforce Sufficiency, Skills, Recruitment and Retention	12 September 2016	Yvonne Coates/Paige Thomason/Corina Dias)	Children with the best start in life A safe and caring community	Build strong communities		To examine social work caseloads, workforce recruitment and retention and

	30 October 2017		Enough support for people when needed			pressures on social workers
Children and Young People's Plan 2017/22	10 April 2017 (draft plan) 4 September 2017	Christine Shields/Rosie Banks	Children with the best start in life Enough support for people when needed			To consult with Scrutiny prior to consideration by Cabinet
Sustainability and Transformation Plan (Maternity Services)	19 June 2017	CCG	Children with the best start in life More people healthy and independent			To challenge the CCG on the impact to children and young people in Darlington of the STP (maternity services and services for forces families)
LAC Missing from Care – Reasons and Interventions	16 April 2018 10 September 2018	Joanne Stoddart	Children with the best start in life Enough support for people when needed		CSC246	To examine the reasons why children in care go missing and the interventions in place to avoid. To invite the Police Liaison Officer to attend Scrutiny to discuss

						Update information regarding Missing Episodes following the report to the meeting in April
Educational Landscape	Archived on 3 Oct 2018	Tony Murphy	Children with the best start in life	Build Strong Communities	CSC 044 Basket of LAIT KS1, KS2, GCSE & A Level indicators. Local Authority Interactive Tool (LAIT) academic year 2014/15/ Ofsted Sept 2014/ Department for Education (DFE) performance data	To examine school improvement including the decline in performance for maths and English and what action is being taking to address this.